

Family Support Policy Models and Their Fertility Effects



Fertility in Romania and Moldova: Exploring the Dynamics, Determinants and Policy Impact (FERM)

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Study objectives:

1. To conduct a comparative analysis of fertility dynamics in Romania and the Republic of Moldova, with emphasis on the transition from early childbearing patterns to delayed fertility models.
2. To evaluate how family support and leave policy models shaped fertility postponement and recuperation patterns.
3. To examine fertility trends from a longitudinal perspective, focusing on changes in reproductive behavior at both cohort and period levels between 1971 and 2023.
4. To assess the degree of fertility postponement and recuperation among women who have completed their reproductive period.

Methodology

Data:

- The study is based on a comparative analysis of vital statistics:
 - National Bureau of Statistics of the Republic of Moldova
 - National Institute of Statistics of Romania,
- Births by age and parity for the period **1971–2023**.

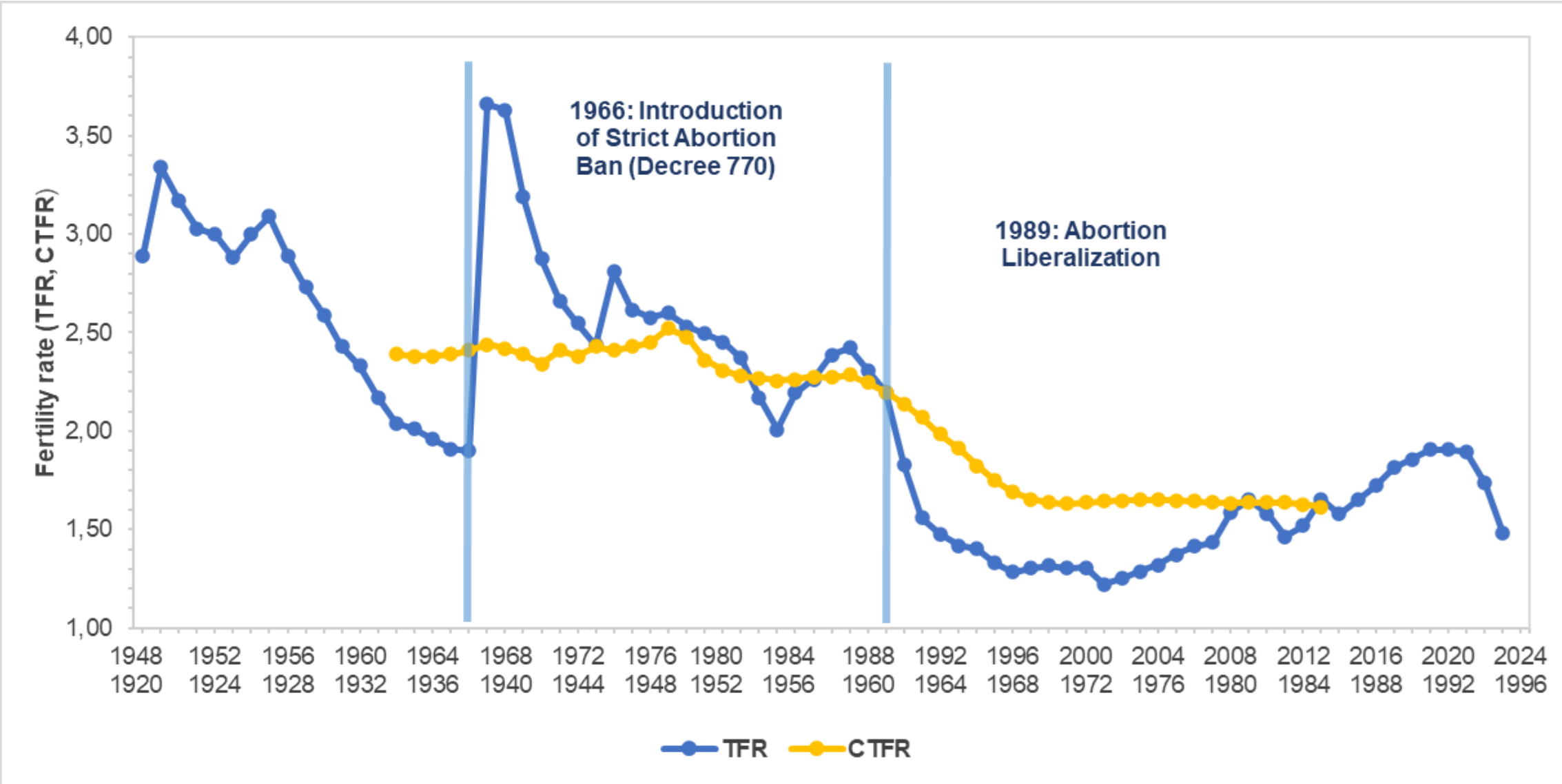
Methods:

