

# Family policies and the evolution of natality in Romania

Andreea-Denisa Trăşcan \*

**Abstract:** In recent years, birth rates have faced significant challenges, and every country is trying to reduce their demographic aging in a way or another. This article aims to analyse Romania's key fertility indicators within a European context, with a particular focus on the effectiveness of implemented family policies in promoting higher birth rates. Romania, like many European countries, is grappling with an aging population, leading to economic and social concerns. With a focus on the implemented family policies, this analysis seeks to determine their effectiveness in encouraging natality. By examining these aspects, we can identify how natality can be increased in Romania and determine the real challenges preventing the population from achieving a demographic balance free from aging concerns.

**Keywords:** fertility indicators, birth rate, family policies, natality, natural growth, demographic aging

## Introduction

Once the level of development increases in a country, then it is expected that its fertility will decrease, which may be one of the reasons why the fertility rate in the countries of the European Union is continuously decreasing. When a country's GDP increases, so does the opportunity cost of time spent caring for children, which leads to a negative influence on the birth rate. Most of the population in the EU is facing an increasingly pronounced demographic aging in some countries, as shown by the EU average natural growth which has negative values.

Romania, like many other countries in Eastern Europe, is struggling with a significant decline in birth rates. This demographic shift is influenced by an array of economic, social, and historical factors that collectively create a challenging environment for young

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\* Andreea-Denisa Trăşcan

National Scientific Research Institute for Labour and Social Protection,  
Bucharest, Romania

adults considering family formation. The evolving societal roles and values further complicate the picture. Historical contexts, particularly the legacy of communist-era natal policies, also play a role in shaping current demographic trends.

This paper will analyse the multifaceted factors contributing to the declining birth rate in Romania, with a particular focus on the economic, social, and healthcare. This analysis looks to inform policymakers on potential strategies to foster a more favourable environment for increasing fertility rates, thereby ensuring a sustainable demographic future for the country.

Family policies are a relatively recent addition to social policies, primarily developed in Europe. The ideal family model in EU and OECD countries has shifted from a male breadwinner/female carer model to dual or one and a half breadwinner/carer models. There has been an increase in work-family reconciliation policies aimed at balancing work and caregiving responsibilities, though efforts to rebalance gender roles in unpaid care are limited (Saraceno 2011).

In Romania, family policies have undergone significant evolution over time. During the communist era under Nicolae Ceaușescu, the focus was on the pronatalist policies intended to boost fertility rates. A pivotal moment was the introduction of Decree 770 in 1966, which banned abortion and contraception, except in cases where the mother was over 40 years old or already had four children. These policies were extremely drastic; from 1985 women were subjected to regular gynaecological examinations at work to detect pregnancy before a possible abortion, thereby rigorously enforcing the pronatalist agenda. Despite all these strict measures, illegal abortions became widespread as women sought ways to circumvent the strict regulations (Haupt 1987).

Despite all these policies and their severity, they did not have the results intended. The Decree indeed led to a baby boom and the birth rate did increase significantly from 1967 to 1971, but it was not sustained (Odobescu 2015). The pronatalist policy only delayed the fertility decline by nearly 20 years (Jemna and David 2018).

In more recent decades, Romania's public policies impacting fertility focused primarily on the middle class, particularly women in paid employment, predominantly residing in urban areas. Empirical data indicate that with these family policies there was an increase in fertility rates partly attributable to the support provided to parents active in the labour market (Voicu and Papuc 2023).

### **Theoretical frameworks**

According to the study “Theories of the Family and Policy” (Jacobsen et al. 2004), the most relevant theoretical frameworks pertinent to this paper are the following:

1. **Economic Approach:** Families are viewed as economic units where decisions about marriage, fertility, and child-rearing are made based on cost-benefit analysis. Parents adjust their investment in children based on income and the perceived costs of raising them, leading to changes in fertility rates (Jacobsen et al. 2004). The household is viewed as a small firm that maximizes a utility function to determine decisions: marriage, division of labour, childbearing and more. The members divide their time between market work and work inside the household. This framework examines key decisions such as having children, the level of investment in their upbringing, marriage, and divorce. By portraying the household as an economic entity, it emphasizes the production of goods and services within the family unit, with members striving to maximize their collective utility (Becker 1981).

