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NATIONAL REPORT

Submitted by the Government of the Netherlands

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* The Regional Population Meeting is in the work programme of the Conference of European Statisticians.

1. Introduction

The demographic situation of a country at a given moment reflects a history of population dynamics which spans decades. Due to population momentum, embedded in the size and composition of the population, the legacy of the past implies that demographic change, as a rule, occurs at a gradual pace. It also signifies that its impact on society is longlasting. Current (low) fertility patterns as well as the process of population ageing, are good examples of the way in which this legacy affects society today and in the foreseeable future. It follows that changes in policies, both population-related and other policies, such as the ones incorporated in the Programme of Action of the International Conference on Population and Development (ICPD), as adopted in Cairo, 1. 994, will especially be noticeable in the longer run. The quinquennial review of Cairo, although relevant and needed as such, should give due consideration to this overarching, long-term perspective and take into account that population dynamics are intricately related to longlasting processes of social, economic and cultural change.

This report sets out to describe main population trends and issues for the Netherlands as these are perceived in the wake of ICPD.

The demographic context: trends and outlooks

At present, the population of the Netherlands amounts to 1 5.7 million inhabitants, making the country one of the most densely populated in the world with 459 inhabitants per square kilometre of land area. The annual rate of population growth is gradually declining and currently is 0.5%. Population growth is mainly caused by natural increase (births minus deaths); some 20% of this growth stems from international migration (immigration minus emigration).

Summarizing, the following demographic trends and outlooks may be noted:

- the population of the Netherlands is among the youngest 'in an ageing Europe;
- this relatively young population implies an important potential for further growth;
- as a consequence, the population of the Netherlands will continue to grow for a longer period than most other countries of the European Union, resulting in an increasing population density; around the year 2035 the Netherlands is expected to

- reach its maximum population size of about 17.2 million, followed by a gradual population decline;
- natural increase still is the major cause of population growth; international migration will gain importance as a growth factor,
 - enforcing the multicultural character of Dutch society;
 - fertility is more or less stable at below replacement level without indications for major changes; Dutch women have their children at relatively advanced ages (late motherhood); fertility of migrant women is higher than average but tends to decline;
 - the average life expectancy at birth will continue to increase at a gradual pace, while gender differentials in mortality tend to decline;
 - the dejuvenation of the population of the Netherlands (i.e. the declining share of the youngest generations) has run most of its course, while the main thrust of population ageing (i.e. the increasing share of the oldest generations) still has to come;
 - the number of households is growing at a faster pace than does the population, with particularly strong growth of one-person households (among young adults and more particularly among elderly women).

Perception and policy related to the family, fertility and reproductive health

Although fertility is low and decreased during the major part of the 20th century, the legacy of a relatively young population and of continued population growth, mainly results from the large and relatively long lasting post-war baby boom (1946-1969).

Since the 1970s, fertility in the Netherlands dropped below the so-called replacement level. Currently the total fertility rate is about 1.6 children per woman and is more or less stable. No pertinent indications of major shifts in Dutch fertility trends are visible, thus sustained low fertility is envisaged.

Dutch women have their children at an increasingly advanced age. The mean age at first birth currently is 29 years, one of the highest values ever recorded in the world. Childbirth is being postponed and the decisionmaking process of couples and individuals with respect to fertility and family formation tends to get longer. This gives rise to the assumption that facilities (like childcare and parental leave) which enable women and

men to combine parenthood with economic activities, are lagging behind. Since policies also stress the importance of economic independence, also for women, the need to have adequate facilities enabling the combination of work and (family) care, becomes stronger, especially if care is not limited to childcare but also includes care for the elderly. In this sense, family policy and ageing policy are overlapping. Several measures have been introduced in recent years, e.g. to increase the number of places in childcare centres, an extension of paid maternity leave to 16 weeks and the introduction of parental leave.

With respect to late fertility, the government is considering to stimulate information, education and communication (IEC) activities on the possible social and medical implications of late childbirth, both for parents and children in order to foster informed decision-making of - potential - parents. Since fecundity declines with the increasing age of women, a growing demand for assisted reproduction is noticeable. However, assisted reproduction leads to significantly more pre-term deliveries.

Generally speaking, policies with respect to the family aim to increase the *ii* "child friendly" character of Dutch society and to enable parents to combine parental responsibilities with (paid) employment, also with a view to equal opportunity objectives. Here it may be noted that the number of households with more than one (actually 1,5) income, is increasing.

With respect to changes in family formation and dissolution, a more diversified household structure has emerged in the Netherlands, with increasing numbers of people living alone (especially among the old), more single parent families and increased unmarried cohabitation. This gradual shift from a mainly family-oriented to a more individualized society runs parallel with processes of social change. Policies aim to create conditions for the family to fulfil its core function, i.e. the raising of and caring for children, to support families in this respect and to Intervene in cases where this function is threatened. The overall premise of these policies is that the main responsibility for family affairs lies with the citizens.

