

FERTILITY

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MAIN FINDINGS

- » The number of live births has been stagnating at a very low level in Hungary over the last years and has not come close to its pre-2008 values. The higher number of live births compared to previous years observed over a few months in 2014 (so far) did not represent a major turning point.
- » Since the number of women of childbearing age is declining rapidly, total fertility rate – the most important indicator of fertility – could increase (it reached 1.4 in 2014) even without a substantial rise in the number of live births.
- » Fertility has declined in a number of European countries over recent years therefore the relative position of Hungary has improved. Regarding total fertility rate, Hungary ranks 21st in the EU28, according to preliminary estimates for 2014.
- » The tempo of fertility postponement has decreased substantially over the last years (and it disappeared in the case of first births). The slowly increasing fertility rates however suggest that only a partial recuperation can be expected in childbearing.
- » Propensity to childbearing is often related to the level of education: mothers with higher education tend to have fewer children. This relationship is less straightforward now and it is valid only with some limitations in Hungary. While there is a clear difference between the childbearing propensity of women with vocational and those with secondary education, it is more or less the same for tertiary education graduates and those with secondary education.
- » The share of out-of-wedlock childbearing was just under 48% in 2012; marital childbearing remained dominant only among female tertiary education graduates. Since 2012 the majority of first-born children have been born out of wedlock in Hungary, therefore becoming a parent is no longer associated with being married.
- » The increase in out-of-wedlock childbearing can be attributed primarily to the proliferation of childbearing in cohabitation. The childbearing of single women has largely remained unchanged since 1990 and represents just over a tenth of total births.

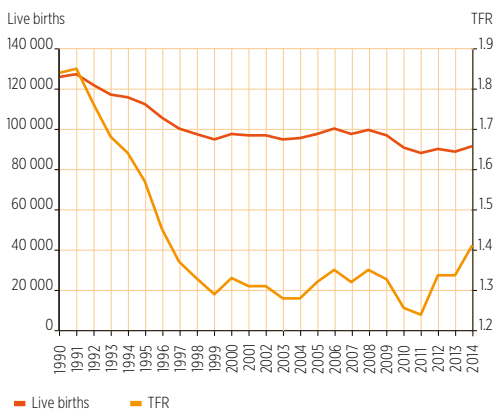
- » Values related to family and children have also undergone some transformation; however these transformations are not radical and to a large extent they do not precede but rather “follow” changes that have already happened in childbearing.
- » The increasing emigration over recent years primarily affects the cohorts of childbearing age. Some initial data suggest that Hungarian fertility indicators can be substantially affected by the childbearing behaviour of the migrant population outside Hungary.

CHANGES IN CHILDBEARING PROPENSITY IN SPACE AND OVER TIME

In 2014 91,500 children were born in Hungary. This number can still be considered very low, however it represents the highest value of the past five years.

The following phases can be distinguished in the development of live births after the change of regime. The number of live births steadily fell from 127 thousand in 1991 to 95 thousand in 1999. After this, it stagnated between 95 and 100 thousand for a decade. In 2008 it still exceeded 99,000; however it rapidly dropped to around 90 thousand in the next two years. Since 2010 it has been stagnating again, however at a much lower level than previously: the annual number of live births has been fluctuating between 88 and 91 thousand. Its lowest ever value of 88,049 births was registered in 2011 (*Figure 1*).

Figure 1: Number of live births and total fertility rate (TFR) in Hungary, 1990–2014



Source: HCSO, Demographic Yearbooks.

To answer the question whether there were any substantial improvements in birth numbers and fertility since its lowest value until the end of 2014, it is necessary to examine the data in more detail by using a

monthly breakdown. The monthly data (that are not reported here) show no trend-like increase until December 2014 following the shock fall after 2010 which led to a historic low in 2011. Even in February 2014 (similarly to December 2013) the lowest ever number of births in the given month was registered.

The question as to what the 91,500 live births in 2014 are “enough for” in Hungary can be answered by using various demographic indicators. Of them the most widely used is *total fertility rate* (TFR) that is displayed in *Figure 1*. Essentially this indicator which is calculated by using current age-specific fertility rates shows the average number of children that would be born to a woman over her lifetime. The TFR must be somewhat higher than two to ensure the replacement of population. However, in Hungary the total fertility rate was 1.34 in 2013. Exact data are not available to calculate the rate for 2014 at the time of writing the present chapter but the preliminary estimation is 1.41. If the final value reaches 1.4 (that is quite likely) then this will be the highest peak of fertility rate in Hungary since 1997.