- Frejka postponement–recuperation model
- Cohort fertility analysis
- Benchmark cohorts approach

CHRONOLOGICAL DEVELOPMENT OF FAMILY SUPPORT POLICIES IN ROMANIA: 1955–2023

| Period / Stage | Policy Model | Main Measures | TFR Trend |
|------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| 1. Early Socialist Period and Abortion Liberalization (1955–1965) | <i>State-socialist modernization and reproductive liberalization</i> | <ul style="list-style-type: none"> • Legal access to abortion • Expansion of women’s labour participation • Maternity leave and job protection • State-provided crèches and kindergartens | Sharp decline (from high levels) |
| 2. Restrictive Pronatalist Regime and Coercive Reproductive Control (1966–1989) | <i>Authoritarian pronatalist policy model</i> | <ul style="list-style-type: none"> • Severely restricted abortion (allowed only in exceptional cases) • Limited access to contraception • Compulsory gynecological controls and monitoring • Financial incentives for large families • Tax penalties for childless adults • Extended maternity leave and workplace protection • Expansion of childcare infrastructure | Increase, followed by decline (due to diminishing effectiveness and economic hardship) |
| 3. Post-socialist Transition and Liberalization of Reproductive Rights (1989–2004) | <i>Liberal-demographic transition model</i> | <ul style="list-style-type: none"> • Legalization of abortion and contraception • Restoration of reproductive rights • Collapse/restructuring of socialist support system • Reduction of state intervention in fertility • Emergence of market-based welfare reforms | Strong decline (to very low levels) |
| 4. Consolidation of Family Policies and Standardization of Parental Benefits (2005–2015) | <i>Social protection and family support model</i> | <ul style="list-style-type: none"> • Universal parental leave schemes • Standardized monthly childcare allowances • Expansion of maternity and parental benefits • Incentives for return to work • Gradual development of childcare services | Low-level stabilization |
| 5. Modern Family Policies, Work–Family Balance and Assisted Reproduction (2016–2023) | <i>Dual-earner and gender-equality oriented family policy model</i> | <ul style="list-style-type: none"> • Flexible work arrangements and parental leave • Non-transferable paternity leave quotas • Expansion of childcare services and early education • Financial support for IVF and infertility treatments • Digitalization and diversification of family services | Low-level stabilization with slight improvement in recent years |

