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NATIONAL REPORT

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I. INTRODUCTION

The evolution of population number and its structures, as well as the specific issues of human development in Romania, represented a constant concern for the decision makers, reflected in the promoted policy as well as in the legal and socio-economic measures adopted during the last years in our country.

The demographic trends and structural changes occurred after 1990, as a consequence of the political and economic transition crossed by Romania, are pregnantly reflected by the demographic situation of the last years.

The sharp decline of birth rate, as follow up of abortion liberalisation, led to a level of 10.5 live births for 1000 inhabitants (1997), the lowest value recorded during the last century under peace conditions. Couples fertility fell to only 1.3 children per woman (1997), therefore the simple replacement of generations could not be ensured. Population mortality, with an upward trend during previous years, was kept at high level (12.4 deaths for 1000 inhabitants), while infant mortality, although diminishing during the last period (22.0 deaths for 1000 live births) is still one of the highest in Europe. Life expectancy also decreased during the last years, being now of 68.9 years, that is with 6 - 7 years lower than most of European countries. Fertility and mortality trends had as consequence, beginning with 1992, the occurrence of a negative natural increase which, together with the negative rate of net international migration, resulting a continuous decrease in the country population.

The demographic evolution during the last years was influenced by a complex of factors, among which it has to be mentioned: freedom of couples to decide upon the desired number and spacing of their children, high economic and social costs supported by population during the transition period, the housing crisis and the low access of young people to an own dwelling, the changes in population behaviour with respect to family formation and dissolution, the social unstableness and unemployment, the external migration.

On the background of the above mentioned trends, the state priority concerns were related to population social protection, directly influencing the family decision upon the desired number of children, with positive effects on family consolidation or their life style.

In this sense, Romania's Constitution includes provisions referring to: equal rights of citizens, the right to life and to physical and mental health, free circulation, safeguarding the intimacy of family private life, the right to work and to social protection, the women's right of being equal to men, duties for the state to take measures concerning economic development and social protection, in order to ensure an adequate standard of living. The protection of family, of children and youth, as well as of disabled persons, are subject to special provisions of the state fundamental law.

In the spirit of Constitution provisions and of the treaties in which Romania is part, the legislation adopted beginning with 1990, as well as the one under preparation and promotion, meets the requests of society democracy and the requirements of the market economy.

In order to promote the objectives of population policy, during last years, the concerns related to implementing the recommendations of European Conference on Population (1993) and the Programme of Action of the International Conference on Population and Development (1994) were intensified.

The overview and the assessment of the recent trends of population and of the governmental policies in the field, for some major issues, emphasised, on the one side, the need for a more efficient integration and correlation of this policy, as well as the requirement of ensuring substantial resources needed to implement the priority programmes in the field of population. It is well known the necessity of preserving a favourable demographic situation, with a view to hinder a future population decline, to ensure a sustained economic growth meant to set up the conditions for a sustainable human development, to reach an appropriate level of living conditions and to struggle

against poverty.

In order to know the effects of demographic policy measures, it was strengthened the capacity to carry out programmes on collection and analyse of information, as well as on monitoring the implementation of population related policies.

II. RECENT TRENDS AND POLICIES RELATED TO THE FAMILY AND FERTILITY

During last years, new trends occurred with respect to family formation and dissolution, as well as in the manner in which various economic and social factors influenced the family's evolution.

During 1992 - 1997, the total number of **families** kept on increasing, by almost 3%, reaching about 6.1 million families, though country's population was falling. The number of mono-nuclear families (over 4/5 of total) recorded a higher increase than the total family's number, both referring to complete families made up by a couple with/without children and to mono-parental families (one parent with children). Likewise, a slight increase was noticed in the number of complex families, consisting of multi-family nuclei. On the contrary, the average size of families was kept unchanged, that is 3.5 persons per family. It should be noticed that over one half of families were made up of only 2 - 3 persons, both due to the increase in the number of couples without other persons (usually elderly people) and in the number of couples with a lower number of children, due to the fall in couples fertility and to their demographic behaviour.

In Romania, the family was also characterised, during the last three decades, by the quick increase in the number and in the weight of mono-parental families, consisting of the parent (mostly mothers) with their children (most of them underage). This upward trend also continued during recent years, if referring to the high share of live births outside the marriage (22.2% in 1997), as well as to the situation where in about one half of the marriages dissolution exists underage, children entrusted for education to one of parents.

