Major trends affecting families in Central and Eastern Europe

Dimiter Philipov
Vienna Institute of Demography
Prinz Eugen Str. 8
1040 Vienna
Austria
Tel. (+43 1) 51 581 7793
Fax: (+43 1) 51 581 7730
e-mail: dimiter.philipov@assoc.oeaw.ac.at

Introduction

The political and societal transition in Central and Eastern Europe as of the beginning of the 1990s brought about drastic transformation in family life. The data show significant changes in trends affecting families, such as accelerated postponement in family formation (trends towards marriage and births at later years in life); decline of entry into marriage and spread of non-marital cohabitation; abrupt drop in births and rise in extra-marital births mostly within the non-marital unions. Single-person families increased relatively to all families and the average size of families and households dropped significantly. Population ageing caused a rise in the share of old-age families and widowed persons. Massive international migration emerged. The 1990s saw also a rise in unknown issues of health. The initial spread HIV/AIDS is hardly any surprise, and it calls for a new culture of family planning in a region where induced abortions were a major means of contraception. The swift spread of sexually-transmitted and other contagious diseases such as tuberculosis were unanticipated.

Family changes were the consequence of a swift transition away from a totalitarian regime to a democratic society. The transition affected all areas of society: political, economic, social, and cultural. This powerful transformation caused radical changes in social norms and values and in family norms in particular. Social anomie and uncertainty affected decision-making in the family unit. The ambiguous societal situation brought about the rise of diverse coping strategies for family formation. One way of coping was by postponing crucial life events, refusal of irreversible events such as births, and replacement of hard to reverse events with reversible, such as substitute a non-marital cohabitation for marriage. Thus new family forms emerged and diffused rapidly in a changing ideational environment. Efforts for a family well-being included increased economic activity, rise in education, and rise in migration.

While some manage to cope, others have to rely on society. This is particularly apparent for single persons, single parents, families with children and older people. The transition swept away the social policy that was established during the socialist times. The construction and perfection of a new social policy that would correspond to the new society needed time. Hence social policy and family policy in particular was often slow in responding to the needs of the people. It was hampered by the necessity for parliaments to adopt numerous laws in a quickly changing society, as well as by the economic difficulties.

This paper describes recent trends affecting families with their causes and consequences. Along with region-specific trends, it studies also the extent to which global trends affecting families exercise their impact in countries in the region. The paper gives an outline of a wide range of problematic issues and concerns that will be helpful to policy-makers in their efforts towards further improvements in family policies.

1. Changes in family structure

The populations from Central and Eastern Europe exhibited a comparatively uniform demographic behavior before the start of the transition, i.e. until the end of the 1980s. Family formation was characterized by:

- Early and nearly universal marriage. More than 90 percent of all women would eventually marry and the mean age at first marriage (MAFM) was around 22-23 years. In Western Europe the MAFM was with a couple of years higher and there was no universality, in that the share of ever-marrying women was lower.
- Early and nearly universal birth of a first child. Analogously, the share of women who would have at least one child was more than 90 percent, and the first child was born around a year after the marriage.
- Prevalence of the two-child model.
- Low extra-marital fertility.
- Early stopping of childbearing: nearly 90 percent of all births in a cohort would take place before age 30. Completion of the family was achieved at an early age.

Important exceptions of these general rules were observed towards the end of the 80s in the former Yugoslav republics, ex-GDR, Hungary, Estonia. In these countries the loss of universality and postponement of marriage were observed during the socialist regime. The trends in the former Yugoslav republics and particularly in Slovenia were much like those observed in Western Europe.

These patterns broke down right with the start of the transition. Abrupt changes took place during the 1990s. This section continues with a description of the new trends followed by a discussion on causes and consequences from the perspective of family policy-making.

Trends in marriages and divorces

Table 1 gives the total first-marriage rate for women (TFMR, the sum of the age-specific rates of first marriage, observed till age 50) and the mean age at first marriage (MAFM). The TFMR is a period measure of the level of marriages, and the MAFM measures their timing.

Consider first the TFMR. The data in the table indicate a swift drop that was steeper during the first half of the decade. During the second half of the same decade the drop continued although not as drastic. Towards the year 2000 the TFMR was about two thirds to half of its values preponderant in 1990. The countries from the Western Balkans are the exception again, in that the fall of the TFMR was gradual and not as abrupt. The low levels of the TFMR reached around 1990 were observed later everywhere in the region. Possibly the fall in the TFMR in some countries such as Armenia, Azerbaijan, Georgia is partially due to under-registration of marriages that remain out of the scope of official statistics.

The MAFM marked similar drastic changes, although in the direction towards an increase. The highest augment of nearly 3 years was observed in Slovenia, the Czech Republic, and Slovakia: an unprecedented annual rise of nearly one third of a year.

The changes in the TFMR and MAFM reveal that the 1990s marked a sudden break from past behavior. Universality of marriage, indicated by levels of TFMR higher than around 0.9, was lost. Early entry into marriage, indicated by MAFM below around 22.5 years, gave way to a later start of family life. Both indicators approached values observed in all other parts of Europe before and during the 1990s.

Table 1: Total first-marriage rates (TFMR) and mean age at first marriage (MAFM)

	TFMR			MAFM		
	1990	1995	2000	1990	1995	2000
Albania [(1)]	0.99	-	-	23.2	23.0	23.5
Armenia	0.93	0.52	0.34	22.4	22.2	23.1
Azerbaijan	1.05	0.65	0.54	24.2	22.9	23.7
Belarus	-	-	0.65	22.0	-	22.6
Bosnia and H. [(1)]	0.67	-	0.75	23.3	-	24.6
Bulgaria	0.90	0.55	0.52	21.4	22.6	24.1
Croatia	0.70	0.63	0.64	23.1	24.3	25.3
Czech R.	1.02	0.50	0.50	21.6	22.7	24.5
Estonia	0.79	0.45	0.39	22.5	23.6	24.8
Georgia	0.80	0.61	0.41	23.5	23.5	24.6
G.D.R. [(1)]	0.64	0.40	0.47	23.3	25.3	26.0
FYR of Mac.	0.86	0.98	0.83	22.6	23.0	23.6
Hungary	0.77	0.56	0.49	21.9	22.9	24.6
Latvia	0.92	0.47	0.40	22.2	22.9	24.5
Lithuania	1.06	0.68	0.51	22.3	22.3	23.5
Moldova [(1)]	1.19	0.89	0.50	22.3	21.9	21.9
Poland	0.91	0.67	0.63	22.7	23.1	23.9
Romania	0.92	0.73	0.64	22.0	22.7	23.4
Russian F. [(1)]	1.00	0.75	0.60	21.9	22.0	22.1
Slovak R.	0.96	0.58	0.52	21.9	22.6	24.0
Slovenia	0.51	0.51	0.45	23.7	25.1	26.7
FR Serbia and Montenegro	0.78	0.76	0.68	23.4	24.0	25.0

[(1)] The last available year for Albania is 1991 for TFMR and 1999 for MAFM; the last available year for both indicators for Bosnia and Herzegovina is 1998; for the ex-G.D.R. 1997; for Moldova 2001; for Russia 1996.

Source: Council of Europe (2001); adjusted TFMR estimated by the author.

No data were available for the Ukraine.

The interpretation of these trends needs certain clarifications. First, it is known from demography that a rise in MAFM indicates a postponement of marriages. Postponement therefore effects the estimation of period indicators of level, such as the TFMR. An adjustment for the postponement effect would bring about a relative increase

in the TFMR. Such an adjustment would raise the values of TFMR but they will remain considerably lower than 0.9, i.e. the major inference of the break of the traditional pattern of universality of marriages remains valid (Philipov 2003a).

