

**Regional (European) Population Meeting
Budapest, 7-9 December 1998**

Country Report of Belgium

The country

Belgium is a relatively small country of 30,528 km² in Western Europe, located on the North Sea. It is surrounded by the Netherlands (north), Germany and Luxembourg (east and south-east) and France (south).

After its independence from the Netherlands in 1830, Belgium became a constitutional monarchy in 1831. There are 3 official languages: Dutch (60% of the population), French (39%) and German (1%). Since the 1970s there is an ongoing process of regionalisation. In 1977 the country has been divided into 3 regions: Flanders (the Dutch-speaking region in the north), Wallonia (the French-speaking region in the south) and Brussels, the capital region, which is officially bilingual but predominantly francophone and is situated in the Dutch-speaking part of the country. In 1993 Belgium has become a federal state with legislative and executive bodies at the regional and community levels.

Since 1948 Belgium has been united with the Netherlands and Luxembourg into an economic union (Benelux). Belgium has been a member state of the European Union (EU) since its inception in 1957 (then known as the European Common Market) and a member of the United Nations since its beginnings in 1945.

The population

In 1998 the country is counting slightly more than 10 million inhabitants (according to the population registers, the precise number was on 1 January 1998 10,192,264). Fifty-eight per cent of the population lives in the Flemish region; 33 per cent in the Walloon region; and 9 per cent in the Brussels region. About 91 per cent of its residents are of Belgian nationality; 9 per cent are foreigners. The *population of foreign origin* is about evenly distributed between the three regions (Flanders: 31%, Wallonia: 37%, Brussels region: 31%). Consequently, there exist important differences regarding their share with respect to the total population and Brussels is by far the region with the highest proportion of foreigners (Flanders: 5%, Wallonia: 10%, Brussels region: 30%). The largest numbers of foreigners come from the following countries: Italy (23%), Morocco (15%), France (11%), Netherlands (9%), Turkey (9%). The presence of foreigners from countries outside the EU is a rather recent phenomenon. Since the 1990s they constitute 35 per cent of all foreigners, of which Moroccans and Turks represent by far the largest part (71%).

According to the latest national *population projections*, the Belgian population could slightly increase to 10,338,000 inhabitants by 2020 and would then start to decline, falling back to 10 million by 2050.

Mortality has been declining at a fairly steady rate since the beginning of the 20th century. For the years 1995-1997, life expectancy at birth was estimated at 74 years for men and 81 years for women. Between 1970 and 1992, the infant mortality rate has fallen from 18 per thousand to 7 per thousand for women, and from 26 per thousand to 9 per thousand for men. It is assumed that this improvement will continue in the future (the projections assume a life expectancy at birth for 2050 of 82 and 88 years for men and women, respectively).

As in all industrialised countries, *fertility has* been declining in Belgium in the last 30 years. Couples want less children and there is the continuing trend of postponing the first birth. According to results of the latest population census in 1991, in Flanders and Wallonia, hardly 50 per cent of the women in the age bracket 26-30 had experienced a first birth by the time they had reached age 25; for women in the Brussels region, not more than 30-35 per cent had experienced a first birth by that age. The decline in fertility and the changes in the timing of childbearing are translated in the gradual decrease of the (period) total fertility rate, from 2.71 children per women in 1965 to 1.69 children in 1980; 1.51 in 1985; 1.62 in 1990; and 1.55 children in 1995. In the population projection, it was assumed that fertility would stabilise and that women born in 1970 and later would experience a life-time fertility of 1.75 children.

Also as in the other industrialised countries there has been a decline of the number of marriages recorded every year. This is, however, not so much the result of the fact that people tend to marry less, but rather the result of the increasing postponement of first marriage. The official statistics show an increase of the mean age at first marriage for women from 22 years in 1980 to close to 26 years in 1997. Survey results in Flanders, confirm that people en and women alik@ eventually do want to marry. Also, compared to, for example, the Netherlands, consensual unions remain relatively few. Also, births out-of-wedlock correspond to not more than 15 per cent of the total number of births (1993 estimate).