Concerning the **families formation**, the values recorded a downward trend during the last four years, being the lowest ones of this century in Romania - only 6.5 married people for 1000 inhabitants (1997). It became manifest a postponing of the first marriage conclusion and even of the re-marriage, expressed by the increase in the age at marriage, both for men and for women (in 1997, the average age at first marriage was 26.2 years for men and 22.9 years for women).

The family conclusion phenomenon is still at a relatively high level as compared to other European countries. It was considered that during the last period no significant increase in the number of consensual unions was recorded, these having a low frequency in our country, since the pattern of Romanian family preserved its traditional form of legal formation.

The tendency to dissolve the marriage had an oscillatory evolution which, during last years, recorded a level ranging between 1.6 divorces for 1000 inhabitants (1991) and 1.54‰ (1997). For 100 marriages concluded during the last five years, there were recorded about 23 - 25 divorces, a relatively low level, confirming the stableness feature of the family in Romania. A contribution to the trends of reducing the number of families (conjugal couples) was brought by the **widowhood** phenomenon, the widowhood rate being of about 10 widows for 1000 married persons; referring to women, their widowhood rate was 2.4 times higher than the men's one. Families structure and size was also influenced by the demographic behaviour of couples against the desired number of children, respectively by the evolution of legitimate fertility (inside marriage).

During last years, a continuous fall in **fertility** was noticed. The total fertility rate fell to less than 2 children per woman beginning with 1990, reaching only 1.3 children per woman in 1996 and 1997. Despite the precocious fertility characterising the birth rate in our country, the total fertility rate of women under 30 years decreased during previous years to only 1.1 children per woman.

The sharp fall in fertility, for all the fertile age groups, was influenced by certain social and economic factors, among which social insecurity, unemployment, living conditions, the fall in real

incomes, the high abortion rate and the changes in the demographic behaviour.

Fertility evolution was also associated to the worrying phenomena of increasing the weight of children born outside of wedlock (each fifth live birth), especially in case of young mothers under 25 years of age, as well as to the increase in the share of under-weight live births (about 10% under 2500 grams) or of premature births.

When facing the problems related to the recent evolution of families, to the patterns of family formation and dissolution, respectively to the fertility evolution, the measures adopted by Romania's Government were oriented towards ensuring a higher protection of family and child, as well as towards observing the family and children rights.

Reform in the field of child rights protection

Being aware of the economic and social costs of child protection under institutional system, Romania's Government initiated and implemented the reform of the system, based on the following actioning directions: administrative and decisional decentralisation in the field of child protection, the change in the legal framework, the reform of involved institutions and staff formation, drawing up programmes based on funds from internal and international resources.

The Department for Child Protection, central governmental body with co-ordination tasks, participated in the development of programmes related to child and family protection, promoted the legislation meant to reforming the former system and supported the establishment and the functioning of specialised public services at territorial level in counties.

During 1997, a series of legal acts on the observance of child rights were adopted, like those related to the protection of children with difficulties, or to adoption, respectively to the organisation of public administration authorities or of private bodies with activities in the field of child protection.

The background principles on which were based the reform and the legislative regulations had in view the priority of child major interest, the setting up of the appropriate framework taking account of child right to free opinions, the non-discrimination in access to protection measures stipulated by law.

In this regard, children up to 16 years of age (18 years of age in case of attending an educational form or in case of disability), enjoy the right to a monthly state allowance, in cash, irrespective of the social status or of parents income. Over 5 million children took advantage of this allowance in 1997. The monthly state allowance is granted as double amount in case of disabled children. The state children allowances are supported by the state budget.

The protection measures for children with difficulties consist of their provisional placement in a family or to their entrusting to a person, to an authorised private body or to the specialised public service, till reaching his full exercise capability. For each entrusted or placed child, a monthly allowance is granted. The expenditure for social protection of children with difficulties is supported from the state budget or from local budgets.

The underage children in special situation are benefiting of care within certain institutions, respectively within placement centres and within centres for child protection (both types being subordinated to specialised public services), and within orphanages and hostels for children with disabilities. The education, the scholar and professional training of underage children with disabilities is ensured within special education units (kindergartens, secondary schools, high schools, and vocational training schools). In 1997, 47443 underage children were comprised.