Second, the 1990s saw the rise of other trends related to family formation, and of extra-marital unions in particular. There is no official statistics that would reveal the development of this trend. Use can be made of the Fertility and Family Surveys that were carried out in several countries in the region during the 90s.

Table 2: Cumulative percentage of females who by exact age 25 have ever entered first partnerships that were non-marital unions

Country	Year of interview	Age at interview		
		25-29	30-34	35-39
Czech Rep.	1997	29.3	25.5	20.5
Estonia	1994	64.0	60.8	48.9
Hungary	1992/93	18.1	14.8	8.9
Latvia	1995	40.0	28.6	25.4
Lithuania	1994-1995	15.3	9.5	12.2
Poland	1991	4.1	3.6	2.8
Slovenia	1994-1995	42.5	36.0	23.1

Source: Tables 8c from the series FFS SCR's (diverse years) for the corresponding countries. Native-born sample for Estonia.

The data in table 2 give the proportions of women of three consecutive age groups who by exact age 25 have ever entered first partnerships that were non-marital unions. This proportion grows significantly higher for younger women. The only exception is observed in Lithuania, where the proportion among women aged 30-34 is lower than that for women aged 35-39. In Poland the proportion is very low because of the importance of religious values in this country.

Other survey data indicate that in Bulgaria, Russia, the Ukraine and Moldova the level of extra-marital cohabitation was considerably lower (Philipov, 2003a). Recent censuses in Bulgaria and Russia indicate though a significant rise in the share of people living in extra-marital unions as compared with the previous census or surveys. It is likely that the number of countries with a pronounced increase in this share has increased considerably towards the end of the 90s and the beginning of the first decade of the 21st Century. Extra-marital cohabitation diffused distinctly over the whole region.

Extra-marital cohabitation can be seen as a competing event to marriage. It may or may not be followed by a marriage at a later date. Hence, its increase may explain a considerable part of the drop in the TFMR and the rise in the MAFM. Extra-marital cohabitation is most likely to remain soundly in the region, as was the case in the other European countries one or two decades earlier.

The countries from the region do not have detailed statistics on remarriages. Data on share of remarriages compared to all marriages reveal that this share remained roughly constant during the 1990s. Hence the trend in remarriages was much like the trend in first marriages.

Trends in divorces did not mark abrupt changes during the 1990s (Dorbritz, 2003). They were influenced considerably by legal changes, which had only a short-time temporary effect. A high total divorce rate (TDR) around 0.4-0.5, among the highest in

the whole of Europe, was observed in Estonia, Latvia and Lithuania. Similar levels were observed in these countries before the start of the transition. A level of 0.5 indicates for example that the persistence over time of this regime of divorces would lead to the break of around 50 percent of all marriages. High temporary peaks were observed in 1992 and 1993 when the break of the ex-USSR took place. In the Czech and Slovak Republics and Hungary the TDR was on the slight rise before the start of the transition in 1989 and reached a level of around 0.35 in the Czech Republic and Hungary and 0.25 in the Slovak Republic. These levels were characteristic for Western European countries. During the 1990s the TDR increased slightly in the three countries. A TDR below 0.2 was observed in Bulgaria, Croatia, Poland, and Romania. Fluctuations during the 90s did take place but the level of 0.2 was rarely surpassed.

Thus the trends of change in divorces during the 90s were either towards a slight increase or towards preserving a level observed during the end of the 80s. Recalling the drastic drop in marriages it can be concluded that during the 90s there was a relative increase of divorces as compared to marriages. In general, patterns of divorce are diverse among the countries in Central and Eastern Europe, unlike other demographic trends.

Trends in fertility

Falling birth rates and rising mean age at birth by order constitute another significant feature of demographic change in the 90s that had a sound impact on families. Table 3 below informs about the level and timing of fertility through the total fertility rate (TFR) and the mean age of the mother at birth of the first child (MAFB).

In 1990 the TFR was around or a little below replacement level (app. 2.1) in most of the countries in the region. The Western Balkan countries of Slovenia, Croatia, and Bosnia and Herzegovina were an exception, in that around 1990 fertility was considerably lower. In 2000, ten years later, the TFR was below 1.4 everywhere in the region except for some Balkan countries, namely Albania, FYROM, and Serbia and Montenegro. Bulgaria in 1997 and Latvia in 1998 marked the lowest level of fertility as measured by TFR, 1.09, registered anywhere in the world except in times of war, epidemics, or famine. A sudden and drastic drop was observed in all countries. It was usually fast during the first half of the 90s and somewhat leveled off towards the end of the decade. The latter trend indicates that in the beginning of the 21st century fertility was around its lowest low level. There is no indication though of a compensating increase, as one would probably expect. The fall in fertility did not turn out to be a temporary short-term trend.

Albania, Armenia, Azerbaijan, Moldova and other countries with a traditionally high level of fertility made no exception. In these countries the TFR decreased by 1 and even more, i.e. by more than one child in a family.

Table 3: Total fertility rates (TFR) and mean age at first birth (MAFB)

	TFR			MAFB		
	1990	1995	2000	1990	1995	2000
Albania	3.00	2.62	2.10[(1)]	-	-	-
Armenia	2.63	1.63	1.11	22.8	22.5	23.0
Azerbaijan	2.74	-	1.71	-	-	24.7
Belarus	1.90	1.38	1.31	22.6	22.4	23.4

Bosnia and H.	1.71	1.23[4]	1.21[2]	23.6	-	-
Bulgaria	1.82	1.23	1.26	22.0	22.4	23.5
Croatia	1.67	1.48	1.36	24.1	25.0	25.4[1]
Czech R.	1.90	1.28	1.14	22.5	23.3	24.9
Estonia	2.04	1.32	1.39	22.9	23.0	24.0
FYR of Mac.	2.06	2.13	1.88	23.4	23.7	24.3
Georgia	2.19	1.69	1.35	-	25.0	24.2
Hungary	1.87	1.57	1.32	23.1	23.8	25.1
Latvia	2.01	1.26	1.24	23.0	23.3	24.4
Lithuania	2.02	1.49	1.27	23.2	23.1	23.8
Moldova	2.39	1.74	1.30	-	-	-
Poland	2.05	1.62	1.34	23.3	23.8	24.5
Romania	1.84	1.34	1.31	22.6	23.0	23.6
Russian F.	1.90	1.34	1.21	22.6	22.7	23.0[3]
Slovak R.	2.09	1.52	1.29	22.6	23.0	24.2
Slovenia	1.46	1.29	1.26	23.1	24.9	26.5
Ukraine	1.89	1.38	1.10[1]	-	-	-
Serbia and Montenegro	2.10	1.90	1.67	23.9	24.5	25.0[1]

[1] in 1999; [2] in 1998; [3] in 1997; [4] in 1996.

Source: Council of Europe (2001)

It should be noted that the low levels of the TFR were and are observed in other European countries and elsewhere in the world. The uniqueness of the trends observed in Central and Eastern Europe is in the unexpectedly drastic speed of the fertility fall.

The mean age at the birth of the first child experienced much the same trends of change as the MAFM (table 3). It increased suddenly and significantly by about 1.5 to 2 years towards 2000. There is no indication of a halt in its increase. Its rise was steepest in the countries that witnessed first the start of fertility decline, namely ex-Yugoslav countries, the Czech Republic, Hungary, as well as the Slovak Republic. Western European countries have experienced a similar rise in the MAFB, and in some of them its rise during the 90s was as steep as that mentioned above. The rise in the MAFB indicates a postponement of the first birth. This is the major change observed in the age-specific schedule.