In 1998, with 16 per cent of its population aged 65 and older, Belgium belongs to those countries with a relatively 'aged' population. According to population forecasts, this proportion will further increase and stabilise at close to 26 per cent by the year 2050 (see graph A). At around 2005 the number of persons aged 65 and more will equal the number of those being less than 15 years of age. The '*ageing*' of the population is the result of the decrease in fertility and the continued lowering of mortality at older ages (see more particularly the projected increase of the proportion 80+ to close to 10 per cent by the year 2050); at the beginning of the next century, the phenomenon is accentuated by the ageing of the post-war 'baby-boomers'. The dependency ratio between older persons (age 65 and more) and the younger and active persons (ages 15 to 64) has evolved from 16 per cent in 1950 to 25 per cent in 1998 and would reach 44 per cent in 2050.

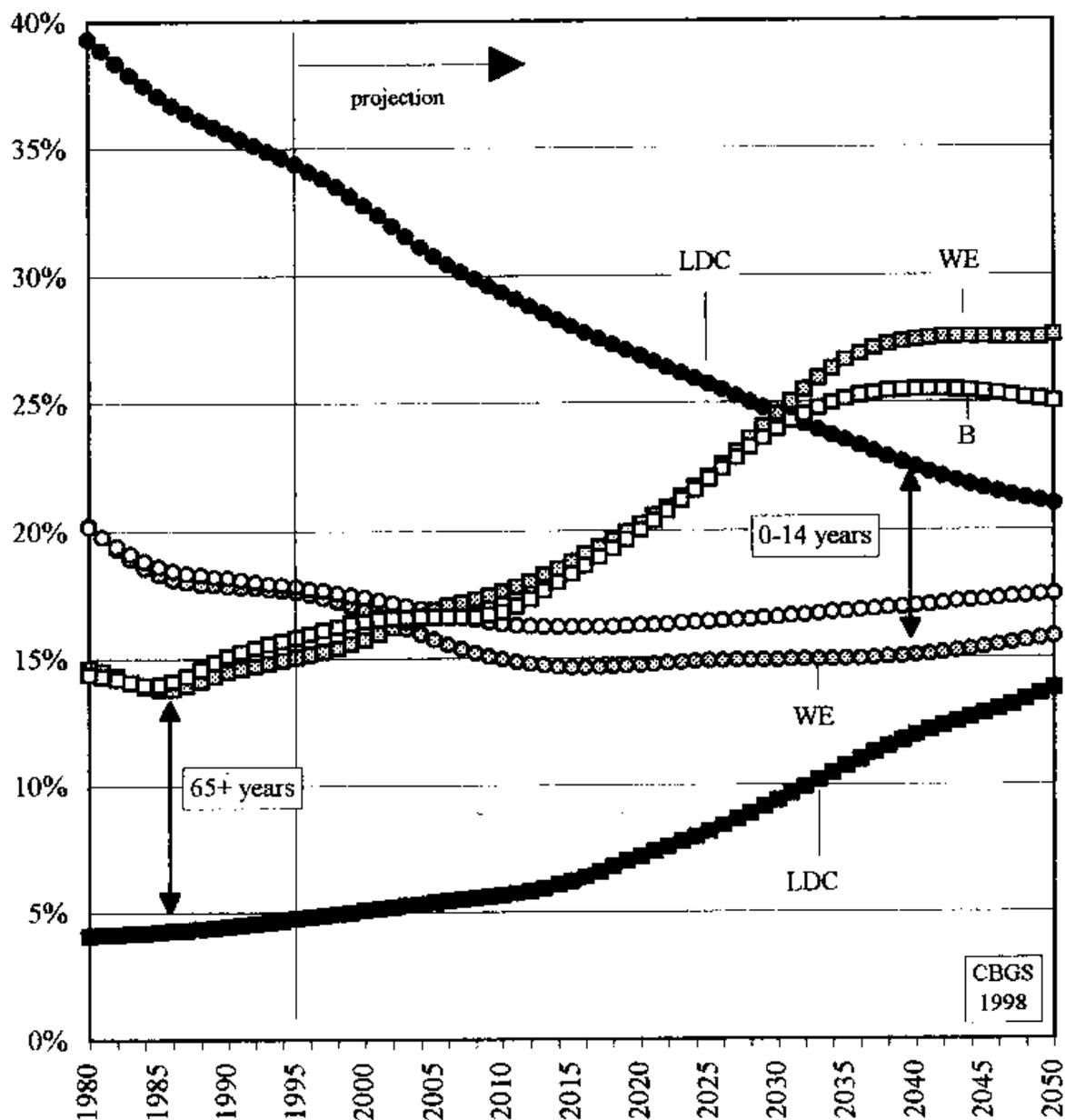
The situation and the forecast for Belgium are very similar to those that can be observed in the other countries of Western Europe^{*}. At the end of the 20th century their situation is still quite different from the population structure in the so-called 'less developed countries' where close to one third of the population is less than 15 years (graph B). However, according to the UN population projections that are prepared by the Population Division, the situations in 'North' and 'South' are likely to converge.