Family protection. The family benefit of social protection during all the life cycle stages. The employed women have the right to a paid maternity leave for a period of 112 days, of which 52 days before and 60 days after birth.

The quantum of pregnancy and childbearing allowance for employed women giving birth to the third and further children is 94% of the base salary and bonuses, irrespective of seniority.

Employed women with ill children, up to 3 years of age are benefiting of paid leaves for taking care of them. The related expenditure is supported by the state social insurance budget. The women participating in the state social insurance system, in the state social insurance system for agricultural workers and the active women employed in the defence system enjoy the right to a paid leave for child care, beside the paid leave for pregnancy and childbearing. The paid leave is granted upon request, up to 2 years of age. Till June 1997, this leave was only granted up to 1 year of age. The monthly allowance granted during this leave accounts for 85% of the base salary and of the other salary incomes based on which the social insurance contribution is established.

The allowance for women participating in the system of pensions and of other social insurance rights for agricultural workers accounts for 80% (65% in the past) of the monthly average of insured income for which the contribution was paid.

The leave for childcare could be optionally granted to any of parents. The period of leave is included in seniority.

Beginning with the second child, mothers benefit of a childbirth allowance, which is a fixed amount. In 1997, childbirth allowances were paid to 114533 persons.

Taking into account the fact that families with several children represent one of the most vulnerable groups, beginning with 1997 a complementary child allowance was approved, meant, on short term, to the improvement of their economic situation and, on long term, to an encouragement for families with 2 - 4 children. The quantum of this allowance differs depending on the number of children (2,3,4 and more children). This payment is supported by state budget. In 1997, 1137.4 thousand families with children benefited of this complementary allowance.

The social solidarity, the principle on which is based the functioning of state social assistance represented the background on which, in 1995, the Law on social support was promoted and applied, according to which all families or single persons obtaining net monthly incomes lower than the ones stipulated by law, receive a material support upon request. The level of net monthly incomes, up to which social support is granted, is different in relation with the family size. The quantum of social support is established as difference between the level of legally stipulated incomes and the net monthly income of the family, respectively of the single person. The payment of social support is ensured from the local budgets. The average number of families and of single persons who benefited of social support in 1997 was 143.4 thousands.

The families or the persons being in necessity situations due to strongly justified reasons (natural disasters, fires, accidents, etc.) could benefit of emergency support allowances. In 1997, 15363 emergency support allowances were granted, their payment being ensured from central and local state budgets.

Persons being in particular economic and social situations, depending on their incomes, have free of charge paid access to services assured by social support canteens. The insured persons, the pensioners and their family members enjoy the right, in case of illness, to medical assistance and to free of charge medicines during the period of hospitalisation and ambulatory treatment.

The modern expression of the non-discrimination principle between genders within Romanian legislation is represented by the Government initiative concerning the Law on equal opportunities for men and women, submitted to Parliament approval. This draft law guarantees the quality of opportunities for men and women in all fields of economic and social life and stipulates the obligation of public authorities to act in order to achieve this goal.

The promotion of a more substantial social protection, the increase in the purchasing power of incomes and the more equitable distribution of them would be achieved, according to the policy promoted by Government, on the basis of a steady and sustainable economic development, sustained by restructuring and privatisation, by investments and efficiency stimulation.

III. EVOLUTION OF MORTALITY AND MORBIDITY. POLICIES AND PROGRAMMES MEANT TO ENSURE POPULATION HEALTH SITUATION AND THE REPRODUCTIVE HEALTH

Romania's evolution, a difficult one from the economic and social standpoint, during the transition period, strongly influenced the level of demographic indicators, as well as the population health situation.

Under the circumstances of poverty expansion, of under-financing the sanitary system and of the difficulties encountered in the implementation of efficient programmes meant to fighting against risk factors, worrying trends are to be stressed in the evolution of population mortality and morbidity.

Mortality shows an upward trend, from 10.7‰ in 1989 to 11.6‰ in 1992 and to 12.4‰ in 1997, as a consequence of demographic ageing, but also as a result of health situation deterioration. At the same time, life expectancy at birth fell each and every year, reaching 68.95 years during 1995 - 1997 (65.2 for men and 73.0 years for women), that is with one year less than during 1990 - 1992.

