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A baby friendly state: Lessons from the French case

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France is in a very peculiar situation concerning fertility. Contrarily to many other European countries, France is facing a significant fertility recovery during the past five years and maintains a 1,9 fertility rate. No clear and uncontested explanation justifies this relatively positive situation. The more convincing argument, from our point of view, could be the permanent public investment to facilitate conciliation between work and childcare responsibility. In this contribution, we propose to come back on three main issues: the main trends of family policy over the past century; the demographical background of the French situation these last years and the main orientation of the childcare policy. We will conclude by some reflections about the main challenges for the future and their links with intergenerational issues.

1. French investment in demographical issues: A permanent investment

French family policy is generally considered as one of the most explicit and intensive one in Europe [2]. It is even stated that the "family issue" could be the basis of the French social security system, just as poverty was a cornerstone of the Anglo-Saxon *Welfare State* and workers' status that of Germany's *Sozial Staat*. Family benefits have even been considered as an extension of the salary towards households and, in a way, as one of the main pillars of the French social welfare system.

Childhood has been considered quite early in France as a "common good" and a human capital, mainly because of the demographic challenge that this country was facing at the beginning of the 20th century. The low level of fertility during the 19th century and the trauma of the 1st World War explain the strong pro-natalism in France.[1] All the conditions were satisfied at the beginning of the 20th century to promote family and fertility as public concerns: First of all, a strong public debate, confronting different traditions of thinking (familialism, natalism and hygienism, libertarian movements); second, a public issue: this demographic challenge; third, social movements to promote family institution and fertility (recognized as social partners by the State with the Loi Gounot in 1942), and fourth, some experimentations which prepared the French public family policy (family premium in patriarchal

[1] In the mid-30 s the number of deaths was higher than the number of lived births.

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industries and for civil servants at the end of the 19th century; institution of mutual aid funds: "les caisses de compensation").

These different elements make possible the "décrets-lois" of 1938 and 1939, institutionalising the French family policy as a pro-natalist policy. Even the break of the Vichy government didn't affect fundamentally this basic pro-natalist policy, despite the strengthening of a familist ideology. The French Social security Act in 1946 finalised this institutionalization process, by creating a "family branch" of our Bismarkian Welfare State.

Then, the family policy goals moved clearly from the end of the Third Republic (Code de la famille de 1939) until the 80 s, from a natalist perspective, towards a distributive (universal and horizontal) and then redistributive (selective and vertical) perspective. Looking backwards, it is tempting to consider clear breaks in this story. To simplify, we could distinguish four main periods:

– 1945–1965: the French family policy "Golden age", with strong incentives to promote fertility and compensate the cost of children. This is the time of a universal and intense family policy, which represented in the mid-50s more than half of social security expenditures;
– 1965–1975: the "women's rights" revolution, with a lot of fundamental reforms of Civil Law concerning marriage ("réforme des régimes matrimoniaux" in 1965), parental rights (autorité parentale) (1970), filiation (1972), divorce (1975), sexuality (1975, abortion);
– 1975–1985: Equity issue, with the "rediscovery of poverty in a rich country" as Lionel Stoléru (1977) stated, and the development of the means-testing in family allowances.
– 1985–2005: regulating unemployment and facilitating conciliation between work and family responsibilities with childcare policy measures.

The distinction of these different periods doesn't mean real turning points, but more a progressive reframing of family policy goals and a process of pilling up. We suggest these different phases to indicate that new social problems were identified, new public debates were occurring, knowing at the same time that the previous objectives were still active when new ones were promoted. So it is possible to identify nowadays some family policy measures which tend to promote fertility, but at the same time some others which promote more equality between genders; others which try to reduce social and economic inequalities and some whose implicit objective is to regulate the labour market and to develop female's employment. In that sense, family policy sector is typically incremental. The "print of origin" doesn't disappear and the new objectives are pilled up on the old ones. So, it may be quite artificial to argue that we can identify real turning points. Our argument could be the positive role of this permanent public investment on demographical issues.