By 2050 about 14 per cent of the population in the less developed countries will be aged 65 and more ore than triple the amount of 70 years earlier; and by that time only 21 per cent of the population will be younger than age 15 -a reduction by nearly half over the same period. The less developed countries of today will experience a similar demographic evolution as the one experienced by the industrialised countries -but will experience it at a much more rapid pace.

Together with international migration, the challenge of the 21st century will be to prepare the society in view for the needs and wishes of an elderly population. Given the historical lead of the industrialised countries in this respect, the less developed countries could benefit from their experiences.

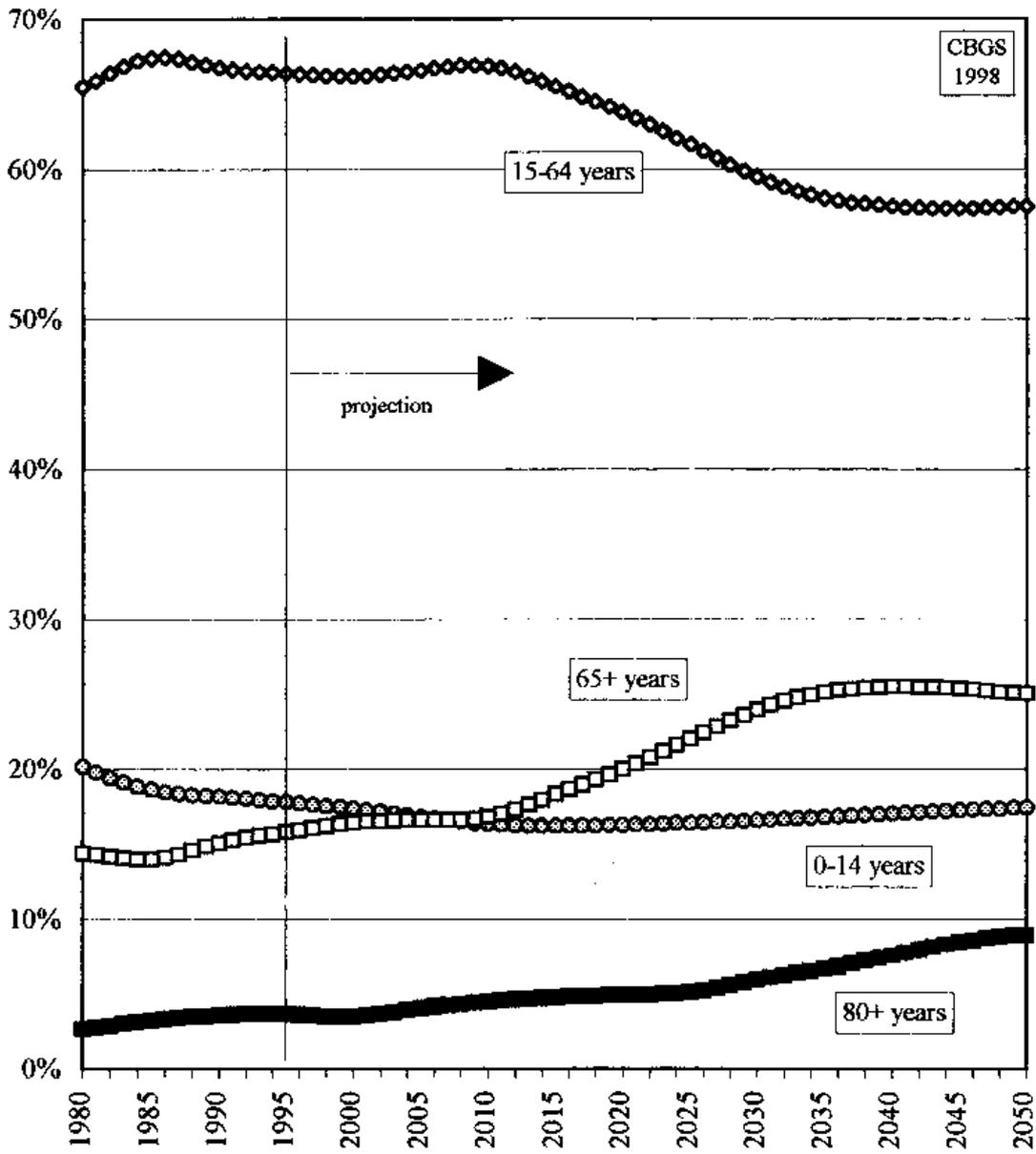
^{*} In the graph, 'Western Europe' includes Austria, Belgium, France, Germany, Luxembourg, Netherlands, and Switzerland.