2. **Biology Approach:** Parental behaviours are seen as evolutionary adaptations aimed at maximizing reproductive success. Humans, like other mammals, typically follow a genetic strategy of producing relatively few offspring and providing extensive care until they can fend for themselves (Jacobsen et al. 2004). The biological approach suggests that certain fertility behaviours and patterns have evolved because they provide survival and reproductive benefits. Brain structure and function, influenced by neurotransmitters, also impact sexual behaviour, pair-bonding, and other factors related to fertility. Overall, this approach emphasizes how our physiological, hormonal, and genetic makeup fundamentally shapes our reproductive capacities and behaviours. These insights add a valuable dimension to the social and cultural perspectives on fertility (Teitelbaum 2024).

3. **Sociology Approach:** Sociologists emphasize the role of romantic love in modern family dynamics. Traditional family structures focused less on emotional attachment, while modern marriages are based on individual choice, companionship, and personal fulfilment, with a shift towards higher levels of emotional compatibility within relationships. Since the 1950s, major societal changes have led to significant shifts in fertility. Some believe these changes are driven by the interaction between social and genetic factors. Sociology offers

valuable insights into how social norms, cultural influences, societal transformations, and family dynamics, along with the interplay of social and genetic factors, shape human reproductive behaviour and fertility outcomes. These insights complement the biological and economic perspectives on fertility (Fauske 2023).

### **Methodological approach and data analysis**

I conducted a comprehensive analysis of key fertility indicators, specifically focusing on the total fertility rate (TFR), birth rate, and natural increase. The data for this study was sourced from the Eurostat database, encompassing all member states of the European Union over a five-year period, from 2018 to 2022. This longitudinal analysis allowed for a detailed examination of the trends and variations in these indicators over time. Particular attention was given to understanding Romania's fertility patterns in comparison to those of other European countries. This comparative approach enabled the identification of unique national behaviours and broader regional trends, offering valuable insights into the demographic dynamics at play within the EU.

#### *Birth rate*

The crude birth rate is an indicator showing the ratio between the number of live births during the year and the average population in that year, as defined on Eurostat.

From 2018 to 2022, Romania had a birth rate higher than the average birth rate of the European Union. The biggest difference is noted in 2018, when the average birth rate of the European Union was 1.3 lower than the birth rate recorded in Romania.

In 2018, compared to the other countries in the European Union, as shown in the graphs from Annexes, Romania had one of the highest birth rates (10.8), along with Denmark (10.6), Slovakia (10.6), Cyprus (10.7), Czech Republic (10.7) and Estonia (10.9). The countries with the highest birth rates were France (11.3), Sweden (11.4) and Ireland (12.5) (see Chart 1 from Annexes).

Romania had a decrease in birth rate in 2019, reaching a rate of 10.3 (see Chart 2 from Annexes). Thus, Romania was in another cluster of countries, namely: Belgium (10.2), Czech Republic (10.5), Denmark (10.5) and Slovakia (10.5).

In 2020, as shown in Chart 3 from Annexes, Romania kept the same birth rate as in 2019. It is seen that it formed a cluster with other

countries that had high birth rates: Luxembourg (10.2), Czech Republic (10.3), Romania (10.3), Denmark (10.4) and Slovakia (10.4).

According to Chart 4 from Annexes, Romania's birth rate in 2021 decreased, reaching 10.1. Estonia (10), Belgium (10.2), the Netherlands (10.2) and Slovakia (10.4) did the same.