The number of births and total fertility rate were generally moving together over the last decades; however recent changes in the latter have been more favourable than those in the number of births. This is due to the decline in the size of female cohorts (20–40 year olds) with the highest childbearing propensity that has happened from 2012 onwards. Since then fewer potential mothers have had the same or slightly higher number of children, so the number of births per woman has increased. This trend may accelerate even further in the coming years: as the large cohort of those born in 1974–1978 turns 40 and the number of potential mothers decreases further, the gap between the two indicators may grow: total fertility may increase remarkably even if the annual number of births stagnates or decreases slightly. Looking further ahead, in the next decade – when women

born around the turn of the millennium reach childbearing age – the number of childbearing-age women will have declined to such extent that even if childbearing propensity increased the number of births would still be declining.

It is worthwhile examining total fertility rate in an international comparison. Unfortunately Eurostat data are only available up to 2012 at the time of writing this chapter. According to these the mean total fertility rate of the EU declined slightly between 2010 and 2012 (from 1.61 to 1.58) after a slight increase following the turn of the millennium.

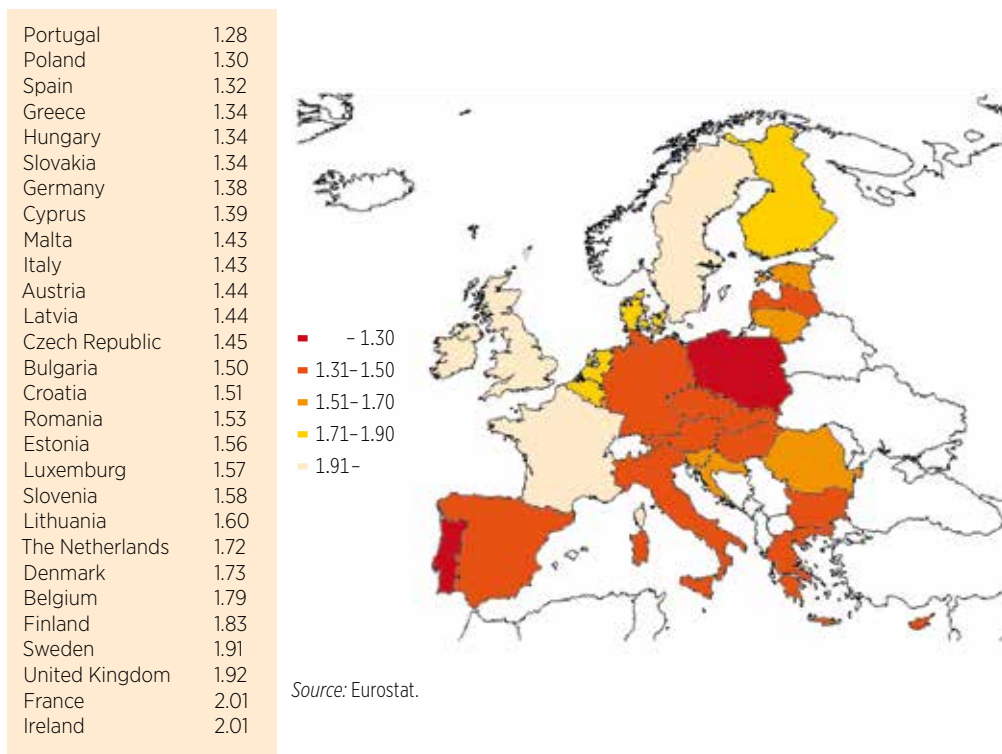
In Western and Northern Europe, despite a minor decline the overall picture remained the same. These are the Member States where TFR is not well below the replacement level (such as France, Great Britain, Ireland

and Sweden with a value above 1.9) or where total fertility exceeds 1.6 (e.g. the Netherlands, Belgium).

On the contrary, the majority of Southern European Member States struggling with an economic downturn saw a major deterioration, even though fertility had not been particularly high previously either. Between 2010 and 2012 the TFR fell drastically in Greece, Cyprus, Portugal and Spain. As a result, Portugal had the lowest fertility among European countries in 2012, and was the only country where TFR was below 1.3.

The situation improved in absolute and relative terms alike in some post-communist countries (e.g. Latvia, Hungary) that had consistently experienced the lowest fertility rates in the past. At the same time, decline (e.g. in Poland) or stagnation (e.g. Slovenia)

Map 1. Total fertility rate in the Member States of the European Union, 2012



EMIGRATION AND CHILDBEARING

(Based on the ONS (2013) report)

The mass migration originating from Hungary in recent years has primarily affected childbearing-age groups (see *Chapter 11*). In addition to its direct social significance, the issue also raises many other questions. What is the effect of emigration on childbearing propensity in Hungary? What is the relationship between emigration and childbearing? What proportion of children born to families who moved abroad permanently are registered in Hungary (as well)? What family events increase/decrease the likelihood of return migration? These questions are likely to come to the forefront of Hungarian population research over the coming years.