By gender, an overmortality among men is maintained (13.8‰ in 1997) against the women's one (11.0‰ in 1997), as well as an overmortality in rural as against urban area population.

By age groups, mortality level was high among children during the first year of life and among elderly people.

Men's overmortality was kept for all the age groups between 20 and 64 years of age, the men mortality rate being twice higher than the women's one.

By death causes, most of deaths (61.5%) were due to diseases of the circulatory system, followed by neoplasm, diseases of respiratory system, injuries and poisoning, etc. Excepting the diseases of respiratory system, deaths due to the above-mentioned main causes, had a steady upward evolution.

Infant mortality is still at an unacceptable level in the European context, ranging during 1993-1997 between 21.2 and 23.9 deaths under one year of age for 1000 live births.

The maintenance at a high level of post-birth mortality (13.9‰ in 1993 and 12.5‰ in 1997) also contributed to this situation, having as main cause of death the diseases of respiratory system and the presence of the same classical risk factors.

As for the **infectious and parasitic diseases**, a steady increase in the mortality rate was noticed after 1993, including tuberculosis, as well as a rise in morbidity due to syphilis, measles and tuberculosis. It was found a worrying increase in the indices of **chronic diseases** prevalence identified by means of the Fifth Medical Survey on Population Health Situation (June - July 1997) as against 1989, for heart and vascular disease, diseases of the digestive system, diseases of genital female organs and chronic broncho-pneumonia, but also an important decrease as far as obesity and anaemia are concerned.

By means of this survey, large disparities were identified between the urban area (heart and vascular diseases, endocrine diseases, nutritional and metabolic diseases, anaemia and renal diseases) and rural area (diseases of the digestive system, of the genital female organs, rheumatics and chronic broncho-pneumonia), both by gender and by age.

On the background of economic and social difficulties existing in Romania, the network and the activity of sanitary units should ensure an increased volume of medical services, under the circumstances of scarce financial resources, accounting for only 3% of GDP.

Currently, the sanitary system is facing a deep reforming and organisational restructuring process, from a centralised state owned system to a system of health social insurance, doubled by a number of health related programmes funded from the state budget.

According to the 1998 state budget, 33 health related programmes are funded, in the following fields: infectious diseases monitoring and control, the national programme of

immunisation, tuberculosis and HIV/AIDS, sexual transmitted diseases and blood transfusion monitoring, toxicomania by drugs consumption, environment protection, children and adolescents collectivities, family planning and mother and child protection, mental health, elderly protection, heart and vascular diseases, etc.

During last years, an increased attention was paid to the **reproductive health** related policy and to its implications of medical, demographic, educational and social nature. The adoption of some sanitary assistance programmes had in view the diminution of effects engendered by certain negative trends in ensuring an appropriate reproductive health. Although maternal mortality recorded an important decrease during 1990 - 1997, reaching about one fourth of the 1989 level, it was still kept at a particularly high level (41.4 maternal deaths per 1000 live births in 1997), especially due to the high weight of deaths as consequence of induced abortion.

As a follow up of repeal in 1990 the restrictive legislation on abortion and to introducing the possibility of family planning development and of contraception stimulation, after a boom of the abortion rate in 1990 (2.9 abortions per live birth), the number of abortions constantly fell (by 62% less than in 1990) and the rate of legal induced abortions decreased to 147 abortions per 100 live births, one of the highest rate in Europe. The total induced abortions rate fell from 4.5 cases per woman in 1990 to only 2.1 in 1997.

According to the results of a survey on adolescents (15 - 24 years of age) reproductive health, carried out in 1996, only 52% of young women belonging to a couple have used a contraceptive method (either modern or traditional). A worrying issue is represented by the upward trend of diseases with sexual transmittal, particularly among youth.

Taking into account the above-mentioned evolution, a series of measures adopted and promoted by the Ministry of Health were meant to improving the sanitary activity, as well as an improvement in the field of reproductive health.

IV. CHANGES IN THE AGE STRUCTURE OF POPULATION, DEMOGRAPHIC AGEING AND ELDERLY PROBLEMS

During the last decades, Romania knew significant changes in population age structure, confirming an accelerated process of demographic ageing, determined both by the increase in the number and in the share of elderly population and by the decrease in the number and share of young population.