In 2022, the lowest birth rate was recorded in Romania based on the 5 years studied, namely a rate of 9.7. Thus, Romania ranked in the same group as the countries: Hungary (9.3), Czech Republic (9.5), Netherlands (9.5) and Slovakia (9.7).

Although the birth rate decreased by 0.9 from 2018 to 2022, this behaviour is in line with the rest of European countries, which can also be seen when analysing the European average that had a decrease of 0.8.

The causes for this long decline in the birth rate could be multiple, but this phenomenon is not surprising. In Romania, the decline in birth rates after 1990 has been associated with women's greater interest in tertiary education and work, which has led to the postponement of first and second births, and this has been felt in the years that have followed so far.

#### *Total fertility rate*

The total fertility rate is an indicator showing the average number of children that would be born alive to a woman during her lifetime if she survived and went through the fertile years, based on the fertility rates of a given year, as defined by Eurostat.

The total fertility rate in Romania in those 5 years was much higher than the European average, as shown in Chart 6 from Annexes.

Romania was one of the countries with the highest total fertility rate, being in the same cluster with Sweden and France in the first two years analysed (2018-2020), and with France and the Czech Republic in the last two years analysed (2021-2022). This behaviour remained constant during the 5 years analysed, the rate increasing from 1.78 in 2017 to 1.81 in 2021. In comparison, Sweden and France had a decrease in total fertility rates over the same time, while the Czech Republic saw an increase.

Comparing 2017 and 2018, Romania did not change its position in the European ranking, being the third country with the highest total fertility rate, while the European average decreased in 2018 compared to 2017.

From 2019 to 2020, it is noted that Romania's total fertility rate has increased quite a lot, being higher than that of the Czech Republic. In

2020, Romania was the second country with the highest total fertility rate in Europe, surpassed only by France.

The countries where the total fertility rate had an increase over the 5 years are: Bulgaria, Czech Republic, Germany, Estonia, Ireland, Greece, Croatia, Cyprus, Hungary, Romania, Slovenia and Slovakia.

Most European countries, however, had a decrease in their overall fertility rate, which also led to a decrease in the European Union average.

#### *Natural increase*

Natural increase is the ratio of natural change during the year (live births minus deaths) to the average population in that year, as defined by Eurostat.

Romania's natural increase was lower than the EU average during the 5 years, which means that the number of live births was much lower than the number of deaths.

In 2018, it is noticed that Romania is part of the cluster of countries that have a negative natural growth, but not small.

Since 2020, there has already been a rather large decrease in natural growth across Europe due to the COVID-19 pandemic. Romania had a decrease of 2.1 from 2019 to 2020.

In 2021, this decrease in natural growth continues, with Romania reaching -7.4.

Comparing the graphs from the Annexes, it is noted that in 2021 the lowest value of the natural increase was recorded in Romania, of -7.4, being a clear effect of the COVID-19 pandemic.

During this 5-year period, none of the countries studied managed to increase their natural increase, which continued to decrease steadily.

Two extremes are seen: Bulgaria with a small natural increase (-9.6 in 2022) and Ireland with an extremely high natural increase (4.4 in 2022).

In 2019, the Czech Republic had a natural increase of 0, and in 2020, the Netherlands reached this number.

### **Factors influencing the birth rate in Romania**

Even though the wages are better nowadays, the cost of having a child is still remarkably high. As of September 2023, for a family of two adults and a child, the value of the minimum consumption basket for a decent living was 8209 lei per month, and for a family of the adults and two children was 9978 lei per month. For a family of two adults without children it was 6162 lei per month, and for a single adult it

was 3807 lei per month. With the minimum wage in Romania in October 2023 being 3000 lei per month, it is understandable why the young adults are sceptical to start a family and make more children. The economic context is just not favourable for having children. Eurostat data shows that 90% of Romania's population doesn't have enough money for a minimum decent living, with nine in ten Romanians earning less than 2,500 lei per month (Gruga, Mihăilescu and Spatari 2018).