The UK Office for National Statistics published a report on the fertility of immigrant women living in England or Wales by using data from the 2011 population census. In the analysis they related birth statistics by the age of mother and country of origin of mother to the female population by age and country of origin registered by the population census, and thus calculated the total fertility rate of women from several countries of origin. Although this procedure has its limitations in terms of methodology (for

example temporary migrations around and related to childbirth not considered in this examination that are largely dependent on the social security systems of particular countries), some important conclusions can be drawn.

According to the results of the 2011 population census, the TFR value of 1.93 in England and Wales can be split into a TFR of 1.84 for UK-born and 2.21 for non-UK born population. However, the fertility of non-UK born population varies substantially by country of birth. One end of the spectrum is represented by immigrants from Libya with a total fertility rate of 5.6, while at the other end of the spectrum are those born in Italy or South Korea with a value of 1.1.

In England and Wales 1,225 babies were born to Hungarian-born mothers in 2011. (For the sake of comparison 1,826 children were born in the whole of Vas county in 2011.) The total fertility rate calculated for Hungarian-born mothers living in England and Wales was 1.63, much higher than the TFR of 1.24 measured in Hungary in the same year.

Most post-communist countries are characterised by substantially higher childbearing propensity among emigrants than those who stay at home (for example the TFR of Polish women in England and Wales was 2.13 as opposed to 1.3 in Poland).

were observed in other countries of the region. When interpreting these results it must be noted that at least four Member States (Bulgaria, Romania, Latvia and Estonia) performed a major retrospective revision of data due to new information obtained from population censuses that took place around 2011.

Overall – in a European comparison – the relative situation of Hungary in terms

of total fertility is still very unfavourable, although it has shown some signs of slight improvement. According to 2012 data, Hungary was at the 22nd-24th place within the (then) EU27 in terms of total fertility rate. The World Factbook – generally considered an accurate and reliable source of demographic data – estimated that Hungary ranked 21st among the 28 current EU Member States in 2014. According to the

same estimate, Hungary was at the 206th place in the ranking of the 224 states and quasi-autonomous territories of the world.

MOTHERS' MEAN AGE AT BIRTH – THE END OF POSTPONEMENT?

The acutely low level of fertility in the last decades could be clearly explained by the postponement of childbearing: the old pattern of childbearing at a young age had disappeared and – following Western European patterns – more and more women in Hungary also postponed the birth of their first children until their late twenties, early thirties. Nevertheless, this postponement effect practically ended in 2011. The simplest summary indicators of the postponement of fertility are the mean age of women at first birth and all births (*Figure 2*). The mean age of mothers at first birth was 28.2 years in 2013, the same as in 2010 and somewhat lower than its value in 2011 and 2012. Preliminary values for 2014 do not suggest any major change. Decline in the average age at first birth was unprecedented in Hungary after the regime change until 2011 therefore this probably marks the end of a very long trend.

Women's mean age at birth was 30.1 years in 2013 – and also in 2014 according to preliminary estimates – compared to 30.0 years in 2011, thus its continuous rise since the regime change also seems to have stopped.

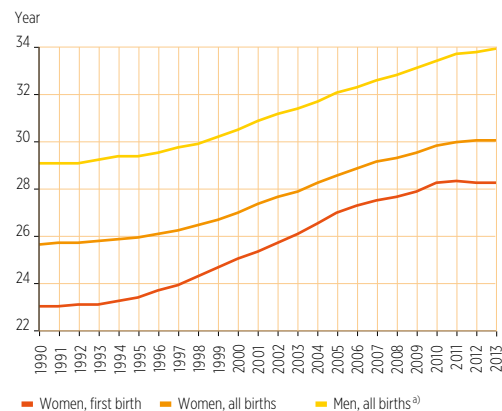
In a European comparison these age values can be considered average, because the mean for EU Member States was also exactly 30.1 years in 2011 (more recent data are not available at the time of writing).

The mean age of fathers was still increasing but the tempo of postponement slowed down substantially. In Hungary a “typical” father was 34 years old on average at the birth of his child/ren in 2013, compared

to 33.7 years in 2011. These figures mean that the average age at becoming a parent has increased by about five years in Hungary since the regime change.

Nevertheless, the comparison of changes in age-specific fertility rates over time reveals that it is not simply a case of general postponement but an increase in the heterogeneity – deviation from the mean – of childbearing age (*see Figure 7 and 8*). Thus, it is not simply about having fewer children at a later age, but it also means an increasing variety – a larger value of standard deviation – behind the national-wide average. This trend is clearly illustrated by the fact that the mean age at first birth for individuals with primary education hardly changed between 1990 and 2013, as opposed to women with secondary education (without higher education) for whom mean age at first birth increased by about five years (for more details on this see: HCSO 2014).