The fall in fertility by order of births had its specific features, discussed here in terms of the total fertility rate specified by order of birth. Births of the first child decreased significantly, and this drop was about the same as the one described for overall fertility. TFR of first order was around 0.9 and higher before the start of the transition, thus indicating universality of the birth of at least one child. Towards the end of the 90s it dropped down considerably below 0.9. This trend indicates a break of the universality of having children. Voluntary childlessness came on the rise. The drop in births of the second child was a little softer but strong enough to indicate a break of the universality of the two-child model. Births of order higher than the third did not experience a similar decrease though. It is likely to assume that a certain sub-population that has had a high level of fertility in the past has preserved these high levels, or that the drop in its fertility was not as fast as in the whole population. Such sub-populations could be identified by ethnic group, for example Roma/Gypsies, or by region, or by religiosity.

The transition period brought about a drastic increase in the number of extra-marital births (table 4). The changes were of a moderate scale only in the ex-Yugoslav countries of Croatia, FYROM, and Bosnia and Herzegovina. The share of extra-marital births was particularly high in Estonia, Latvia, and Slovenia as well as in Bulgaria and Georgia.

Table 4: Extra-marital births per 100 births

	1990	2000
Belarus	8,5	18.6
Bosnia-Herz	7,4	10,1(2)
Bulgaria	12,4	38.4
Croatia	7,0	9.0
Czech Rep.	8,6	21.8
Estonia	27,1	54,5
FYR of Mac.	7,1	9,8
Georgia	18.2	40.4
Hungary	13,1	29.0
Latvia	16,9	40.3
Lithuania	7,0	22.6
Moldova	11,1	20.5
Poland	6,2	12.1
Romania	...	25.5
Russian F.	14,6	28.0
Slovak Rep.	7,6	18.3
Slovenia	24,5	37.1
Ukraine	13,0	17,4(1)
Serbia and Montenegro	12,7	24.3

(1) in 1999; (2) in 1998
Source: Council of Europe (2001)

The spread of non-marital unions could well explain a significant part of this new trend in extra-marital births. That is, the latter appear within a union and the babies have their two parents, although the union is not formed as a marriage. Note should be taken that the non-marital unions need not be like a traditional marriage that has taken place *de facto* but not *de jure*. It is possible that the under-registration of *de facto* marriages is the reason for the rise in non-marital births in Georgia.

Fertility trends that emerged during the 90s clearly indicate a break from past behavior, as was the case with the marriages. The societal transition in all countries in the region caused a total break from the universality of motherhood; a disappearance of the two-child model; significant postponement of births to later years in life; later completion of family size; increase in births outside of marriage, although possibly in non-marital unions.

Changes in household composition

Table 5 illustrates changes in household composition through two indicators: share of single-person households and average size of households. These indicators can be observed during population censuses or surveys and for this reason they are given for specific year for each separate country. The data referring to the period after 1990 are scanty because surveys with relevant information were rare and the data from population censuses that were carried out around 2001-2003 are still not available.

The data indicate the same long-term trends in all countries, namely an increase in the share of single-person households and decrease in the average size of households. The information about changes during the 1990s is insufficient in order to draw sound conclusions but the data give the impression that these changes did not differ considerably from those that took place during the preceding decades.

Table 5: Share of single-person households, in percent, and average size of households

Bulgaria	(1)	1965	1975	1985	1992	2001[a]
	(2)	16.9	16.8	18.2	19.7	22.4
	(3)	3.2	3.2	3.0	2.9	2.7
Czech Rep.	(1)	1961	1970	1980	1991	
	(2)	16.0	19.1	24.2	26.9	
	(3)	3.0	2.8	2.6	2.5	
Hungary	(1)	1960	1970	1980	1990	1995[b]
	(2)	14.5	17.5	19.6	26.1	26.1
	(3)	3.1	3.0	2.8	2.6	2.6
Latvia	(1)	1959	1970	1979	1989	1995[b]
	(2)	10.1	9.9	10.7	9.4	12.4
	(3)	2.3	2.4	2.4	2.4	2.4
Lithuania	(1)	1960	1970	1979	1989	1999[c]
	(2)	19.6	21.9	21.7	21.5	22.7
	(3)	3.2	3.0	3.0	2.9	2.7
Poland	(1)	1960	1970	1978	1988	1995[d]
	(2)	16.2	16.1	17.4	18.3	19.7
	(3)	3.5	3.4	3.1	3.1	3.1
Slovenia	(1)	1960	1970	1980	1990	
	(2)	17.8	17.3	17.1	18.0	
	(3)	3.5	3.4	3.2	3.1	

Titles of rows in each country: (1) Year of census; (2) Share of single-person households, in percent; (3) Average size of households

Source: tables 2 from the FFS SCR's (diverse years); (a) 2.5% sample from the 2001 population census; (b) Household survey; (c) Statistics Lithuania (2001), (d) micro-census data.

Diverse demographic and economic forces influenced the dynamics of household composition. The fall and postponement of childbearing and marriages, as well as the upsurge in emigration have a direct impact on household size and lead to its decrease as well as to the relative rise in single-person households. Old-age mortality was dropping down during the last decades. Since mortality among men is higher, the number of widows was on a continuous increase. They form a significant part of the single-person households. For example, according to the 2001 population census in Bulgaria the share of single women is about 63% of the single-person households, and more than 80% of them were beyond age 50, while among the males the latter percentage was 57%.

The worsening economic situation during the first decade of the transition contributed to a rise in the costs for the maintenance of a household. When living together in one household people could save due to economies of scale where common household expenses such as electricity, water, heating are considered. Rising prices on the housing market additionally counteracted the effect of the demographic trends and emigration. The impact of these economic factors is eased by the culturally based tradition of living in extended household in many of the countries in the region.

A small number of single-person households comprise young people who continue their education out of the settlement where they usually reside and who can afford paying for a single-person dwelling. An increase in their number will speed up the rise in single-person households. It should be noted that students who live in hostels are reported as living in common households.

Before the start of the transition, the economic factors influencing the household size were not as strong. Household size changed primarily due to demographic changes. During the transition demographic increased in importance but their impact was counteracted by the economic factors. Indicators like those exhibited in table 5 cannot reveal this restructuring in the causes that changed the household size. The complexity of reasons calls for a more profound policy approach than that maintained in the past.

It can be expected that in the future the demographic factors will continue their dominance and will cause therefore a continuous decline in the household size and rise in the share of single-person households.

Single parenthood has been traditionally uncommon in the countries of the region. FFS data (tables 4 from the FFS SCR's) indicate that the share of single motherhood was around 7-8 percent in the Czech Republic, Hungary and Poland at the time of survey, 11 percent in Lithuania, 18 percent in Estonia (native sample) and Latvia. Cases of single fatherhood were below 1 percent and usually rounded to 0 percent. Although the data do not reveal the dynamics of single parenthood, it is clear that the share of women who have the burden of caring alone for their children is significant. Traditionally single mothers will rely on relatives and particularly on their parents. Thus, it can be connected to a living arrangement where three generations reside together.

Causes of the recent demographic trends in fertility and nuptiality

The unprecedented changes in patterns of marriage, cohabitation, childbearing and in family formation in general, need systematic analyses for the explanation of their causes and consequences. The availability of such analyses underlies the identification of issues subject to family policies.

Demographers discuss two main theoretical approaches that are relevant to understanding the reasons for the sudden emergence of the new demographic trends. One is based on the impact of social and economic factors, and the other on ideational change. Both intersect on the significance of social environment that includes such issues as social anomie, social capital, and social networks.