However, there are some social policies that could help increase natality, conform European Commission. For once, the children allocation has increased considerably in the past years. Every child aged up to 18 years old has the legal right to receive a monthly state allowance. There are also some child-raising allowances for the people who look after children aged up to 2 years, or 3 years in the case of disabled children: child-raising leave and benefit, child-raising leave and benefit for a disabled child. If the parent decides to go back to work before the period for the child-raising leave ends, they will receive help from a return-to-work bonus. Families on low incomes can benefit from a family support allowance with the purpose of supporting the family, raising children, and encouraging the children to attend school. Pregnant women and postpartum women can receive a maternity leave and allowance or a maternal risk leave (Employment, Social Affairs & Inclusion n.d.).

It appears that the Romanian government encourages higher birth rates by offering financial incentives to children aged up to 18 and to parents of newborn. Despite all these efforts, the birth rate continues to decline. Increased measures need to be put in place to address this issue and ensure a sustainable future for the country (Employment, Social Affairs & Inclusion n.d.).

Another important aspect is the medical care pregnant women need and if it can be met by the health institutes. In Romania there are problems with the access to health care, regardless of women's income. Patients must make great out-of-pocket payments, and sometimes it is still difficult to access pharmaceuticals. There is a shortage of medical personnel, and this results in poor care for the mothers, in their prenatal and postnatal periods (Miteniece et al. 2023).

There seems to be two main factors contributing to the delay and decline in fertility rates. First, changes in societal structures have transformed women's roles, with more women pursuing higher

education, entering the workforce, and altering traditional family formation patterns. Second, younger generations of women are shifting their values, seeking greater financial independence, moving away from traditional family roles, and advocating for more equitable gender relations. These factors have led more women to delay family formation and childbearing. However, there is evidence of a growing gap between women's childbearing desires and their actual experiences. This gap is increasing over time and is larger in countries where realized fertility rates are lower. This divergence between desired and observed fertility rates suggests that there are constraints preventing women from achieving their childbearing expectations (D'Addio and d'Ercole 2005).

### **Discussion**

The overall fertility rate continues to decline with advances in technology. So, while the economic development helps increase life expectancy, it has a negative impact on birth rates. Women are more concerned about their education and professional life and that is why they choose to postpone the creation of a family and, implicitly, the birth of a child. The COVID-19 pandemic has also led to economic and political instability which are key factors that can lead to lower birth rates.

It is a surprise that Romania appears in the cluster of countries with a high fertility rate. One of the reasons why it registered such a high total fertility rate in all 5 years analysed may be the fact that Romanians consider marriage a pillar of society, they still have a traditionalist opinion on family life. If we analyse the characteristics of “Second demographic transition” (Lesthaeghe 2020), although Romania has a slow but steady decline in terms of total fertility rate, marriage is still one of the most major events in a person's life, young people being encouraged to marry and have as many children as possible. Although this traditionalist view stays prevalent, it is not enough to increase fertility and birth rates.

It is also worth mentioning the historical context regarding Romania, namely the communist period and the harsh natal policies that were instituted. The second demographic transition began to make its presence felt much later in Eastern European countries, only after 1990, although this theory was first published in 1985 when developed countries were already in the final stages of this transition (Lesthaeghe 2020).



During the communist period, women had to assume a double role: the productive role of participant in the labour market and the reproductive role of mother. This led to the conclusion that there is a positive relationship between women's employment rate and fertility rates, a characteristic that has been seen in most Central and Eastern European countries. But after 1990, there has been a decrease in the employment rate of women, so for a recovery in fertility one solution might be to encourage women's participation in work. On the other hand, this should be followed by some measures that ease the relationship between work and family life (Jemna and David 2018).