Perception and policy concerning mortality and health

The general state of health of the population of the Netherlands is improving, with positive developments regarding major causes of death, such; as cardiovascular diseases, cancer and accidents which, taken together, account for the majority of all deaths. With respect to specific

causes of death, it may be noted that drugs-related mortality is very low in the Netherlands. As an overall indicator of health, the average life expectancy at birth, currently 75 years for men and 80 years for women, is expected to increase further at a gradual pace (also given the fact that infant mortality is on a biologically low level), while the gender differences in mortality are expected to decline, mainly because of declining differences in smoking. Regional, and socioeconomic morbidity and mortality differences have the specific attention of the government.

Generally speaking current health policies may be summarized in terms of the following priorities:

- strengthening of policies aimed at maintaining and improving the quality of life of the chronically ill, including the provision of home care for the frail elderly;
- strengthening of policies on absence from work due to illness and inability to work;
- strengthening of policies to reduce differences in health for those who have not benefited to the same extent from the improvements in the general state of health, in particular immigrants, the homeless, and the lower socioeconomic strata;
- continuation of policies to reduce avoidable health problems and premature mortality;
- more emphasis on psychological problems and reinforcing preventive measures.

The overall objective of the Dutch health system is to ensure that each citizen will have efficient quality care available. The promotion of efficiency, cost control, and the fostering of solidarity between citizens as well as mutual responsibility among all those involved, are elements which are taken into account in the ongoing modernization of the system. With respect to reproductive health issues it may be noted that contraceptive behaviour is generally accepted, and that contraception is easily available at low cost and via easy access to family doctors. As a consequence, both the level of teenage pregnancy and the abortion rate in the Netherlands are very low.

Perception and policy related to population ageing, including change in population age structure

Although the age structure of the population of the Netherlands is still relatively young, population ageing will strongly increase over the next

decades. As is the case in most European countries, the "dejuvenation" of the Dutch population (i.e. the declining share of the youngest cohorts) has run most of its course. The share of the young (below age 20) in the total population declined from 36% in 1970 to a current 24%; around the year 2025 this share is expected to stabilize around 21 %.

The main thrust of population ageing still has to come. In the coming 50 years, the share of the population aged 65 and over will almost double from a current 13% to about 25% around the year 2040. At that time the elderly will amount to 4.2 million, among which 1.1 million aged 80 or over.

The decreasing "green pressure" is increasingly set off, especially after the year 2010, by an increasing "grey pressure". Around the year 2040 the overall demographic pressure (green plus grey) will reach its peak. At that time, the so-called dependency ratio will be 0.836, meaning that for every 1000 persons in the "active" age group (20-64), there will be 836 inactives (411 younger than 20 and 425 elderly of 65 years and older). The current dependency ratio of the Netherlands is about 0.790. It should be noted that not all persons in the "active" age group are truly active on the labour market (e.g. unemployed, retired; labour market participation after the age of 60 is comparatively low, and after the age of 65 is almost absent). Although demographic "pressure" does not fully translate into financial "burden", since e.g. the elderly increasingly take their share of financial responsibilities (pensions), population ageing comes at a cost.

In addition to social security costs (pension schemes), also the health care and welfare sectors will be faced with ageing costs. As to the former, the government recently created a special fund, to be funnelled by the profits of current economic prosperity, in order to secure the public pension schemes (AOW) for future generations; in this sense the government is already "saving for the future".

Although the main thrust of population ageing is yet to come, its impact is already noticeable on the labour market, with the current ageing of the labour force. This process is being stimulated by labour market policies which a.o. aim to increase the labour force participation of the elderly. Careful governance of human resources is a goal in itself, which is only reinforced by the need to increase labour force participation levels in order to absorb the growing costs of an ageing population. Integrated social and labour market policies should try to reconcile the diverging needs of macro-economic policy (higher activity rates), cost-benefit analyses of employers who aim to reduce the higher labour costs (seniority) of an ageing workforce, and the individual wishes and needs for early retirement. Careful governance of human resources also calls for increased schooling and

training efforts in a setting of "life long learning", which should benefit both individual employees, labour organizations and society at large.

Perception and policy concerning international migration

In the coming decades international migration will make up for an increasing share of the - declining - growth of the population of the Netherlands, thus reinforcing the multicultural character of Dutch society which, in itself, has a long history. International migration flows are difficult to foresee, but current projections take a positive net international migration balance into account. It should be noted that asylum seekers are only counted as migrants after admission procedures have been completed or after a stay of one year in the Netherlands.