The *economic approach* (Becker 1991 and other works of this author) emphasizes the significance in the change of direct and indirect costs of children. In the context of the transition in Central and Eastern Europe it refers to the sudden drop in well being with the start of the transition. During the 1990s the people in the region experienced an overall drop in income, impoverishment for many and enrichment for few, rise in

unemployment, extended working time on two or more jobs. Many people did not experience impoverishment but felt deprived being concerned with the relatively low income earned for their labor input. Thus relative deprivation increased. Prices of goods and services related to the household and family increased and therefore people were likely to postpone the formation of a new family. This rise was also connected to the expenses for child-care. Direct costs of children augmented. Indirect costs also increased because of the rise in prices of other goods and services. Opportunity costs of child-care increased because the drop in income forced people to work harder and longer for maintaining the level of living they have been accustomed to. Indeed, opportunity costs decreased in some rare cases where the husband's income was assessed as sufficient for the family and the wife could devote more time to household activities and child rearing. In general, rise in direct and indirect costs of children caused a postponement and later refusal of births. The effect of rising costs and fall in income was similar where marriages are considered.

Economic theory implies that structural market changes entail consequent changes in the labor market. The latter lead to the rise of new professions requiring relevant education, hence restructuring of human capital. These changes lead to the engagement of many young adults in education. The latter affect decisions about family formation by postponing irreversible, crucial events such as marriage and childbearing and rearing that could impede the accumulation of knowledge. People who were able to find well-paid jobs were in a similar position and were likely to postpone irreversible events like the ones mentioned above.

Worsening economic situation is connected to rising economic uncertainty. Families that could acquire reasonable income today cannot be sure that they would have it tomorrow. Uncertainty had a pronounced impact on decision-making, particularly for irreversible events like marriage and births. A rational decision-maker tends to postpone such events until uncertainty will decrease. Thus marriages and births were postponed. A rational decision-maker is likely to substitute an irreversible event by a reversible one, where it is available. Since dissolution of an informal marriage such as cohabitation is easier than a formal divorce, cohabitation quickly replaced marriage. Maintenance of an informal union diffused as an accepted form of family, and having children in such a union soon became common as well.

Therefore the economic difficulties experienced by the greater part of the population in the region caused postponement and fall in marriages and births, replacement of marriages by cohabitation as well as rise of extra-marital fertility.

Ideational changes form a second grand approach in the explanation of the demographic trends observed recently in Central and Eastern Europe. It rests on the significant changes in social norms and values observed before and after the start of the transition. Ideational change was observed in all other parts of Europe. It caused the development of new demographic trends known also as the second demographic transition (Leasthaeghe and Van de Kaa 1986, Van de Kaa 1987). Major directions of ideational shifts refer to long-term secularization, rise in individualism, equalization of gender roles, rise in female autonomy, rise in tolerance to others' opinions and preferences, etc. (Lesthaeghe and Surkyn 1988; Lesthaeghe and Surkyn 2001 discuss value changes in Central and Eastern Europe). Tolerance eased the diffusion of new forms of families, such as non-marital unions and births in these unions. Rise in female

autonomy helped women become independent from men through their own income. Hence they could postpone marriages and births and would often prefer to do so as a result of an increasing desire to participate in the work process.

Ideational changes in Central and Eastern Europe had their own way of development. The totalitarian regime would not tolerate all changes, but it supported secularization and female autonomy. Ideational change has begun before the transition, although its consequences in terms of individual decision-making were hindered by the regime. The break of the non-democratic regime permitted the accelerated spread of new norms and values, much like the way they spread in other parts of Europe, although at a much faster speed. Thus their impact on the demographic trends was greater than the one observed in Western Europe.

It is mainly these changes that caused an earlier start and a more uniform change in the demographic trends observed in Slovenia, Croatia, and to some extent in Hungary. Ideational changes imply that the diffusion of new family forms, such as non-marital cohabitation, single parenthood as well as having no children, has risen as the result of changed behavior that has been accepted by a society where tolerance dominates. Traditional social norms have given way to new norms. While in Western Europe this change of norms has taken place gradually, for many decades, the ideational approach implies that in Central and Eastern Europe the change of norms has taken place within an unusually short period of a few years. It is uncommon that social norms change that rapidly.

Clarification is provided by a closer look at the social transformation observed in the region. The start of the transition marked a break from the past ideology that imposed its own norms and values. Democracy did not come immediately to replace the previous regime. Its establishment could only be gradual, through considerable changes in the political system, economy, society and culture. Broken old norms and values could not be replaced immediately by new ones. A period of hiatus appeared that was a period of normlessness, or anomie. On the one side, lack of norms contributed to the easier spread of new behavior because old norms were not there to exercise their resistance. On the other side, lack of norms made personal orientation more difficult. People had less guidance in their choices. That contributed to the rise in social uncertainty that enforced the effect of economic uncertainty. Therefore, social anomie contributed to the development of new demographic trends parallel to ideational change.

In this situation of hiatus people cannot fully rely on the transforming social, state and local institutions. They can rely on their social ties for diverse kinds of support. When one is able to raise support from his or her social environment, from the personal or family network of friends and relatives, one can have greater hopes for overcoming economic difficulties and uncertainty in life. Therefore ability to raise support from others acquires a primary importance in the orientation in life. Thus, one accumulates what is known as social capital at the individual level. For example, one may rely on his or her social capital for getting help for the construction of a house; for rearing a child; for finding a job. The higher the social capital, the better are the chances for dealing with life problems. Such people are more likely to enter into a marriage and have children. Philipov (2003b) has found that exchange of help with friends and relatives contributes to higher intentions for having a second child in Bulgaria and Russia.

Social capital is considered here at the individual level. At the level of community, institutions and organizations and at the overall societal level social capital has deteriorated as a result of anomie and reorientation of institutions during the transition process (Rose et al. 1997).

This short outline of the major explanations for the recent demographic trends concerning family formation reveals a wide variety of reasons that have their parallel impact. It appears that adequate family policies have to incorporate matters of the economic situation of the family; the desire of family members for higher education and professional specialization; changing norms and values that affect families; the impact of social anomie on at least some groups of the population; the building and accumulation of social capital. These matters need a thorough study both for the identification of the proper groups of the population that they mostly refer to, and for the identification of relevant policy instruments. The scientific literature is unfortunately quite scarce in this regard.

2. Rise of migration

During the times of the totalitarian regime international migration was dominated by political moves, such as during 1968 and the succeeding years from Czechoslovakia, and by ethnic moves, such as post-war return of ethnic Germans from Czechoslovakia, Poland, the ex-USSR. During the 1980s there was an upsurge in emigration from ex-GDR and Poland in particular, not only for political but also for economic reasons. The end of the 1980s and particularly the start of the transition in the beginning of the 90s witnessed a sudden increase in migration in most of the countries in the region. Ethnic migration was observed particularly where newly formed countries are considered. Large-scale moves were observed among the new countries that were formerly within the ex-USSR, for example the return of Russians back to Russia. Analogous moves were observed among countries that comprised ex-Yugoslavia as well as between the Czech and Slovak republics. Large groups of ethnic Germans returned to Germany from the Ukraine, Russia, Romania. About 300,000 ethnic Turks that lived in Bulgaria left the country in 1989-1990 to settle in neighbouring Turkey, and two out of every three of them returned during the next 2-3 years. Ethnic flows are still going on with a rapidly decreasing intensity. In addition to these moves there were large flows of asylum seekers and refugees during the troublesome times of the civil wars of the ex-Yugoslav republics and in the Caucasian republics (Fassmann and Münz, 1994).

Economic migration was legally restricted by the countries, which received migrants from the CEE region. This restriction gave rise to illegal migration. The opening of the borders made it possible for numerous young adults to continue their education in Western countries. Officially they are not counted as emigrants but upon completion of education some of them would prefer to look for a job outside of their country of origin.