Periods of economic recession are associated with negative fertility dynamics. When the labour market deteriorates, fertility will decrease (Matysiak, Sobotka and Vignoli 2020). Unemployment affects fertility, women and men differently. When women face unemployment, they usually choose to postpone the birth of a child or, on the contrary, choose to focus on family life and assume the role of mother. Among men, unemployment leads to reduced formation of a family and the desire to become a parent (Alderotti et al. 2021).

With the SARS-CoV-2 pandemic, many people have lost their jobs that has led to a decrease in the total fertility rate in the European Union, when we relate to the European average. However, in Romania's case, this rate has increased. While the European average decreased by 0.03, the total fertility rate in Romania increased by 0.03 from 2017 to 2021. From this, we conclude that, staying at home for a prolonged time Romanians chose to have a child during this period of uncertainty.

Of course, if the total fertility rate is lower than necessary for a stable population (2.1 in 2021 conf. Eurostat), the natural increase also shows a steady decrease. In 5 years, a difference of 1.4 is seen. Even though Romania has one of the highest total fertility rates in the European Union, this is not enough to prevent the country's demographic aging. Declining fertility rates and increased life expectancy contribute to reduced natural growth. While GDP contributes positively to increased life expectancy, it also leads to a decrease in fertility rates, as the opportunity cost of childcare time increases (Jemna and David 2021).

There are many factors that influence the total fertility rate, such as quality of life, hospital facilities, number of crèches and kindergartens, problems that occur within couples, health problems. Some fertility policies that could be proposed should consider women's health and

reproductive health, employers' indulgence in employees with families, and providing allowances to families (Cârstea and Domnariu 2021).

### **Strengths and limitations of the study**

It is important to see where Romania is in the context of European Union and understand that the decrease in fertility rates is something that is happening in all European countries. The current study lists possible causes of a low fertility rate and considers both the historical context of Romania and the changes that have occurred in society in the last decade.

This study does not include a data analysis of the economic approach and its influence on birth rates. By omitting this perspective, it misses an important dimension of understanding fertility patterns. Without addressing these economic factors, the study provides an incomplete picture of the multifaceted influences on natality. Economic conditions, labour market dynamics, and societal norms often play a more critical role in determining fertility outcomes. Therefore, future research should incorporate an economic analysis to offer a more comprehensive understanding of the factors affecting fertility.

### **Conclusion**

The decrease of the birth rate in Romania is associated with the overlapping role played out by economic, social, and historical factors. Despite the improvement in wages, the inflated cost of living discourages young adults from starting a family. As for healthcare, the mothers, many of which come from low-income households, do not specifically have enough diverse and quality health facilities, due to shortages of medical personnel and high out-of-pocket costs. Social policies aimed at increasing the birth rate, such as child benefits and parental leave, have not been enough to reverse the trend. In addition, women are increasingly prioritizing education and careers over early family formation, contributing to delayed childbearing.

By offering financial support and care services, these policies provide a safety net that encourages families to have more children, thus contributing to demographic stability. This comprehensive support system eases the burden on parents and creates a more conducive environment for raising children (Dramatic declines in global fertility rates set to transform global population patterns by

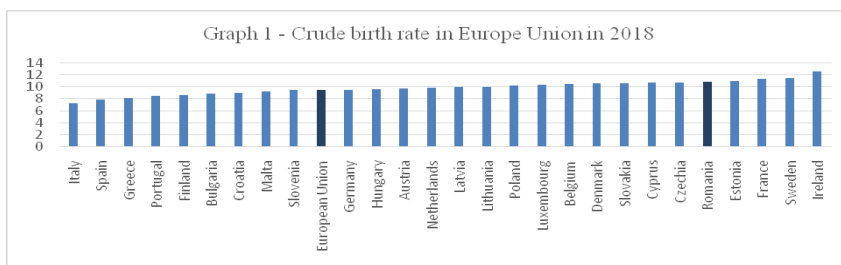
2100 2024). Well-designed family policies also promote gender equality by supporting both men and women in balancing work and family responsibilities, encouraging shared parental roles and fostering a more equitable division of labour at home and in the workplace (Szabó-Morvai et al. 2019).