**B. Evolution of the percentages 0-14 and 65+ years.
Comparison between Belgium (B), Western Europe (WE)
and less developed countries (LDC)**



Source: UN World Population Prospects, The 1996 Revision

A. Evolution of the age structure in Belgium, 1980-2050



Source: UN World Population Prospects, The 1996 Revision

Government decisions and developments in legislation

Fertility and reproductive health

The present low fertility levels have so far not been considered to be a policy priority (although some concerns have been voiced). Fertility is considered to be a matter of free choice by parents, not to be influenced by policy measures. Therefore policies are not aimed at a reconstitution of below-replacement fertility. What is so far considered 'fertility policy' is mainly aimed at the improvement of reproductive health facilities for deprived groups.

Fertility regulation is widely practised throughout the whole country. Some societal groups however, such as older immigrant women, make less use of appropriate methods of fertility regulation.

Child allowances

Child allowances belong institutionally to the social security system. As a consequence, the right to child allowances and the amount are based on the work situation of the parents and on the contributions they pay. The level of the allowances is dependent on the birth order and age of the child, the degree of handicap of the child, but also on certain situational factors such as unemployment or disability of the parents. The basic amount is the lowest for the first child and highest for the third and following children. When the child becomes 6, 12 and 16 years old, the basic amount rises. Child allowances in Belgium are among the highest in level compared to other countries in Europe. In 1996, the Federal Government withdrew the 'age bonus' for the first child granted at the ages of 6, 12 and 16.

Compatibility of work and family

An ever-increasing number of women are trying to achieve personal fulfilment both in their family and professional lives. Governments recognise the need to improve the conditions that influence the way parental and familial responsibilities, especially by women, are combined with paid employment.

In the area of employment, the possibilities of career breaks have been extended during the last years. The policy pursued was aimed at a further encouragement of career breaks, part-time work and parental leave. In 1996, the Government of Flanders decided to extend the rules on promoting part-time work and career breaks in the private sector (e.g. in order to raise children until the age of 8 instead of 3). In 1997 the Government of Flanders decided to introduce a premium pay to encourage career breaks in the public sector. The Government of the French Community is considering measures for better child-care provisions after regular school hours. In 1997 the Federal Government decided to extend the entitlement to parental leave to both parents. Each employee is now entitled to take a three months' leave in order to raise a child until the age of four.

An important step in elaborating the policy aimed at improving the combination of labour and family duties was made by issuing a decree on child care provisions outside the school hours (Decree of the Government of Flanders of 24 June 1997). In order to fight the existing fragmentation in the sector and to streamline the initiatives, two instruments were created, namely the 'quality charter' and the 'local consultative body'. Facilities for outside school child care have to comply with the conditions in the charter of quality if they want to obtain a quality label. At the level of the municipalities a 'local policy plan' has to be worked out in consultation with all interested parties. This plan must allow for a programming of services based on real local needs. At the same time, child care centres and services for day care mothers were allowed to care for children until the age of 12 (instead of the age of 6).

Children-'s rights and child protection

As from 1996, many of the government's decisions, both at the regional and at the federal level, were directed towards the child's wellbeing. In July 1997 a decree was adopted by the Flemish Parliament for introducing a "Child Effect Report" as an instrument for assessing government policy in the light of compliance with children's rights. The "Report" is a public document which describes the situation of the

child in its immediate environment and which assesses possible consequences of planned policy measures (and their alternatives) on the life situation of children. Together with the "Child Effect Report", a "Commissionership on Children's Rights" was established, as was the office of children's rights commissioner. It is the commissioner's duty to defend children's rights and to look after their interests, to judge children's life circumstances and to see to the compliance of policy measures with the International Treaty of Children's Rights; he is competent to start an independent investigation in all these respects.