During the second half of the 1990s international migration flows lessened, in particular ethnic migration, asylum seekers and refugees. Labour migration gained significance among the diverse types of migration. Family reunification gained speed as a reason of migration too, because during the period of several years after the start of large-scale migration many families remained disunited for long time periods. In general,

migration flows from CEE countries to the West and to Western Europe in particular were considerably lower than it was expected in the beginning of the 1990s.

Registration of international migration is a significant problem in the countries of the region, although it is much the same problem as in the other European countries. Moreover, official statistics in some countries combines data for long-term migration with pendulum and shuttle migration. Illegal migration is of considerable magnitude. Criminal networks have been uncovered that smuggle people into the European Union, usually low-paid labor workers. This trend, termed as "privatization" of migrants, is on the increase (Pflegerl, 2002), particularly where immigrants use countries of Central and Eastern Europe as a transition route. Hence the real number of migrants is expected to be considerably higher than the one reported by official statistics.

Table 6 gives the numbers of immigrants and emigrants in 1998, 1999, and 2000 for CEE countries where data are available. The last column in the table gives the number of moves, i.e. the sum of immigrations and emigrations, over the three-year period, per thousand of the population. The latter indicator is a crude measure of the share of the population that is affected by migration. Indeed, families are affected by international moves independently of whether the latter are immigrations or emigrations.

Table 6: Immigrants and emigrants in 1998, 1999 and 2000

	Immigrants			Emigrants			Population in thousands, 1.1.2001	Moves per thous. [2]
	1998	1999	2000	1998	1999	2000		
Azerbaijan	5,404	4,806	4,361	10,498	9,142	9,947	8,081.0	5.5
Belarus	-	30,830	25,943	-	13,238	13,812	9,990.4	12.6
Croatia	-	32,910	29,368	-	14,285	5,394	4,381.0	28.1
Czech R.	-	9,910	7,802	-	1,136	1,263	10,266.5	2.9
Estonia	1,414	1,418	-	2,545	2,034	-	1,366.7	8.1
FYR of Mac.	-	1,118	1,199	-	141	172	2,012.7	2.0
Hungary	16,649	18,216	20,184	1,296	1,405	2,208	10,005.2	6.0
Latvia	3,123	1,813	1,627	6,291	3,660	3,473	2,366.1	8.4
Lithuania	2,706	2,679	1,510	2,130	1,369	2,616	3,692.6	3.5
Moldova	-	1,517	1,321	-	6,318	9,128	4,271.9	6.4
Poland	8,916	7,525	7,331	22,177	21,536	26,999	38,644.2	2.4
Romania	11,907	10,078	11,024	17,534	12,594	14,753	22,430.5	3.5
Russian F.	513,551	379,726	359,330	213,377	214,963	145,720	144,819.1	12.6
Slovak R.	2,052	2,072	2,274	746	618	811	5,402.5	1.6
Slovenia	4,603	4,941	6,185	6,708	2,606	3,570	1,990.1	14.4
Ukraine [1]	-	-	53,700	-	-	100,300	49,036.5	9.4
Total	570,325	509,559	533,159	283,302	305,045	340,166	318,757.2	9.1

[1] The data for the Ukraine refer to 2001.

[2] This column gives the number of moves (immigrations plus emigrations) per thousand of the total population, for the period of three years. Where data were available for less than 3 years, the average per one year was multiplied by 3.

Source: Council of Europe (2001 and other years), except for the Ukraine. No data or scanty data were available for countries not included in the table. Ukraine*: Demoscope Weekly*, N64, 2001. Apparently the data for the Ukraine published in the Yearbooks of the Council of Europe include shuttle and pendulum trade migration and these numbers were incompatible with those for the other countries.

Table 6 shows that the share of moves for a period of three years is 9.1 per thousand in the whole region (last column). This share is high in Croatia, Slovenia, Russia, and Belarus. These numbers are a minimum estimate. It is expected to rise considerably if the effects of unregistered and illegal migrations as well as a period longer than 3 years would be considered. For example, a case study for the Ukraine (Frejka et al., 1999) reveals that 30 – 40 % of the households have had at least one household member who has experienced at least one move abroad (shuttle and pendulum trade migration moves being included).

While table 6 refers to moves, the size of the population affected in some way by international migration is considerably larger. It comprises diverse non-movers, such as family and household members, friends and relatives, colleagues and neighbors, who are members of a migrant's social network. Migrants connect to the members of their social networks through diverse supportive relationships. The latter can be economic or can be a flow of information about the place of emigration.

It is not only international migration that affects family life. A significant part of internal migration exercises a similar effect, particularly in the cases where living apart for long periods takes place. Data for the countries from the Commonwealth of Independent States (CIS) indicate that internal migration is 5 to 10 times as large as international migration (*Demoscope Weekly* 64, 2001). Therefore the number of families and other relatives and friends who are affected by migration may rise several times as compared to the numbers in table 6 when internal migration is considered.

Case studies on emigration carried out in Poland and the Ukraine (Frejka et al., 1998, Frejka et al., 1999) reveal that the economic situation of the family is a major reason for the migration. Emigration turned out to be a successful coping strategy during the 1990s when nearly all countries in the region experienced significant economic difficulties. Emigration is expected to decrease with the improvement of the standard of living in the CEE countries. Inversely, these countries may become attractive to immigrants from less developed countries.

The two case studies reveal that a large part of the emigrants have achieved education attainment that is higher than the average. This is particularly evident where long-term migration is considered. Most of the migrants are younger people, aged 20 to 35 years. The share of male migrants aged 15-19 in Poland is particularly high (Iglicka, 2001).

Emigration bears numerous positive and negative aspects where the population of origin is considered. On the positive side can be found its contribution to the diffusion of innovative knowledge and skills. Emigrants may later return with accumulated human and financial capital. Where social life is considered, migrants contribute to the diffusion of norms and values that are characteristic for a democratic society. Thus they add to the integration of the populations in Central and Eastern Europe to the European values and in general to the process of globalization. On the negative side, emigrants who have higher education and/or experience can be of value to the country or community of origin. This is the brain-drain effect. While they solve their personal problems through emigration, their leave creates problems to the society that has invested in their education and career build-up.

Migration affects families economically, psychologically, and culturally. The discussion is complex and consists of various aspects. Here, I only want to deal with

some of their underlying features. Economically, disunited families may feel the lack of the emigrant's contribution to the family budget. Inversely, emigrants that manage to raise their income at the place of destination may send money home. Family reunification may be subject to difficulties experienced with the necessity to acquire another dwelling and household goods. Psychologically, the family is distressed by the separation. The stress may result in family conflicts, or inversely, may strengthen family ties. Culturally, migrants and their families find themselves in a new and often unfamiliar social environment. They need to integrate to the new social environment by adapting to local habits, traditions, and norms, and by learning a foreign language. Cultural differences lead to the construction of migration networks where people belonging to the same culture meet each other. Migration networks may delay the process of integration to the new society but they also may enforce it through the exchange of information about the local society.

These topics relate to migration and family policy. A major achievement at the international level with respect to these policies is the priority given to family reunification. Other achievements refer to supporting migrants and their families in their integration to the new society. Examples are provided by the support in learning a new language, support for schooling, vocational training, support for kindergartens, social insurance. Support is also provided regarding the construction of migration networks of migrants belonging to the same cultural group because they allow for the maintenance of higher social capital during the process of integration. Return migration should be encouraged in the CEE countries because population ageing and low fertility will lead to a decline in the labor force and to an increase of the burden for support of the elderly. Return migration can be encouraged by diverse economic instruments, for example by tax allowances or low-interest credits, as well as by instruments that would ease the adaptation of the return migrants back home.