According to Neyer (2006), one major limitation is that even though family policies can influence childbearing behaviour, they do not necessarily lead to an increase in the total fertility rate nor have a long-term effect on fertility levels. Economic conditions, labour market dynamics, and societal norms often play a more critical role in determining fertility outcomes. Family policies often face challenges in addressing issues such as sexual harassment, gender gaps in pensions, and cultural change, necessitating a more integrated and holistic approach to policy design and implementation.

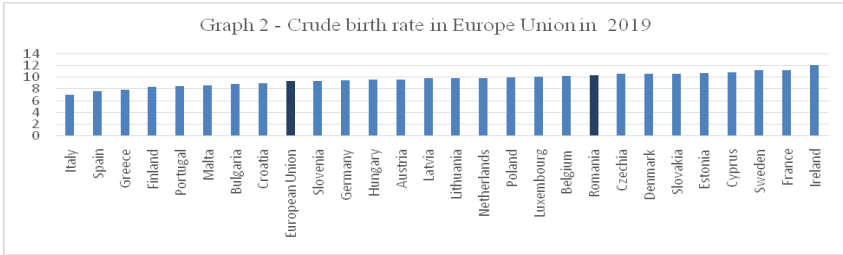
To address these issues, comprehensive policies are needed that ease the financial and logistical burdens of raising children, support women's labour force participation, and improve access to health care, thereby fostering an environment conducive to higher birth rates.

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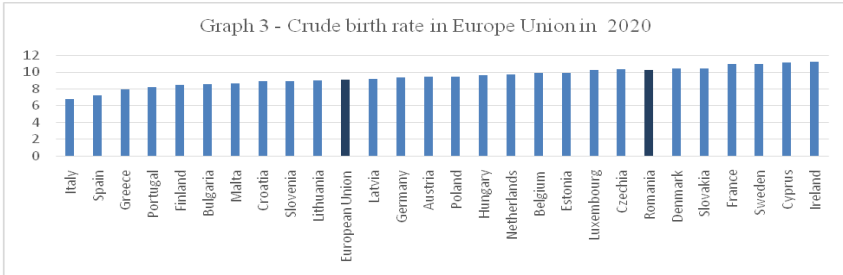
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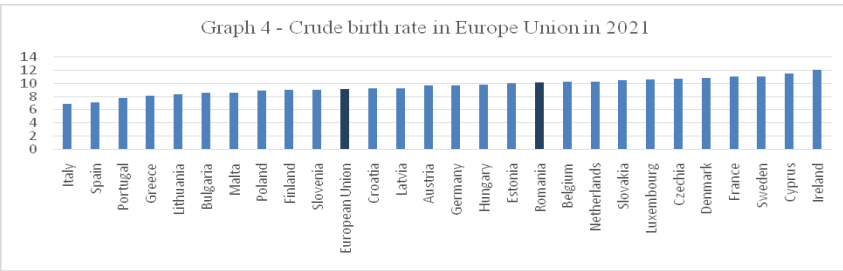
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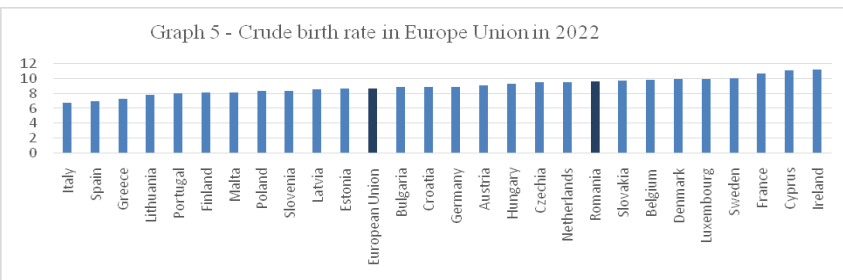
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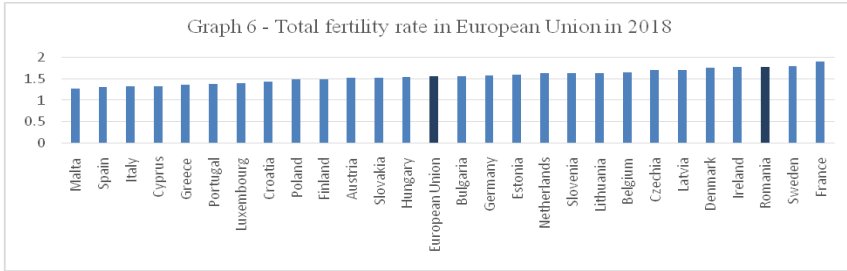