Thus, young population under 15 years of age holds a weight of 19.4% in 1997 (as against 23.7% in 1996) and elderly people (65 years of age and over) weight reached 12.6% in 1997 (as against 10.4% in 1990). Within elderly population, the share of those aged 75 years and over (31.1% in 1997) showed a downward trend during last years, as consequence of a high level of mortality. The number of elderly people has doubled during the last three decades.

The rate of demographic ageing quickly rose during last years, reaching 64.7 elderly persons per 100 young people in 1997, compared to 52,5 elderly in 1993. The number of pensioners, both in absolute terms and as compared to the number of employees, continuously rose, so that in 1997 the number of pensioners from the social insurance system exceeded (in terms of absolute values) with 400 thousands the employee's one.

Under the conditions where the standard retirement age, according to the current legislation, is 62 years for men and 57 years for women, and the number of tax payers to state social insurance is falling, the existing pensions system, based on redistribution and managed by the Government, is hard to be financially sustained.

As consequence, the reform of pensions system became not only necessary, but urgent, the draft of Law on pensions and on other insurance rights, submitted to the Parliament for approval, includes the gradual increase in the retirement age, to 65 years in case of men and 62 years in case of women, besides other measures specific to this field.

The complex reform of retirement system comprises, beside the public pensions system

component, the new components of the private system, based on capitalisation and on private administration - compulsory or optional - conferring an increased financial security to elderly persons.

The process of demographic ageing will slow down during the next two decades, but will be characterised by keeping on the unbalance between the main age groups: youth, adults and elderly, with serious social and economic effects.

Due to the decrease in the number and in the share of young people under 15 years of age, at the same time with the increase of elderly population, at the horizon of 2000 the elderly people weight (15.7%) will exceed the one of youth (14.2%), the demographic ageing rate becoming over-unitary.

The sharpening of elderly dependence on the measures of social protection and the increased pressure upon the services ensured by hospital units, where they are looking for a shelter, became too expensive and is inadequate for their daily needs.

Currently, elderly social protection (pensioners or not), with no material support or without legal upholders, those with families but with no care possibilities, as well as those with own incomes for ensuring a minimum living standard, the chronic ill persons needing permanent care and the people with disabilities are benefiting of social assistance within hostels.

The draft of the Law on elderly social assistance represent the basis for the reform in the field, the social protection of this category going to be ensured according to the nature and to the size of risks, to the necessity of ensuring appropriate services, preferably in the family environment, full board, care and supervision within hostels. Elderly people could be cared at home by granting social services, according to their needs.

In order to achieve some patterns of social services based on technical and financial support from the European Commission, within the PHARE Programme, 22 programmes of social services devoted to elderly persons from 21 counties are carried out, based on which about 3 thousand elderly people are supported.

The carrying out of these model projects will contribute to the reform and to the development on new bases of the social assistance, favouring at the same time the compliance with the international practice and standards.

With a view to sustaining the interests of elderly persons and to solving the problems they are facing, in compliance with the recommendations of the World Assembly of Elderly People, a draft of the Law on the organisation and the functioning of the National Council of Elderly People was submitted to the Parliament.

The further guarantee of living security and social protection for an increasing number of elderly and very old persons, would be ensured by promoting a joint responsibility, both public and private, on the way of family supporting both by state and the community.

V. GOVERNMENT PERCEPTION AND POLICY ON POPULATION EVOLUTION

The perception of the future effects engendered by the decrease in the number of population which occurred during last years led, within the governmental policy promoted in Romania, to the adoption of certain short term measures meant to ensuring an efficient social protection, particularly for the vulnerable population groups. Although a consensus exists concerning the necessity of adopting a demographic policy meant to diminishing the unfavourable effects of transition, leading to a decrease in the number of population on short and medium term, there have not been defined yet the priority options on the incentiviveness of fertility level straightening out, respectively to the significant decrease in mortality, or to ensure and appropriate population health situation, including reproductive health.

All these concerns ensure the background for continuing the efforts meant to accurate establishment of the governmental population related policy and to the adoption of measures meant

to implementing in our country the strategies and the objectives comprised by the recommendations of the European Conference on Population and of the International Conference for Population and Development.