Figure 2: Women's and men's mean age at births, 1990–2013



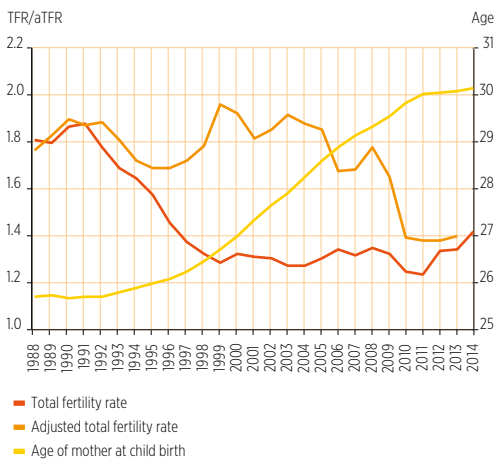
a) Known fathers.

Source: HCSO, Demographic Yearbooks; authors' calculation.

If the increase in the mean age at birth stops or slows down considerably, and fertility – in terms of child number and TFR as well – does not increase substantially, then changes in fertility pattern will be

much more far-reaching than previously assumed. According to our assumption, there was a very strong tempo effect in the period following the regime change that inevitably reduced the level of total fertility rates calculated for the singular calendar years by as much as three or four months annually. The commonly accepted method to eliminate this timing effect is Bongaarts' and Feeney's *adjusted total fertility rate (aTFR)*. It tells us what the average number of children (TFR) would be without postponement; or more precisely if fertility was (had been) affected only by the postponement of childbearing. If fertility does not drop after the removal of timing effects, then the decline can be fully attributed to postponement. However, if it does drop, then in addition to timing there is also a quantum effect causing a decrease in fertility levels.

Figure 3: Total fertility rate (TFR), adjusted fertility rate (aTFR), and mean age at birth for women in Hungary, 1989–2013 (all children)



Source: Authors' calculation.

If the development of trends over the past years in Hungary is examined in the context of this indicator, a new interpretation emerges. In the period when childbearing was characterised by strong timing effects (until 2005),

childbearing propensity – after the removal of postponement effect – was relatively stable at around 1.8. This means that fertility could have potentially been this high in the absence of postponement.

Over the past few years, however, postponement has been slowing down and there is a substantial decline in the adjusted total fertility rate (aTFR) after the removal of timing effects: from 1.8 to 1.4. This suggests that TFR stagnating around 1.3 over the past few years is definitely not because of postponement but it is the consequence of a real fall in childbearing propensity. Or differently: if the decline in fertility observed over the last decade had been due to postponement only, then total fertility rate (TFR) should have risen more than it did in recent years. Because this did not happen, it seems that a significant share of babies whose births were previously postponed has not been born. Evidently this is due to biological reasons on the one hand and societal reasons on the other. Overall, it suggests that behind the “curtain” of postponement a major shift in the patterns of childbearing took place which can be characterised not only by postponement of childbearing but also by definite changes in completed fertility (in the total number of births per woman).

After breaking down the above indicators by child number (for details see Spéder 2014) it can be predicted that the level of childlessness will increase substantially and it will reach approximately 17-18% for mothers in the 1975 birth cohort. In certain social subgroups this proportion will be even higher, considering that for example 25% of females with a higher education degree in the capital are childless according to the 2011 population census (see Korfa 2015/1).

The proportion of one-child women is also likely to rise. The main reason for this is the declining probability of having a second child. These two rising proportions will bring about a significant decline of the two-child

family model that was dominant until the turn of the millennium.

The proportion of those with three or more children will also decline somewhat, however to a lesser degree than those with two children. The decreasing share of three-child families can be clearly attributed to the fall in the proportion of two-child families. The probability of having a third child among those with two children is definitely not declining; on the contrary – not independently from strong selection effects and changes in family policy – it might even be increasing.

IDEAL NUMBER OF CHILDREN

Changes in childbearing behaviour have been accompanied also by a transformation of values related to intended family size, or differently the “ideal number of children”. However, it is important to note that the correlation between values and behaviour is not particularly strong and its direction is not clear either. Around the time of the regime change approximately two thirds of those in childbearing age (19–49 year olds) regarded two children as the ideal family size, and nearly everyone else

considered three as the ideal number of children. Very few felt that not having any children, having one child or more than three children were the most appropriate in this respect. Nevertheless, nearly a tenth of women remained finally childless (mainly due to biological reasons) already then, and the actual prevalence of the one-child model was much higher than that of three-child families. Despite the predicted rise in the prevalence of childlessness, characteristically only a very minor proportion of those in childbearing age consider childlessness as an ideal situation for a Hungarian family these days. Although the share of one-child families has clearly exceeded that of families with three children over the last decades, one-child family model still remained very unpopular. By contrast, the share of those who consider two children as the ideal family size has hardly changed even though – considering actual families – this model is in rapid decline. The data – if changes over time are also taken into consideration – suggest that trends in family size could have been influenced by the transformation of family ideals only to a small extent, and in reality, changes in ideal family size seem to slowly follow actual trends.