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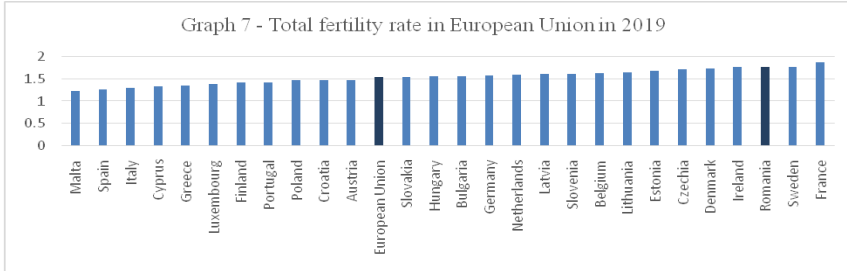


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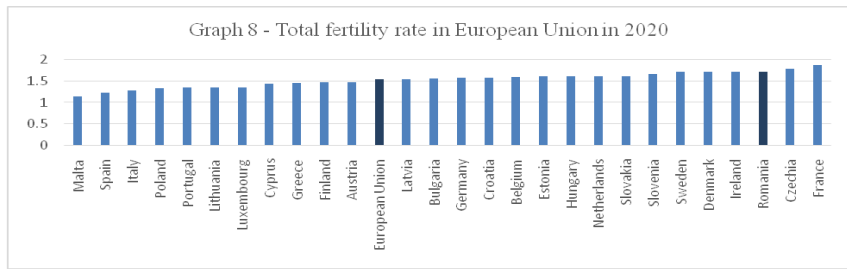
## Family policies