Table 1
Number of births and fertility rate (Metropolitan France)

	Number of births (in thousands)	Fertility rate	Mean age of the mothers
1994	740	1.68	28.8
1997	727	1.73	29.1
1998	738	1.76	29.3
1999	745	1.79	29.3
2000	775	1.87	29.3
2001	771	1.88	29.3
2002	762	1.87	29.4
2003	761	1.87	29.5
2004	768	1.9	29.6
2005	775	1.92	29.7

Source: INSEE, 2005.

2. Fertility and marriage rate recovery

As for all other member States, France was affected during the period 1970–1995 by a sharp decrease in fertility rates: from almost three in the beginning of the 60 s to 1.65 in 1994. Nevertheless, the end of the 1990s may have been a turning point. The number of births increased from 1998 up to 2001 (Table 1). Some newspapers even speak about a new 'small baby boom' in France at the end of the millennium. Subsequently, the number of birth slightly decreased in 2002 and 2003 (−10,400 in 2002 and –1,000 in 2003). Nevertheless, the fertility rate maintains at a high level (1.9). Between 2000 and 2001, the rise in the birth rate was mainly due to young women (under 25 years of age). Between 2002 and 2003, it was mainly due to women between 30 and 34 years of age. Therefore, the mean age of the mother is rising again.

The final fertility rate of 40-year old women is still high: 2.09 children for the generation of women born in 1953, and 2.03 for the generation of women born in 1963. At 35 years old, the women born in 1968 already had 1.74 children, which means that they will probably have a final fertility rate around two children. So, in sum, France has quite a high fertility rate compared to other European countries. This level of fertility, which had not been reached since the beginning of the 1980s, put France at the top of the European Union, together with Ireland. Two main arguments may explain this recovery: first, economic recovery itself which plays a major role in terms of household morale;[2] second, the importance of child-care policies, which facilitate conciliation between work and family life, even if these policies are not developed enough to cover all needs.

[2]This first argument is nevertheless relatively weak: French households reach a record of pessimism in March 2003, which is still the case in the beginning of 2005, but the fertility rate remain still relatively high.

The fertility rate of immigrant women is one point higher (2.80) than that of French women (1.72). Nevertheless, this mean is hiding a convergence, whose effect is still greater when the length of stay is longer. This trend progressively reduces the gap between these two populations in terms of level of fertility. For example, between 1989–1990 and 1998–1999, the fertility rate of women from Africa decreased from 4.72 to 4.07. The same trend can be seen for women from Tunisia −3.93 to 3.29; Turkey −3.73 to 3.35; Morocco −3.51 to 3.32. Portuguese, Spanish and Italian women have more stable fertility rates, 1.86 in 1989 and 2.04 in 1999 for Portuguese women; 1.48 in 1989 and 1.41 in 1999 for Spanish women and 1.43 in 1989 and 1.47 in 1999 for Italian women. The women from these countries who live in France have a higher level of fertility than their fellow citizens still living in their home countries, which may be linked to the offer of services in France compared to the situation in the country of origin.

As far as marriage is concerned, the trend is comparable. The number of marriages decreased drastically from the end of the 1960s to the mid-1990s: from 380,000 in 1969 to 253,000 in 1994, which means a decrease in the marriage rate from almost eight marriages in a thousand people to 4.4. A slight increase was observed in 1996 (280,000 marriages), mainly due to fiscal reform. This recovery was subsequently confirmed, with 293,700 in 1999, 305,400 in 2000, 295,900 in 2001, which means a marriage rate of five in 2000 and the rate was still 4.9 in 2001. In 2002, there were 286,300 marriages (4.7) (9,600 fewer marriages compared to 2001) and there was a further decrease in 2003, with 280,300 marriages (4.6) (6,000 fewer marriages compared to 2002), which means 25,100 marriages less in three years compared to the situation in 2000. In 2004, the decrease is confirmed with 266,000 marriages and a marriage rate of 4,3. Currently, the mean age of marriage is becoming older: 30.4 for men and 28.3 for women.