As from 1996, major progress has been made on improving laws and introducing new measures relating to the prevention and punishment of sexual offence and the sexual abuse of children and help for the victims and criminals. In collaboration with the communities, the Federal Government took the initiative of organising an Interministerial Conference on Children's Rights, in which policies pursued at different levels are geared to one another. Also, the federal Government set up a national Commission of independent experts against Sexual Exploitation of Children. Furthermore, Belgium was appointed to be 'home-port' for the European Centre for Missing Children, called "Child Focus", which was established in May 1997. Its mission is to provide an active support in the search for missing children and to improve the prevention and the battle against sexual exploitation of children.

In 1998 the Government of the French Community adopted a law to assist children who have been abused. In Flanders, the existing "Centres for assistance in case of child abuse" have been given new assignments as well as more funding.

Adoption

Mid of 1997, the Government of Flanders adopted a decree on international adoption, which was mainly aimed at creating a more rigid legal framework and at eliminating the so-called 'wild adoptions'. A Flemish Central Authority was established; this governmental body grants a principal agreement to the candidate adoptive parents after they were submitted to an intensive programme of preparation and after a family report was drawn up. Illegal mediation for adoption is punishable with fines and prison sentences.

In 1991 the Government of the French Community has adopted a decree to assist young people in which one chapter is dedicated to adoption.

Equal opportunities for men and women

Over several years, a number of measures have been taken with regard to equal opportunities of women and men, to stimulate equal numbers of women and men in the advisory bodies of both the Federal Government and the Government of Flanders. A decree adopted by the Government of Flanders in mid-1997, states that at most two third of the members of an advisory body may be of the same sex; by the end of 1999 all advisory bodies have to fulfil this requirement. Also at the federal level, a law (of 17 July 1997) was issued containing the same stipulation.

Finally, in a decree of May 1997 it is stated that the Government of Flanders will draw up a yearly report on the implementation of the resolutions agreed upon at the World Conference on Women (Beijing, 1995).

Family policy assessment

The family is considered to be a diversified concept. It is commonly used in a broad sense, meaning that newly emerging living arrangements, such as unmarried cohabitation, lone-parent families and reconstituted families, are considered to be families. For example, fiscal treatment of married and unmarried couples has been made equal.

In recent years, the need for a 'family effect report' has been expressed by policy makers within the Flemish authorities. The aim is to assess the effects of policy measures adopted by the government on the evolution of the family.

In 1997 the Flemish Government established a "Family and Welfare Council", whose members are experts in family issues. It is, among others, the Council's task to evaluate family and welfare policy and to advise the government on family and welfare matters.

Care for the elderly

The consequences of an ageing society are increasingly taken into account by policy makers. Care for the elderly has become an important policy issue. Care of elderly people living at home is being stimulated as a valuable alternative for residential care for an important segment of the aged group within society. In 1998, in Flanders a decree was issued in which a regulative basis is given to home care facilities for the elderly and in which a lot of attention is given to the support of volunteer and family network care.

Migrants and Refugees

Apart from family migration which is, or is becoming, the largest flow of legal migration, two other categories of migrants have gained importance in the last years: asylum-seekers and irregular migrants. Asylum procedures are being increasingly used not only by genuine refugees but also by migrants whose motivations are in fact economic.

Under an act of 24 May 1994 by the Federal Government, a register for refugees awaiting an official decision was established. The register became operational as from 1 February 1995. The purpose of this register was to improve arrangements for the registration and supervision of refugees applying for asylum.

Every municipality must henceforth not only keep a population register but also a 'waiting register' containing entries, in their places of permanent residence, on foreigners claiming to be refugees or applying for recognition of refugee status. Also, the register includes information on members of their families accompanying them. The register is centralised in the National Register. It contains the information normally set out in the latter Register on any changes in the administrative situation on asylum-seekers.

In 1998, the Belgian government stated formally that it will continue to pursue a responsible asylum policy, taking into account the right to political asylum as foreseen in the Convention of Geneva in 1948. Respect for the fundamental human rights is essential in this policy. The policy with regard to asylum seekers and immigration is twofold. On the one hand it is aimed at the best possible organisation of legal immigration and the protection of those who are in danger. With respect to legal immigrants staying in the country, the government pursues an active policy of integration, a policy which is developed at all administrative levels. On the other hand, the asylum and immigration policy is aimed at the prevention of illegal immigration. The last years measures have been taken to enhance the policy efficiency and to prevent abuse (e.g. measures with respect to illegal employment, and measures to accelerate asylum procedures).