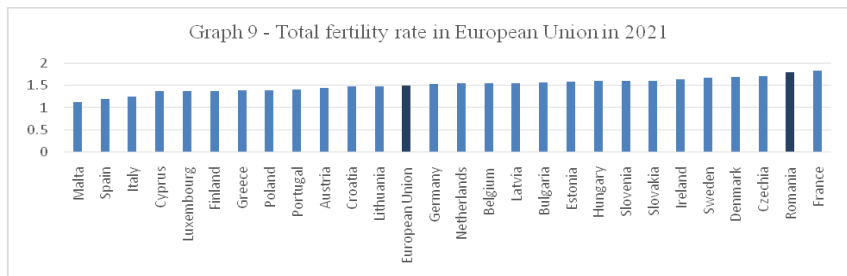
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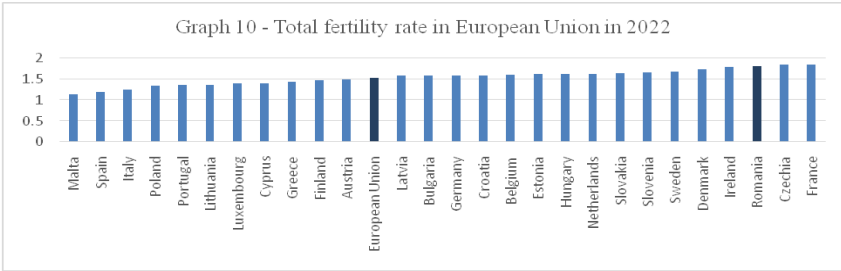
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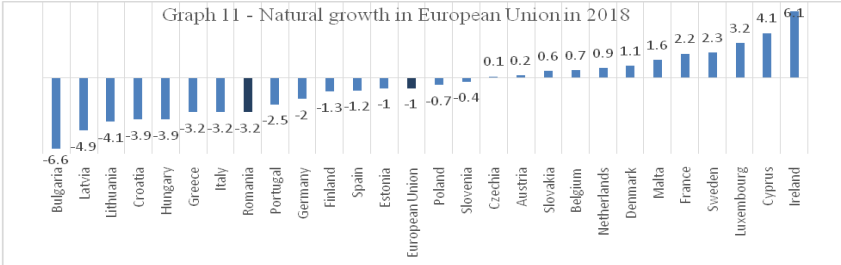
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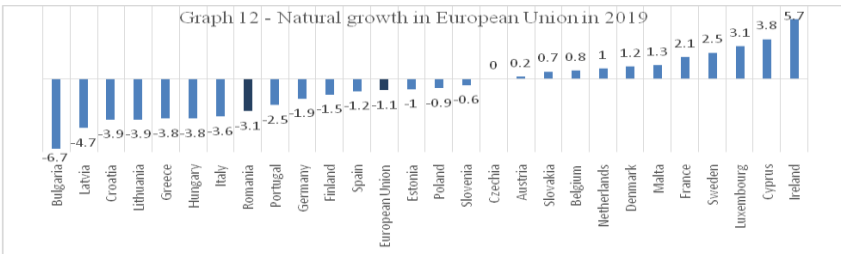
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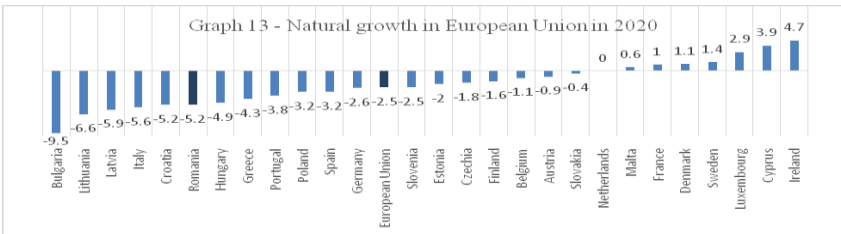
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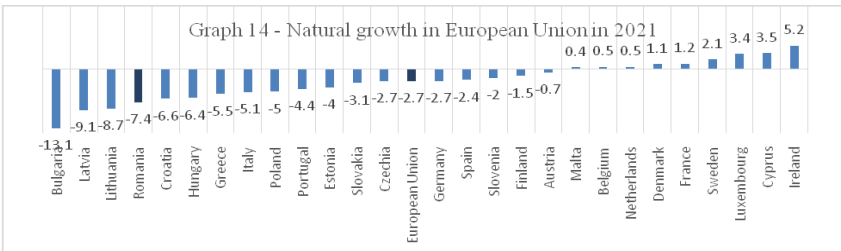
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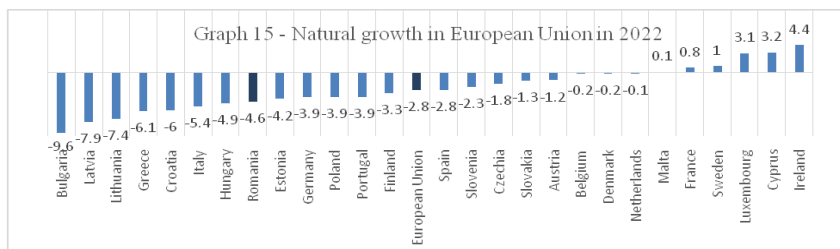


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