Substantive populations of foreign descent (including second and third generation children born in the Netherlands) are the Surinamese (287,000), the Turkish (280,000), and the Moroccans (233,000), which are all projected to grow. The largest growth, however, is expected to occur for other migrants (currently 385,000, mainly from Asia and Africa). The overall absolute growth of the population of foreign descent is expected to add about 1 million persons until the year 2015. Depending on how these populations are defined, they make up for some 7-8% of the current total population of the Netherlands, with an expected increase to 12-14% in the year 2015. With respect to population ageing, special attention should be paid to the increasing, though still relatively small share of elderly migrants.

In addition to family reunion and family formation migration, especially the unstable economic and political situation in large parts of the world give rise to substantive flows of refugees and asylum seekers. Despite restrictive admission policies, which particularly aim to reduce economically motivated migration from outside the European Union, and despite improved return migration regulations, the government realizes that international migration will continue to be a substantive factor in population dynamics in the Netherlands. Restrictive admission policies will be continued, also with a view to maintaining and strengthening public support for humane policies for refugees and asylum seekers.

Admission policies are focused on responsible and rapid procedures for assessing applications for temporary and permanent residence, as well as

humane and effective repatriation procedures. Policies regarding admitted migrants aim to foster their speedy integration into Dutch society, and to ensure equal treatment and legal status. Special programmes, including language courses and educational programmes, are being executed in the framework of socialization policy (inburgering). The government wants to intensify these integration policies and strengthen the relatively weak position of legal migrants, e.g. on the labour market. Generally speaking all policies in this domain aim to reinforce social cohesion of Dutch society, including those migrants who are legally residing in the Netherlands.

Perception and policy related to population growth

Given the continuing - though declining - population growth, combined with the much faster growth of the number of households, dearth of space is considered as a priority in an already densely populated country like the Netherlands. Again this demographic outlook calls for careful governance of valuable resources. Spatial and housing policy a.o. should address this issue which, on the shorter run, implies the need for additional investments in housing, facilities and infrastructure. In view of the uneven spatial distribution of the population, policies should also address the issue of how to cope with this, taking into account both the needs of the stronger economic growth regions, as well as those of the weaker regions (depopulation, ageing); also urbanisation issues should be addressed in this respect.

In the longer run, the overall perspective of spatial policy will have to change from population growth to population decline, since recent projections indicate that this outlook is a viable one.

With respect to population growth no specific targets have been set, nor changed in view of the new outlook of emerging population decline, although in the longer run a stationary population is viewed as desirable. Policies will remain to be mainly of an accommodative instead of a directive nature.

Perception regarding the need for policy-related information and research

From 1983 onwards the government is informed on a regular basis (once every two or three years) on the development of population trends in the Netherlands and their potential implications for Dutch society and policy through a monitoring report which is produced by the Working Group

Periodic Reporting on Population Issues (WPRB). Since 1989 WPRB is chaired and facilitated by the Netherlands Interdisciplinary Demographic Institute (NIDI); it is further composed of representatives from the Central Planning Agency (CPB), the Social and Cultural Planning Office of the Netherlands (SCP) and the Physical Planning Agency (RPD). Statistics Netherlands (CBS) has an advisory role, and representatives of various government departments are involved as observers.

Through the monitoring reports of WPRB, the government, policy-makers and politicians are sensitized on the relevance of population issues for society and policy. Dissemination of these reports to a broad audience of interested institutions and persons partly through the media, is meant to raise population awareness.

Upon receiving these reports, the minister of Education, Culture and Sciences, who is charged with the coordination of population issues, informs his colleagues in the government as well as Parliament about the outcomes of the monitoring, and invites those concerned to integrate the outcomes and possible recommendations into the relevant national development policies and programmes.

Although the Netherlands does not have a formal population policy with specific demographic targets, there is general agreement that scientifically verified information on population trends, their determinants as well as their consequences, is relevant for policy and decision-making in various sectors of society, including the private sector.

Through supporting a sound scientific infrastructure with respect to population issues, with a national demographic institute (NIDI) as its core, and a well-organized statistical infrastructure, with Statistics Netherlands (CBS) as its **core**, the government facilitates the collection, analysis, evaluation and flow of data and information between actors in population and development policies and programmes.

User and gender perspectives are included in population and development programmes on a regular basis.

Priorities for future regional cooperation in policy-relevant data collection, analysis and research include the combined impacts, also financially, of population growth and decline, population ageing, mobility and spatial population distribution as well as multi-ethnicity on European societies and on the position of Europe in a changing global perspective. Also the intricate interrelations between population, economic development and the environment need more emphasis. Forward looking research into future trends in fertility and the family as well as health, morbidity and mortality

issues also calls for regional cooperation. Finally, joint research on attitudes and perceptions of Europeans regarding population issues and related policies is needed, in order to assess priorities and feasibilities of potential interventions.