Table 1: Distribution of 18–49 year olds by ideal number of children, and women aged 40–44 by family size in the same year, 1988, 1994, 2013 (%)

	1988		1994		2013	
	Ideal number of children (18–49 year olds)	Actual number of children (40–44 year olds)	Ideal number of children (18–49 year olds)	Actual number of children (40–44 year olds)	Ideal number of children (18–49 year olds)	Actual number of children (40–44 year olds)
0 child	0	10	0	8	2	13
1 child	3	23	6	20	12	26
2 children	66	49	62	52	65	40
3 children	27	13	29	14	18	15
4 children	1	3	2	3	2	4
5+ children	1	2	0	2	1	1
Total	100	100	100	100	100	100

Source: ISSP data; HCSO, Fertility database.

FERTILITY AND LEVEL OF EDUCATION

Although the education of parents is known from birth statistics, there is no information on how the composition of fertile-age women by level of education has changed therefore the fertility rates required to examine fertility behaviour by education cannot be computed from vital statistics. Furthermore, the proportion of full-time higher education students among woman giving birth has increased over the last years, and although this percentage is still small but not negligible at all (2.4% among childbearing women in 2010 and 3% in 2013). Lastly, most probably, an increasing number of women get a tertiary educational degree after childbearing. Therefore the relationship between education level and childbearing can be presented every ten years, after the publication of population census data.

For the majority of women aged 40–44 years both educational and fertility careers can be considered as completed, therefore the relationship between education and childbearing can be analysed for this age-group. For a general overview, the composition of women aged 40–44 years by education (*Table 2*) and average number of children (*Table 3*) are presented.

The well-known and remarkable educational expansion can be observed with regard to secondary and tertiary education (*Table 2*). While in 1991 45% of women aged 40–44 years had no more than primary school education, by 2011 this proportion fell to 17%. The decrease in the proportion of people with low education was offset by an increase in the share of people with vocational and tertiary education. The proportion of women with

lower-secondary vocational education increased from 10% to 23%, and that of tertiary education graduates rose from 13% to 23%.

Table 2. Distribution of women aged 40–44 years by education level, 1991, 2001, 2011

	(%)		
	1991	2001	2011
At most 8 years of primary school	45	33	17
Vocational school	10	18	23
Secondary education	32	33	36
Tertiary education	13	16	23
Total	100	100	100

Source: HCSO Population Census 1991, 2001, 2011; authors' calculation.

There were significant changes in fertility (as regards the average number of children) by education level. In 1991 it was still characteristic that fertility declined steadily with education level. Over the past two decades two main trends have emerged: on the one hand the fertility of those with the lowest education has increased, on the other hand the fertility of secondary school and tertiary education graduates has converged; by 2011 the relative fertility advantage of secondary school graduates over those with a tertiary education degree basically disappeared (1.63 child vs 1.66 child). The average number of children of 40–44 year olds is the consequence of educational expansion and changes in fertility behaviour. Their fertility which can be considered nearly completed increased between 1991 and 2001, but even then it did not reach a value of two. However, between 2001 and 2011 there was a marked decline (from 1.95 to 1.82).¹ At present three different fertility level

¹ It is noticeable how much lower the total fertility rate is compared to completed fertility. To a large extent this is due to the fact that women aged 40–44 years in 2011 had a large proportion of their children in the first half of 1990s, in a period characterised by higher childbearing propensity.

can be observed it is very high among those with very low education, average among those with lower-secondary vocational education, and below average – very similar to each other – among secondary school and tertiary education graduates.

Table 3: Mean number of children of women aged 40–44 by education level, 1991, 2001, 2011

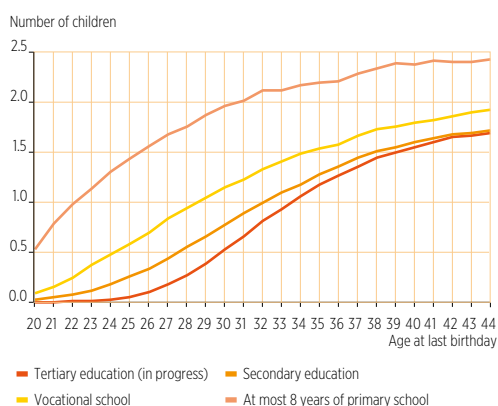
	1991	2001	2011
At most 8 years of primary school	2.15	2.24	2.40
Vocational school	1.88	1.96	1.85
Secondary education	1.68	1.77	1.66
Tertiary education	1.59	1.71	1.63
Total	1.90	1.95	1.82

Source: HCSO Population Census 1991, 2001, 2011; authors' calculation.