The introduction of a Civil agreement: 'pacte civil de solidarité' (PACS) in 1999 offers an alternative to marriage for cohabitant homosexual or heterosexual couples. By the end of 2000, around 30,000 PACS had been registered, and more than 15,000 in 2001. In 2002, 25,000 were signed and by the end of 2003, a total of 100,000 PACS had been registered. At the end of the first three trimesters of 2004, 130,000 PACS were registered. But this public recognition does not seem to threaten marriage.

3. The issue of caring arrangements for contemporary families

The high employment rate of mothers and the high level of fertility in France are closely related to public services devoted to young children. Children have access to pre-elementary school almost free of charge, even for two-year old children. In 1998, almost 100% of three- to five-year old children were in a pre-elementary school, and even 35% of the two-year old. In the west of France, around 45% of the two-year olds were in a pre-elementary school in 2003. The French situation is particularly good compared to other European countries, even if all needs are not covered.

Table 2
Situation of children under 3 and under 6 years of age in France and types of structures

Age of child	Care institution	Number of places (1 January 1999)
Under 3 years	Pre-elementary school (children under 3 in 1998–1999)	255,000 (56%)
	Crèches collectives	138,400 (30.5%)
	Crèches familiales	61,000 (13.5%)
	Total number of places in all institutions for children under 3 years of age	454,500 (100%)
Under 6 years	Haltes-garderies	68,100

Source: DREES 2000 et Ruault & Daniel, 2004.

Pre-elementary schools, day-care centres (*crèches collectives*) and childminder's homes (*crèches familiales*) offered almost 500,000 places in 1999 for the 2.2 million children under three years of age, which is almost 20% of the potential needs. One may add the '*crèches parentales*' (8,500 places) and the '*Halte-garderies*' (70,000 places) to these services (DREES 2000).

Nevertheless, it is important to underline the local variations of these services within the country. The difference may be very significant for a family living in a big city, compared to a family living in the countryside. Accessibility and availability of the different types of services are quite different.

4. Interconnected challenges for the future of family life and family policies

4.1. Double-income families and the new 'gender contract'

Because of the very high participation rate of women in the labour market, (eight women in ten between 25 and 50 years old are active and 70% are employed full time), 60% of couples living with children are both active. This percentage depends of course on the number of dependent children living in the household: 64% of the parents with two children are both working, but only 44% of the couples with three children. This trend means that the traditional 'gender contract', or the 'male breadwinner model' is called into question. Nevertheless, the gender division of domestic and caring tasks is still very unequal, and inertia of behaviour means that the road to equality in that field is still very long (if it continues at the same speed of change that we observed with the last two inquiries in 1986 and 1999, we will need about a century to share these tasks equally between men and women). On average, a man living in a couple devotes two hours and a half each day to domestic tasks compared to five hours for women. Another challenge concerns the work timetables and the development of atypical times of work. This phenomenon is increasing and has posed new problems for households, the more so in a country where the child-care services are only accessible during normal working hours, i.e. from 8 am to 6 pm [4]. Therefore, it is also a big challenge for the policy maker. How can this situation be regulated? Introduce new 24 hour and 7 days a week services as in Scandinavian

countries; regulate the labour market in such a way that these types of atypical and, mostly unpredictable timetables do not flourish; encourage the enterprises concerned to develop a specific answer to this problem, etc.