Many CEE countries look forward to becoming members of the European Union. Others anticipate closer links with it. In both cases migration will contribute to a convergence of the two parts of Europe. Integration of migrants in a globalizing world will therefore be a topic of rising importance in family policies.

3. Demographic ageing and retirement

Population ageing has been recognized as a problem of demographic origin since several decades. It has first started in Western European countries and later in Central and Eastern Europe. Ageing continues and will continue in the next several decades (table 7 illustrates ageing in the countries of the European Union and in the CEE countries). It exercises diverse effects on the economy and social security. Contemporary problems in pension security are an explicit example.

Population ageing is a consequence of declining mortality and birth rates. The former leads to an increase in the number of survivors to higher ages. In relative terms it increases the share of older age groups in the population structure as compared to younger ones. The drop in fertility has a relative effect. It shrinks the population pyramid from the bottom and thus makes the older groups relatively larger.

Table 7: Population distribution in three large age groups, and the old-age dependency ratio (share of persons aged 65 and more, to those aged 15-64), in percent

Age group:	0-14		15-64		65+		Dependency ratio 65+/(15-64)		Rise in dep. ratio
	1990	2000	1990	2000	1990	2000	1990	2000	
Albania	32.5	32.7	62.1	61.2	5.3	6.1	8.6	10.0	1.4
Armenia	30.4	22.9	64.0	67.7	5.6	9.4	8.8	13.8	5.1
Azerbaijan	33.2	30.3	62.1	63.9	4.8	5.8	7.7	9.1	1.5
Belarus (2)	23.1	19.3	66.3	67.4	10.6	13.3	16.1	19.7	3.6
Bulgaria	20.4	15.7	66.6	68.0	13.0	16.3	19.5	23.9	4.4
Croatia	19.9	19.8	68.5	67.7	11.6	12.5	17.0	18.5	1.5
Czech Rep.	21.5	16.4	66.0	69.8	12.5	13.8	18.9	19.8	0.9
Estonia (2)	22.2	18.3	66.2	67.3	11.6	14.4	17.6	21.4	3.8
Georgia	24.6	20.4	66.1	66.0	9.3	13.6	14.1	20.6	6.5
Hungary	20.2	17.0	66.4	68.4	13.4	14.7	20.1	21.4	1.3
Latvia	21.5	17.5	66.5	67.3	12.0	15.1	18.0	22.5	4.4
Lithuania	22.6	19.8	66.5	66.9	10.9	13.4	16.4	20.0	3.5
Moldova	27.9	23.3	63.8	67.3	8.3	9.4	13.0	14.0	1.0
Poland	25.1	19.2	64.8	68.6	10.1	12.2	15.5	17.7	2.2
Romania	23.6	18.3	66.0	68.4	10.4	13.3	15.7	19.5	3.7
Russia	23.0	17.9	67.0	69.5	10.0	12.6	15.0	18.1	3.1
Slovakia	25.3	19.5	64.4	69.1	10.3	11.4	16.0	16.5	0.5
Slovenia (2)	20.5	16.3	68.6	69.9	10.8	13.8	15.8	19.7	4.0
FYR Mac. (1)	25.9	22.3	66.1	67.6	8.0	10.1	12.1	14.9	2.9
Ukraine	21.4	17.5	66.4	68.6	12.1	13.9	18.3	20.3	2.0
EU average (3)	18.1	17.1	67.3	67.0	14.6	16.0	21.8	23.8	2.1
CEE average	23.5	18.9	65.8	68.4	10.6	12.6	16.2	18.5	2.3

(1) Data for 1991, not for 1990
(2) Data for 1999, not for 2000
(3) Data for 1998, not for 2000
Source: WHO, (2002)

The process of ageing of the population has developed in all CEE countries during the recent decades. A comprehensive study is provided in Stolnitz (1992, 1994). It has become particularly intense with the drastic fall in fertility since 1990. During a period of only 10 years the share of the young population, aged 0-14, decreased by several points in all countries except in Albania and Croatia. Mortality did not change considerably during the same decade, except for the drastic rise in adult mortality in most of the ex-USSR countries during the first half of the 1990s. Its contribution to the ageing process was secondary as compared to the effect of the abrupt fall in fertility. Ageing is exemplified in the table by the significant rise in the share of the age group 65 and higher, observed in all countries.

Population ageing brings with it significant economic and social problems. Since it has begun earlier in Western Europe compared to the CEE countries, the latter can anticipate the upsurge of the same problems. Major economic problems are related to the ageing of the labor force as well as in regard to pension security. In general, providing care for a growing number of elderly persons creates difficulties not only for the pension security. Old people need more health and home care, and therefore their increasing numbers exercise a burden on social security. Table 7 illustrates changes in the

dependency ratio over the 10-year period. It has risen by 2.3 points on average, and in the year 2000 has achieved high values beyond 20% in nearly half of the countries, i.e. 20 persons aged 65+ will benefit from the social security contributions of 100 persons aged 15-64. Even if fertility were to begin a sudden and immediate increase, its effect on the dependency ratio will be felt not before 15-20 years later. Consequences of population ageing do not bear any postponement of social and family policy actions.

Thus, at the macro level society experiences a rising burden linked to the care for the elderly. The unfavorable macro-level circumstances bring about a rising importance of the micro-level, and particularly the family and the household as a unit that can provide care for its old members. Therefore, policy-makers could redirect some of the policy instruments towards helping the family take care of its elder members, rather than direct expenses towards a sophistication of the macro-level social security system. Such an approach can be particularly favorable in many CEE countries where the cultural tradition of close intergenerational relationship is persistent.

A discussion on issues related to ageing and the family needs to consider sex and old-age differentials in population ageing. Women live longer than men. In Central and Eastern Europe, male life expectancy at birth in the year 2000 was 69.3 years, while that for the females was 76.9 years (WHO, 2002). Women live on the average 7.6 years longer than men. On average these years are spent at old age and therefore after the death of the partner. Hence the number of old-age widows is very high. Old-age differentials of population ageing refer to the rise of the older and oldest-old people, those beyond age 85 and the centenarians. This rise is both in absolute and relative numbers. Families (households) can provide economic, social, and psychological support to their elderly members.

On the other hand, older persons provide care to children and sick family members. The contributions of older persons who are physically fit can be tremendous. Grandparents often assist to a great degree in socializing and educating the younger generation. The life experience of older people can offer valuable approaches to various problems that younger people face.

Provision of *economic and social support* by the family becomes imperative for most of the CEE countries. Pension funds were redesigned during the 1990s after the abolition of the centrally-planned economic system. Nowadays they are small and cannot cover the needs of the retired people for an adequate pension size. The latter is below the minimum level of living for a large part of the retirees, and the prospects for its increase in the near future are meager. The situation is analogous where other social security is considered, for example the one related to health. Thus the elderly have to rely primarily on their closest relatives for survival. Such a situation preserves traditional close ties among the old and the adult generation, with flows of goods and services in both directions, insofar as the elderly can provide care for their grandchildren, household work or provide housing to the younger family.

Institutionalization of the elderly in nursing homes and other old-age institutions is limited both because of the lack of tradition, and because of the economic difficulties experienced by society during the transition. In some countries institutionalization is viewed as stigmatic, in that adult children can be assessed as being careless to their parents. Institutionalization can be helpful where other sources of help do not work properly.

Aged people leave work and thus change considerably their social networks. They appear in a new social environment where socialization and adaptation become necessary. It is again the family, as well as the long-standing network of friends, relatives and neighbors, that can help them adjust to the new milieu. Communities can provide valuable help with organizing diverse meetings and celebrations for the aged and their families. Social capital therefore can be particularly important.