Based on the 2011 population census 'hypothetic cohorts' broken down by the level of education were created (Figure 4). Obviously, the calculated age specific fertility rates by educational level do not belong to a specific birth cohort but were created by using the 2011 census data of different cohorts. It can be observed that only very few tertiary education graduates and future graduates (including those in higher education) have children by the age of 24 years. Nevertheless, in the second half of their twenties and first half of their thirties the average number of children is growing rapidly, and after the age of 40 it reaches the level of secondary school graduates. Therefore the higher childbearing propensity of tertiary education graduates in later years does not mean high completed fertility; it is mainly about catching up for the number of children during the (shorter) fertile period after graduation. It also emerges from the data that the fertility advantage of those with primary or lower-secondary vocational education appears before the age of 24–25 years, after this their childbearing propensity is not higher than in more educated groups.

Overall, the negative relationship between fertility and educational level in Hungary is valid only with some limitations. The fertility of those with primary education is high but at present they represent an increasingly smaller proportion of the population. The fertility of women with vocational education is moderate. Finally, secondary school and tertiary education graduates have the lowest fertility, and they hardly differ from each other at the later stages of their fertility career.

Figure 4: Mean number of children by mothers' age and educational level, 2011



Source: HCSO Population Census; authors' calculation.

CHILDBEARING: OUT OF WEDLOCK, IN COHABITATION, OR AS A SINGLE PARENT

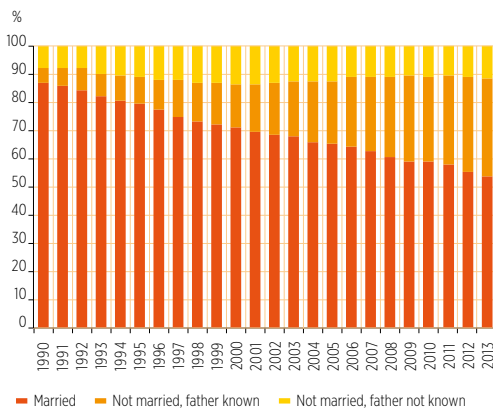
Although the number of marriages has been steadily increasing since 2010, the increase is mainly observed among couples with children and as regards higher-order marriages. This is why 2010 marked only a brief halt in the rising trend of out-of-wedlock childbearing. Indeed, the increase continued in 2011–2013, in the latter year 46% of children were born out of wedlock that will reach 48% by 2014 according to preliminary data. This

trend predicts that, unless public policy interventions (e.g. the tax break of first-married couples) aiming at promoting marriage are successful, children born to married couples might become a minority by 2016 in Hungary.

Out-of-wedlock childbearing becoming the dominant behaviour would nevertheless fit in European trends. Although out-of-wedlock childbearing in Hungary has been above the EU27 average since 1997 (for example the EU average was 40% in 2011 compared to 42% in Hungary), however childbearing out of wedlock has been becoming the dominant pattern in an increasing number of Member States. In 2012, the majority of children were in this category in Belgium, Bulgaria, Denmark, Estonia, France, Sweden and Slovenia.

The majority of children born out of wedlock are not born into single-parent families but into cohabiting unions. There are no accurate statistical data on the proportion of children who are born into cohabiting unions because official registers record only the mother's marital status at birth. In the absence of targeted data collection, the proportion of cohabiting unions can be only estimated.

Figure 5: Live births by mother's marital status and information reported about the father, 1989–2013



Source: HCSO Vital statistics; authors' calculation.

The official vital statistics, in principle, also provide information about fathers. It can be assumed that a mother who did not wish to or could not provide information about the father of her child at birth, must have had a very loose relationship with him. Since 1990 the proportion of unmarried mothers who provided information about the fathers has increased from 5% to 35%, while the share of those who did not provide any information about the fathers of their children increased to a much smaller extent (from 8% to 11%) (see Figure 5).

Very similar results can be estimated from the database of the *Turning Points of the Life Course* demographic survey. According to this, the number of children born to single mothers increased from 4% around the regime change to 7%, while the proportion of children born into a cohabiting union multiplied from 7% to 35%.

On the basis of these two sources of data it can be concluded, even without a targeted study, that the importance of childbearing outside cohabitation (that of single parents) has hardly increased over the last decades and it is still relatively uncommon. By contrast, marital childbearing has lost ground against childbearing in cohabiting unions.