4.2. From youth to young adults

France is also being challenged by a new organization of the life cycle. Between 1945 and 1975, it was generally considered that life was divided into three main phases: childhood, time of education, ending with adolescence; adulthood, time of work with a slow but regular progression; and old age, time for retirement, a period now called the third age. This organization of the life cycle is changing. The prolongation of schooling up to 18 years of age and the access to high school for a majority of young people means a lengthening of the first phase. On average, young women are mainly living with their parents up to 21 years old and young men up to 24 years old. Around 10% of young adults are living in their parents' home, even if they spend more than half of their time outside their home. Others are living in an independent flat during the week, but come back to their parents' home at the weekends. This 'lengthening of youth' is challenging public policy [1]. The debate revolves around the creation of a new social status for young adults and even a new allowance to permit them to be more economically independent of their parents. The alternative is to discuss the limit to which family allowances may be distributed to the parents in charge of dependent young adults (up to 25 or older?).

4.3. The caring needs of children and frail elderly: A new contract between generations

The aging of French society, i.e. the increase in the number of older people (over 60 or 65 years old) compared to the youngest (under 20 years old), is obvious. People aged more than 60 increased drastically between the two last censuses in 1990 and 1999, from 11.3 to 12.5 million (an increase of 1.2 million). This increase is going to speed up with 'baby-boom' generation, i.e. the approach of the numerous generations of the baby-boom to retirement age. The population which is increasing even faster corresponds to the more aged people. The number of people over 75 years old was about 4.5 million in 1999 (an increase of 500,000 between 1990 and 1999).

A quite significant proportion of this 'fourth age' generation is concerned with caring needs (receiving help for bathing, dressing, lunches, walking, etc.), or what we call in France, dependency. Taking into account that intergenerational cohabitation is much rarer nowadays, 40% of the people aged more than 80, are living alone. In other words, more than half of the people living alone in their household are over 60 years old. The national statistic institute (INSEE) estimates that there are about 1.2 million frail elderly people of which 800,000 could apply for a new allowance, 'allocation personnalisée d'autonomie' (APA, personal allowance for autonomy) to help them to pay for services. But in fact, the family is still the main provider of daily

help and, within the family, mainly women: wives, daughters, daughters-in-law. So there is a double trend: lengthening of youth and old age means that the 'middle generation' or the 'buffer generation' (45–60 year olds) is under pressure from work, young dependent children and frail elderly parents [5].

In summer 2003, France experienced a major tragedy when a heat wave hit the country. This tragedy made the government adopt new measures. In April 2003, the government decided to reduce the conditions of access to the APA, criticizing the previous government and its finance plan. In September, however, after the heat wave, the government had to announce a new plan to guarantee the financing of APA and also to increase responses: a major plan for the frail elderly. [3]

A last challenge may be to define a real policy towards children, in a perspective of social investment in the future of society [3,6], which means to improve social and economic conditions of the child, by facilitating conciliation between work and family life for active parents, promoting dual earner families and improving the level of education of children. Adopting such a preventive perspective may be much more efficient than to adopt repairing measures towards adults confronted to social exclusion. It is also a way to consider social policy in a longitudinal perspective, taking into account that the tomorrow's social problems are constructed now.

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[3] Between 4 and 10 August 2003, 6,500 people died in France because of the heat wave. But between the 10 and 13 August the temperature was extremely high, minimum 25.5° during the night and up to 10,000 people died because of it. On 25 September, the Institute of medical research INSERM and more recently INSEE confirmed that more than 15,000 people died that summer because of this heat wave: 42% of these deaths occurred in hospitals, 35% at home, 19% in retirement homes and 3% in private hospitals. In September, some newspaper and politicians were criticizing the lack of responsibility of the families, who had left their aged parents alone, without any support, to take their normal summer holidays. This argument was ongoing at the beginning of September, even if some experts were arguing that, on the contrary, the family was the main source of help and care. The various official reports and inquiries published afterwards show clearly that the lack of responsibility and response was due to the government and administration and that the gap between social and health services was very detrimental. Right-wing politicians had to face the political impact of this event, which shows clearly the importance of the combination of formal and informal sources of solidarity, an interconnection of the health and social services, the huge importance of local response to such a phenomenon, the responsibility of the administration to deal with such an event, and so on. The share between public and private regarding care needs, may become the major issue on the political agenda.

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