The latter topic is associated to the *physical and psychological* dimensions of family support to the elderly (Davey, 2000). Aged people undergo physical changes. They are subject to age-related chronic illnesses that negatively affect their ability to perform every-day common activities. In the CEE countries social services are provided in the extreme cases, such as the poor or the lone older people who need care. Hence, it is generally the family that will be the main provider of health support.

Psychologically, older people feel distressed by the numerous changes in their life, such as retirement or the loss of ability to perform daily activities. Particularly stressful is a loss of the spouse. Depression may often result. Family can help to overcome the stress by helping the aged person adapt to changing life conditions.

It can be generalized that on the basis of traditional intergenerational relationships the family can provide substantial and effective support to its old members and vice versa. Policies directed to the improvement of the well-being of the elderly therefore need to consider a careful balance among instruments designed for usage by the family and instruments designed at the level of communities and at the macro-social level. The former type of instruments include home leave, allowances for caring for an old person, tax allowances etc. The latter type needs a widening of the variety of institutions and social services, including obligatory one as a substitute for army service.

4. The HIV/AIDS pandemic

Before the transition, citizens of the CEE countries had only restricted contacts with the outside world. With the start of the transition borders opened and travelling towards and outside the region increased. Incidence of HIV and of AIDS so emerged and spread. Table 8 gives the yearly incidence of HIV.

Table 8: Number of new HIV infections

	1991	1992	1993	1994	1995	1996	1997	1998	1999	total 1991-1999
Azerbaijan	1	3	1	2	0	3	13	66	83	172
Belarus	12	21	10	5	8	1021	653	554	411	2695
Czech Rep.	13	23	27	38	40	50	63	31	50	335
Hungary	55	62	56	65	81	62	71	74	62	588
Latvia	3	1	5	8	21	17	25	163	247	490
Lithuania			4	9	11	12	31	52	66	185
Moldova	0	2	1	40	40	48	404	408	155	1098
Poland	559	481	384	423	539	551	579	638	527	4681
Romania			234	722	854	699	620	575	306	4010
Russia	82	86	108	158	196	1546	4399	3947	18230	28752
Ukraine	21	30	40	31	1490	5400	8913	8575	5827	30327
Total	772	732	897	1556	3338	9474	15870	15199	26113	73951

Note: The following countries were excluded from the table because of the small number of HIV-incidence over the whole period: Albania (total over the period from 1991 to 1999 equal to 48), Armenia (108), Croatia (101), Estonia (84), Georgia (88), Slovakia (58), Slovenia (107), FYROM (30). They are not excluded from the estimation of the totals.

Source: WHO, (2002)

The number of new HIV-positive cases each year is small as compared to western countries. The total number of incidents accumulated over the period from 1991 to 1999 is also small as compared to the total population of a country. Incidence of AIDS is lower: the number of clinically diagnosed cases during the same period, as reported by the same source, is 11328. According to these data it seems that the problem is manageable and there is lesser fear of AIDS-HIV pandemic as is the case with other regions in the world.

Yet what seems now a manageable problem can turn into a problem that will be out of control. Specialists fear that official statistics underreport considerably the real number of AIDS-diseased and HIV-positive cases. Experience of both medical workers and statisticians is limited, since the disease appeared in the region only several years ago. Sometimes, HIV-positive cases are confused with the AIDS disease, and as a result cases may be registered incorrectly. The scope of statistics is also problematic: sub-regions or sub-population groups are not comprised effectively and cases remain unreported. The disease bears a stigmatic character in society and the diseased often prefer not to disclose their situation and thus remain unregistered. In general, experts in countries from the region believe that there is a significant under-registration. According to the national coordinator on AIDS in Bulgaria the registered number of HIV-positive cases is 3 to 5 times lower (newspaper ‘Sega’, 28.11.2002). Russia is a drastic example. Table 9 illustrates the sudden rise in the number of incidents at the turn of the century.

Table 9: Number of new HIV infections (incidence) and accumulated number (prevalence) in Russia, 1996-2001

	1996	1997	1998	1999	2000	2001
Incidence	1528	4383	4064	19980	59506	88494
prevalence	2614	6997	11061	31041	90547	179041

Source: Prokhorov et al. (2002)

The numbers conveniently support the concentration of a HIV pandemic in Russia. The real number of infected people is considered to be much higher. According to indirect estimates of experts at the Joint United Nations Programme on HIV/AIDS, the prevalence of HIV infections towards the end of 2001 was around 700 thousand persons. According to Russian experts at the Center for AIDS in Russia the real number should be measured in millions. By far the most important reason for the rising number of cases is intravenous drug intake. It encompasses about 90% of all cases where reason of infection is known (Prokhorov et al. 2002, p.81). This number though is less than half of all registered cases. It is probable that sexual transmittance of the disease is another significant factor for its proliferation.

During the 1990s there was a spread of sexually transmitted diseases (STD-s). Incidence of syphilis and gonorrhea increased 30-fold in the ex-Soviet countries

(Gromyko 1999). According to the WHO HFA database, the incidence rate of STD-s was around 277 per 100,000 in 1996 in Russia, and it was close to that in Moldova, Belarus, and Ukraine. This rate was crudely 100 per 100,000 in the Baltic countries and some 40 per 100,000 in Bulgaria and Romania. In western countries it is around 2 per 100,000. During the most recent years there is a decrease in the incidence of STD-s in the CEE countries. The spread of STD-s is the result mainly of practicing unsafe sex, although medical equipment and pharmaceutical products are available. Where condoms are considered for example, supply is larger than the moderate demand. The problem is in the existing habits and beliefs.

The impact of the HIV/AIDS pandemic on affected families is multifaceted. Demographically, it leads to changes in family size through the death of family members. It will contribute to the rise in the share of single-parent families as well as in the number of orphans. The health status of the family will worsen and infertility will rise. Economically, the family will suffer because of increased health costs and cuts in income resulting from the inability of the infected members to exercise fully their working capacities. Socially, the stigma of the disease and the fear of contamination will lead to an isolation of the family from its social network. Diverse forms of discrimination towards families with infected members will arise, such as work discrimination and intolerance towards infected students in their schools. Last but not least are the psychological and psychosocial consequences of HIV/AIDS.

The HIV/AIDS pandemic is on the rise in many other countries from the region beside Russia. The swift rise in the number of affected families will cause significant problems in the health care system as well as in diverse social and economic policies oriented towards the family. Since the economies of the CEE countries cannot easily afford the expensive treatment of the disease, it might be seen as more effective to concentrate efforts towards preventing its spread. To this end it will be convenient to expand the application of family health protection programs that have been developed in the Western European countries. The latter may include both medical programmes as well as social programmes directed towards opposing stigma and stress, and pushing towards disclosure of the health status of HIV/AIDS infected persons (see for example Population Council 2002a, 2002b).

In addition, family planning programs can be helpful regarding education on safe sex. Developing policy measures could benefit from an increasing focus on drug abusers.

Note should be taken that aiming at the disclosure of the health status among the HIV-infected persons will lead to an increase in the official incidence rate that will indicate only a better registration and *not* a rise in the spread of the disease.

5. Impacts of globalization

The opening of borders at the start of the transition in the CEE countries made it possible to get more acquainted with western life styles. This process enforced the development of general societal change. The combined effect of both processes is known as “the globalization shock”. The latter is likely to exercise a profound impact on future demographic trends. This topic has not been studied in detail in demography, with the exception of relationships between globalization and migration (Simmons 2000).