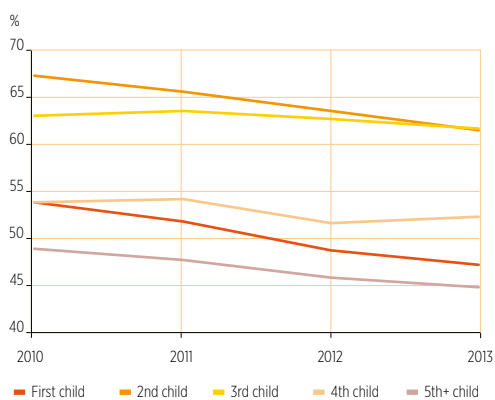
Regarding the spread of out-of-wedlock childbearing, Hungarian society crossed an important symbolic milestone in 2012. This was the year when the majority of first children were born out of wedlock; by 2013 the proportion of those becoming parents in a marital union declined to 47%. Previously, out-of-wedlock childbearing represented a majority only among those with a large family, namely mothers having their fifth or higher-order children.

The importance of this shift cannot be underestimated, because the social reality and subjective experience of becoming a parent is no longer associated with marriage for the majority of people. The

picture is even more striking from a geographical perspective: the majority of first-order children were born out of wedlock in all counties apart from Budapest, Pest and Győr-Moson-Sopron counties in 2013. There are no sub-regions in Hungary (only three Buda districts in Budapest) where at least two thirds of first children have been born in marriage. By contrast, there are 53 sub-regions where more than two thirds of first children are born out of wedlock, and it is not uncommon to find sub-regions (such as Csongó, Törökszentmiklós, Ózd) where this is more than three quarters.

The decline in marital childbearing is also increasingly characteristic of second-, third and fourth-order births, although the majority of these mothers were still married in 2013 (see Figure 6). Evidently this is a two-way relationship: on the one hand married couples are more likely to have a second or a third child than cohabiting partners; on the other hand the proportion of couples who marry after the birth of their first child is increasing. In this case the first child is born out of wedlock, while the second is born in marriage.

Figure 6: Proportion of married mothers by birth order, 2010–2013



Source: HCSO Vital statistics; authors' calculation.

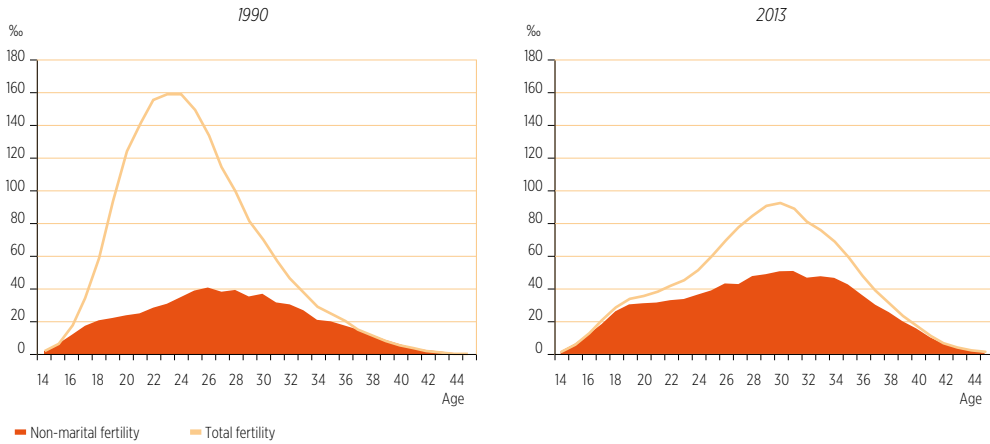
Despite the diffusion of the phenomenon, the social determination of out-of-wedlock childbearing is still significant in Hungary. According to data from the Demographic Yearbook nearly 78% (!) of childbearing mothers with no more than primary school education were unmarried; for first births this proportion was 89%. Among mothers with vocational education the share of out-of-wedlock childbearing increased by about 10% in three years and stood at 60% in 2013.

By contrast, a narrow majority of mothers with upper-secondary education were still married in 2013 (although the majority of first children were born out of wedlock). The other end of the spectrum is represented by mothers with tertiary degree: out-of-wedlock childbearing is relatively uncommon among them – compared to other educational groups – it represents 22%.

Changes in partnership play a key role in the development of fertility: namely postponement, the spread of cohabitation and the increased instability of partnership. These all reduce the propensity to childbearing and result in a smaller number of children. According to the literature, a new phenomenon can potentially contribute to an increase in fertility: the spread of a new partnership formation (re-partnering) after the dissolution of a previous union (divorce, separation). Individuals increasingly decide to seal their new relationships by having (further) children. However, it is not easy to reveal causal relations. It is well-known that before 1990 many couples got married because “the baby was on the way”. These days this phenomenon is much less common, although it still exists.