The Flemish policy towards migrants is directed towards the integration of allochthonous groups into society. A decree on ethnical-cultural minorities issued in 1998 strives for a better coherence both with respect to the functioning and the organisation of the existing 'centres for integration'. The existing support centres aimed at the three target groups, namely the allochthonous, refugees and trailer park residents, were joined together into a Flemish consultative centre.

Since 1996, similar measures have been taken in Wallonia to try to better integrate foreigners (or persons originating from another country).

Population related development co-operation policy since 1994

Population related development co-operation policy is in step with the plan of action adopted by the ICPD Plan of Action. With regard to health care, the policy of the Belgian Development Co-operation (Dutch/French acronyms: ABOS/AGCD) includes the option that all activities on reproductive health are an integral part of basic health care. Part of the policy is to pay particular attention to family planning, risk-free motherhood, care for mother and child, the fight against STD's and F"/AIDS, the fight against problems related to sexual behaviour (cancers, STD'S, sexual mutilations) and information-education-communication activities.

The programmes and budgets related to population activities are channelled mainly through UNFPA, ICRC and IPPF. Since 1993 there has been a sizeable increase in the budgets for UNFPA and ICRC:

| Year | million BEF | US \$ equivalent * |
|------|-------------|--------------------|
| 1992 | 59.00 | 1.69 |
| 1993 | 75.00 | 2.14 |
| 1994 | 82.00 | 2.34 |
| 1995 | 85.00 | 2.43 |
| 1996 | 109.40 | 3.13 |
| 1997 | 92.50 | 2.64 |
| 1998 | 85.00 | 2.43 |

(1 US \$ = 35 BEF)

Apart from the voluntary core-contribution, the Belgian Development Co-operation also supports UNFPA's programme for a women's health care centre in Gaza and a reproductive health care programme in Tunisia which specifically targets adolescents. It is also preparing (again in co-operation with UNFPA) an education programme related to the specific problems of reproductive health care in refugee camps.

Regarding gender issues, Belgium supports projects of UNIFEM. Through UNIDO contributions are made for projects to develop entrepreneurship of women in Mali, Cote d'Ivoire, Senegal and Vietnam. Other contributions are for the UNAIDS programme:

| Year | million BEF | US \$ equivalent |
|------|-------------|------------------|
| 1995 | 30.00 | 0.86 |
| 1993 | 60.00 | 1.71 |
| 1997 | 63.50 | 1.81 |
| 1998 | 60.00 | 1.71 |

The implementation of the ICPD Plan of Action is considered to be a challenge. Access to, acceptability and continuity of health care -all essential elements of first line health care-need to become an integral part of reproductive health care. Certain components of reproductive health care could be de-medicalised while others need to be tackled in a more global and multidisciplinary way. Finally, there is a need for operational research in developing new strategies.

The role of Belgium in international population activities

Belgian research centres have always put their activities in an international perspective.

It is not by chance that the International Union for the Scientific Study of Population (IUSSP) has its offices in Belgium, more precisely in Liège.

Universities in both the Dutch and French speaking part of the country have or have had training centres in demography open to foreign students, that could lead to a master or doctoral degree. The *Institut de démographie* of the Catholic University of Louvain (UCL) has a training course in demography with special emphasis on development; between 1987 and 1995 it also hosted CIDEP (*Centre International de Formation et de Recherche en Population et Développement*) with financial support of UNFPA and under the auspices of the Belgian government. From the seventies to the mid-eighties, the Flemish universities have co-ordinated their efforts in the Interuniversity Programme in Demography (that was

conducted in English). In spite of its short life span IPD has been able to build up a strong international reputation.

Since 1995, Belgium is increasingly involved in the follow-up of the ICPD Programme of Action. The activities are co-ordinated by the Ministry of Foreign Affairs and has the technical assistance from research institutes from both the Flemish and the French community; 'technical experts' are regularly invited to participate at international meetings, including the annual meeting of the Commission on Population and Development (CPD). The Population and Family Study Centre, more commonly known under its Dutch acronym of CBGS, has been particularly involved in this respect. CBGS has participated at the last three international conferences on population organised by the UN: Bucharest (1974), Mexico City (1984) and Cairo (1994). CBGS has hosted the intersessional Bureau meeting of the CPD in 1996, and has contributed in organising two 'expert' meetings, on "Health and Mortality" (in collaboration with the LTN Population Division, in November 1997) and on "Population Ageing" (in collaboration with UNFPA, in October 1998); both meetings could be organised with financial support from federal (the Belgian Development Co-operation and the Ministry of Foreign Affairs) and Flemish regional authorities.

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