Globalization will exercise its impact on demographic trends in the CEE countries through its main aspects as follows:

- *Economic globalization*: It includes issues like the formation of global markets, free trade, global division of labor and enhanced communications. Economic trends of this kind will enforce both pull and push factors of migration. They will cause significant changes in the labor market that will affect the working status of women and hence fertility and family formation. Both in the case of migration and in the case of family formation, the impact of economic globalization on demographic trends can be described in the framework of the available economic theories (Massey et al. 1993, Becker 1991). Their basic theses are described in brief below.

On one hand, future labor markets require a larger number of highly qualified specialists and experts. Human capital in some CEE countries is relatively high as compared to the level of the economy. This disequilibrium is likely to enhance capital flows. Under such conditions it can be expected that emigration of labor with proper human capital will decrease; moreover, immigration may rise. Where family formation is considered, the effect of expanding specialized markets can be diverse. Higher income may ease the impact of economic obstacles to union formation or births, while opportunity costs for household labor and child rearing will rise. The former may facilitate family formation, while the latter will impede it. New and well-paid jobs will require adequate professionalism that will invoke a prolonged education. The latter will impede family formation through postponement and perhaps refusal of events like entry into a union and births.

On the other hand, it is expected that globalization will give rise to part-time and menial labor in certain parts of the world. It can be argued that this will be the case in those countries in Central and Eastern Europe, where capital investment was delayed during the transition period and human capital has deteriorated or become obsolete. Part-time and menial labor is not very well paid. Since it involves often women, they can be disadvantaged under the conditions of a dynamic global change. Women's demographic behavior will then depend on their spouse's income. Where the latter is sufficient for the family, women may decide to leave employment and have children. Where the income of the family needs the woman's contribution, even low payment will have high opportunity costs and therefore births will be postponed or reduced. Persons that remain in these and other secondary labor markets may search for better opportunities abroad and hence contribute to a rise in emigration. Thus globalization is expected to increase inequality in labor payment. As a result there will be a diversification of demographic behavior as would be predicted by the economic theories. Trends of this kind may link to a relative rise in gender inequality (Kulke 2001).

In general, economic globalization can be expected to enhance the impact of economic determinants on demographic behavior and trends. Since this impact is multifold and controversial, it is difficult to predict its net outcome. A most likely expectation is that population subgroups will be diversely affected, and that change in the demographic trends will intensify. Their identification needs specific research.

- *Cultural and social globalization.* This refers to the interdependence of cultures to one another and the rise of multicultural societies. This type of cultural change takes place through the incorporation of elements of one culture into another culture. The process that governs this change is adaptation, not subordination (Robertson, 1992).

Adaptation is based on changing norms and values, and particularly on the spread of tolerance. A process like this leads to a merger of cultures and to a multicultural society. People of different ethnicity, religion, and spoken languages live together in one society. Cultural globalization does not refer to the subordination of one culture to another.

A multicultural society represents a blend of diverse and co-existing traditions, religions, languages, norms, and values. An ideational mixture therefore will govern demographic choices. It is likely that traditional norms will decrease their restriction on aspects of demographic behavior, such as early and universal entry into marriage or universally having of at least one child. The diffusion of innovative forms of demographic behavior will become easier, such as non-marital unions, extra-marital births, and rejection of having any births at all. New forms of family unions can appear that are now still unknown or rarely observed.

A multicultural society accepts migrants more readily than a mono-cultural one. Hence cultural diffusion will ease the adaptation of immigrants in the countries of destination and therefore will contribute to the rise in migration.

The CEE region is very diverse with respect to the culture of its peoples and to the degree of adaptation to other cultures. Hence inferences concerning the impact of cultural globalization on demographic trends would benefit where they are country-specific. A unifying view could be that, like in the case of the impact of economic globalization, changes in demographic trends provoked by the spread of new ideas and cultures will intensify.

It can be concluded that globalization will intensify the impact of economic and cultural factors that define demographic behavior. It will also diversify these factors, and therefore demographic behavior is likely to diversify. Policies need to adapt to such a diversified and speedy change.

Summary: effects of major trends on family life

All the trends described above exercise a significant impact on family life in Central and Eastern European countries. These trends have one common feature: they developed in a time of a historical societal change from a totalitarian to more democratic regimes. In this respect they are unique as compared to other parts of the world, and with western countries in particular. It is necessary to outline three most important aspects of this uniqueness. First, the change was swift and suddenly influenced all spheres of family life: both social functions of the family and personal care for family members. The speed of change made it difficult for families to accommodate to new conditions. Second, the change provoked a weakening in state institutions, including those that relate to family issues. Thus families faced the necessity of fulfilling their functions under lessened support by state and local institutions. Third, the transition caused a break of norms and values. Family members had to get an orientation about crucial life decisions in conditions of significant uncertainty, along with a considerable rise in the personal freedom of choice.

The most important inference of the above discussion is that the value of the family changed considerably, analogously to changes observed earlier in the western societies. The preference of non-marital cohabitation to a marriage and the refusal of

births indicate a decrease in family values and possibly of the value of children. Social functions of the family, such as reproduction, are on the decline.

The societal transformation has affected child rearing and in particular socialization of children. Children grow up in a social environment characterized by weakened norms and institutions. Thus the family fulfills its social function of socialization under worsened conditions of life, even though economically the family unit could be doing well. The family has not received the expected support by state and local institutions or schools, since they were themselves in a transition. To this could be added the weakening value of the family that cannot remain unnoticed by children in the process of their socialization. Hence the family is less able to control self-destructive behavior of the children, such as unsafe sex or drugs intake, or the spread of deviant behavior that may arise as a result of wrong perception of unknown values in a globalizing multicultural society.

It should be clear that these negative tendencies observed during the transition were unavoidable, just like the transition period itself was unavoidable. The societal change is headed towards a democratic regime, and the social hiatus is almost over in some Central and Eastern European states. Others are expected to follow soon. The transition has approached its end and the timing is good for the reviving and structuring of adequate social policies. The family today is in a changed environment and needs better conditions for the fulfillment of its basic functions.

For this purpose the family needs a support from state institutions. Family policies are the main pillar of this support. Here another problem becomes evident: what kinds of family policies are needed? Before the transition they were organized in accordance with the socialist regime, and during the transition family policies were weak, although existing. There is a need of their fundamental restructuring and redirecting towards family need as required by the contemporary more democratic society.

The dilemma is whether the family policies should be market-based or needs based. The latter are based on tax transfers while the former make use of market-oriented policy instruments. This topic bears a significant scientific discussion (Gauthier 1996, 2002). Gauthier (2002) for example distinguishes between two main theoretical determinants of family policies. One group of theories (the theory of industrialization along with theory on evolution and the structural-functionalist theory) studies the relationships between demographic and economic change in the family and family policy responses. The other group refers to actor-based theories. It studies the roles of various actors in the development of welfare (tax-transfer) policies, such as political parties, the government, women's movements and other civil organizations. The latter theoretical approach describes a more diverse basis for family policies that seems to be more adequate to the speedy transformation in the Central and Eastern European countries. It is in this light that more studies on the "work-and-nurture" problem have to be carried out, i.e. the problem of the arising conflict between the two roles of women as workers in society vs. nurturing their children; studies on family issues like health and education, on socialization, emotional care for family members and care for the elderly.

In conclusion, effective social policies are needed to address the effects that the major trends affecting families as outlined above have had. The trends challenge the ability to fulfill basic functions of production, reproduction, socialization as well as needs of family members regarding health, nutrition, shelter, physical and emotional care and

personal development. Policies should be designed to tackle these areas of vital concern for families in Central and Eastern Europe. They should take into consideration the needs of all family members and deal with all family forms to benefit the social development of society as a whole.

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