The comparison of age-specific non-marital and overall fertility reveals that around the regime change out-of-wedlock childbearing was more characteristic of older age groups and of divorcees living in cohabitation. Apart from these, it was common only among very young, underage mothers. By contrast, it is now observed in

Figures 7-8: Age-specific overall and non-marital fertility rate (number of non-marital and total live births per 1,000) by age of women, 1990, 2013



Source: HCSO Vital statistics; authors' calculation.

all age groups, although still more dominant among younger and older mothers.

These radical changes in the family context of childbearing were also followed by the transformation of the value system of those affected to a limited extent. In 1988 53% of 18–49 year olds (i.e. those in childbearing age) either agreed or strongly agreed with the statement that “those who would like to have children must get married”, which fell to 30% by 2013. The statement related to single mothers (“a single mother can bring up her child as well

as two parents together”) is also potentially interesting, although respondents might have also thought about women who became single mothers following a divorce. Although agreement with this statement also increased, it was not immense. The proportion of those who agreed or strongly agreed with the statement increased from 22% to 31% in 25 years; this is not a particularly striking change especially if we also take into account the fact that a change of generation took place among those in childbearing age during this time.

Table 4: Agreement with statements related to childbearing among 18–49 year olds

	"Those who want to have children must get married"				"A single mother can raise her child as well as two parents together"	
	1988	1994	2002	2013	1988	2013
Strongly agree	15.3	23.9	9.2	11.1	3.0	7.6
Agree	38.1	17.3	20.1	19.2	18.7	23.3
Neither agree nor disagree	10.3	19.4	20.3	27.0	18.1	33.6
Disagree	33.5	23.2	30.7	25.5	50.3	23.6
Strongly disagree	2.7	16.2	19.8	17.2	9.8	11.9
Total	100.0	100.0	100.0	100.0	100.0	100.0

Source: ISSP 1988, 1994, 2002, 2013; authors' calculation.

PAID WORK AND/OR FAMILY – ON THE EXPECTATIONS TOWARDS MEN

It is a widely held view that women find it hard to meet the expectations of work and family life at the same time and the tensions arising from this “double burden” have a negative effect on childbearing. Therefore in modern societies (characterised by high level of employment among men and women) fertility is largely influenced by the extent women can reconcile their family and work life to. This reconciliation depends on a variety of factors: the availability of child care; flexibility of the labour market and the possibility of part-time employment or the requirement of overtime work; the division of roles, tasks and labour between men and women.

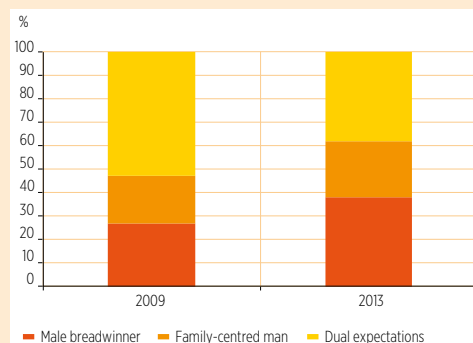
Less attention is paid to the family roles of men, even though female roles within the family are defined in conjunction with male roles in terms of both ideals (expectations) and practice (employment, division of tasks).

In 2013 we re-examined family role expectations towards men in the Hungarian society. Apart from the fact that the majority (85%) consider fatherhood important in the life of men, the key question is whether the breadwinner position or being involved in the everyday life of the family (new fatherhood) is the more common male role. Two thirds of the population (64.6%) agree with the ideal of the male breadwinner (“Earning a lot of money is the most important in a man’s life.”). However, half of the population also favour the role ideal of men being involved in child raising (“It is much more important for a man to spend more time with his children rather than to increase the family income by taking on extra work.”).

The analysis of role expectations identifies three main types: the male breadwinner, the family-centred man and the man exposed to dual expectations. In 2009 in the adult population (under 50 years) the male role that meets both traditional and modern expectations was the most popular (53%). Less people supported exclusively the role of “male breadwinner” and modern man involved in family life (27% and 20% respectively). Four years later in 2013, these were still the three main types however there had been a shift in their distribution. The proportion of those having a dual expectation towards men fell (38%) while the share of those who favour the traditional male breadwinner role increased substantially and reached the same level. Finally, the share of those preferring a family-centred male role also increased somewhat.

Although the above changes are quite remarkable, it would be premature to put forward any conclusions about a major change in trend and the spread of traditional role expectation, on the basis of only two measurements. In our opinion these shifts suggest that economic recession and hardship increase traditional expectations toward men.

Role expectations towards men in Hungary, 2009, 2013



Source: Family values 2009; ISSP 2013; authors' calculation.

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