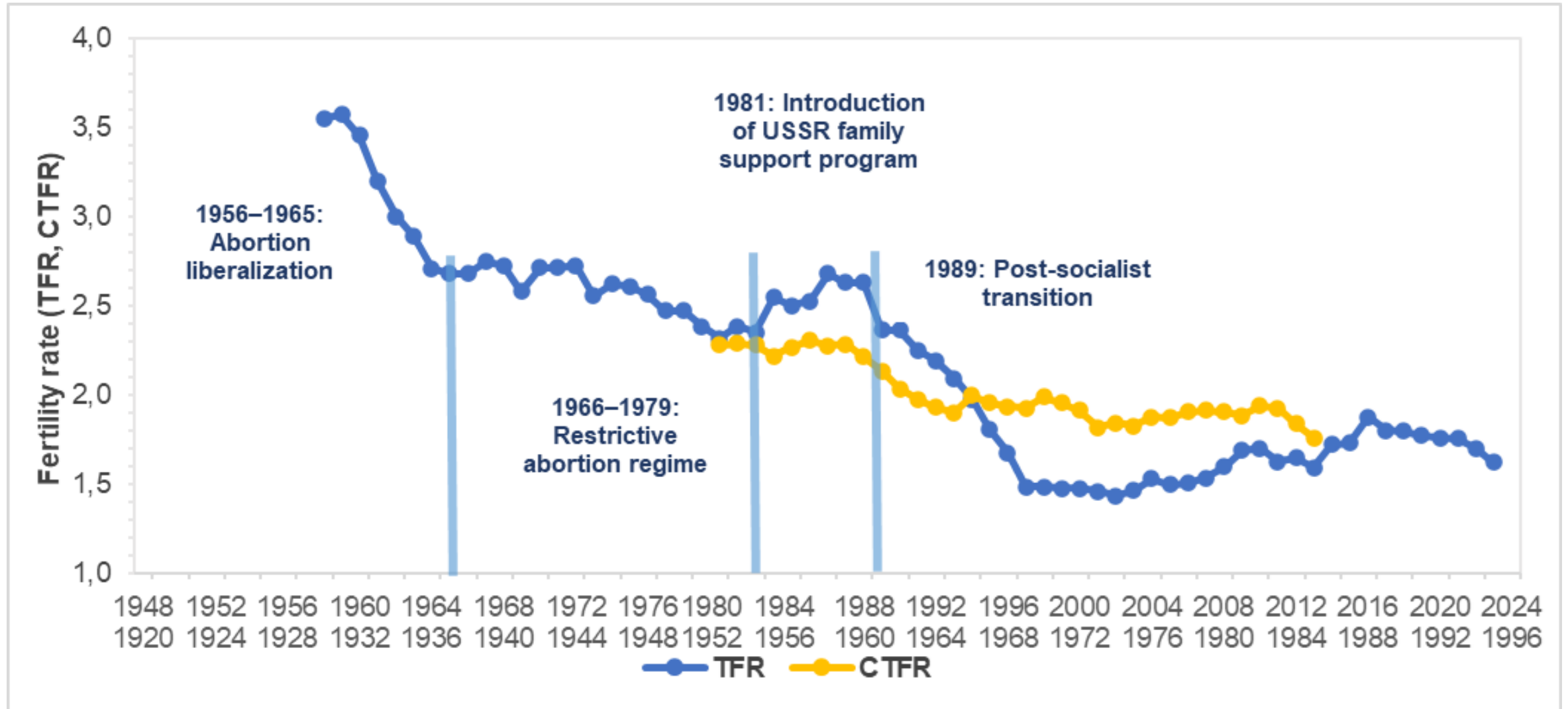
Period and cohort fertility trends in Romania, 1948–2023



EVOLUTION OF FAMILY SUPPORT POLICIES AND FERTILITY TRENDS IN MOLDOVA: 1955–PRESENT

| Period / Stage | Political and Administrative Context | Main Measures | TFR Trend |
|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| 1. Soviet Period (1955–1990) | Part of the USSR | <ul style="list-style-type: none"> • Legal abortion available • Expansion of childcare infrastructure • Paid maternity leave and job protection • Child allowances • Housing support and preferential loans | High, then gradual decline in the 1950s–60s; rise and significant increase in the 1980s |
| 2. Post-Soviet Transition and Fertility Decline (1991–2004) | Early post-soviet transition; economic crisis and institutional instability | <ul style="list-style-type: none"> • Sharp reduction in the real value of child and family benefits • Underfunded social services and infrastructure • Targeted cash benefits for vulnerable families • Tax deductions for dependents • Limited maternity support | Sharp decline to very low levels around 2002–2004 |
| 3. Consolidation and Rebuilding of Family Support System (2005–2015) | Consolidation of the independent state; economic growth and reforms | <ul style="list-style-type: none"> • Increase in child allowances and one-time birth grant • Expansion of maternity leave (duration and payment) • Development of early childhood education and care services • Programmes for vulnerable families and single mothers • Promotion of gender equality in employment | Low, with slight recovery and stabilization around low level |
| 4. Modern Policies in the Context of Multiple Crises (2016–Present) | Social reforms with high emigration and external shocks (COVID–19, war) | <ul style="list-style-type: none"> • Parental leave for both parents (with extensions) • Higher and better-targeted family benefits • Expansion of early childcare and preschool services • Support for IVF and infertility treatments • Digitization and accessibility of services • Campaigns promoting fathers' involvement and gender equality | Relatively stable at a low level |

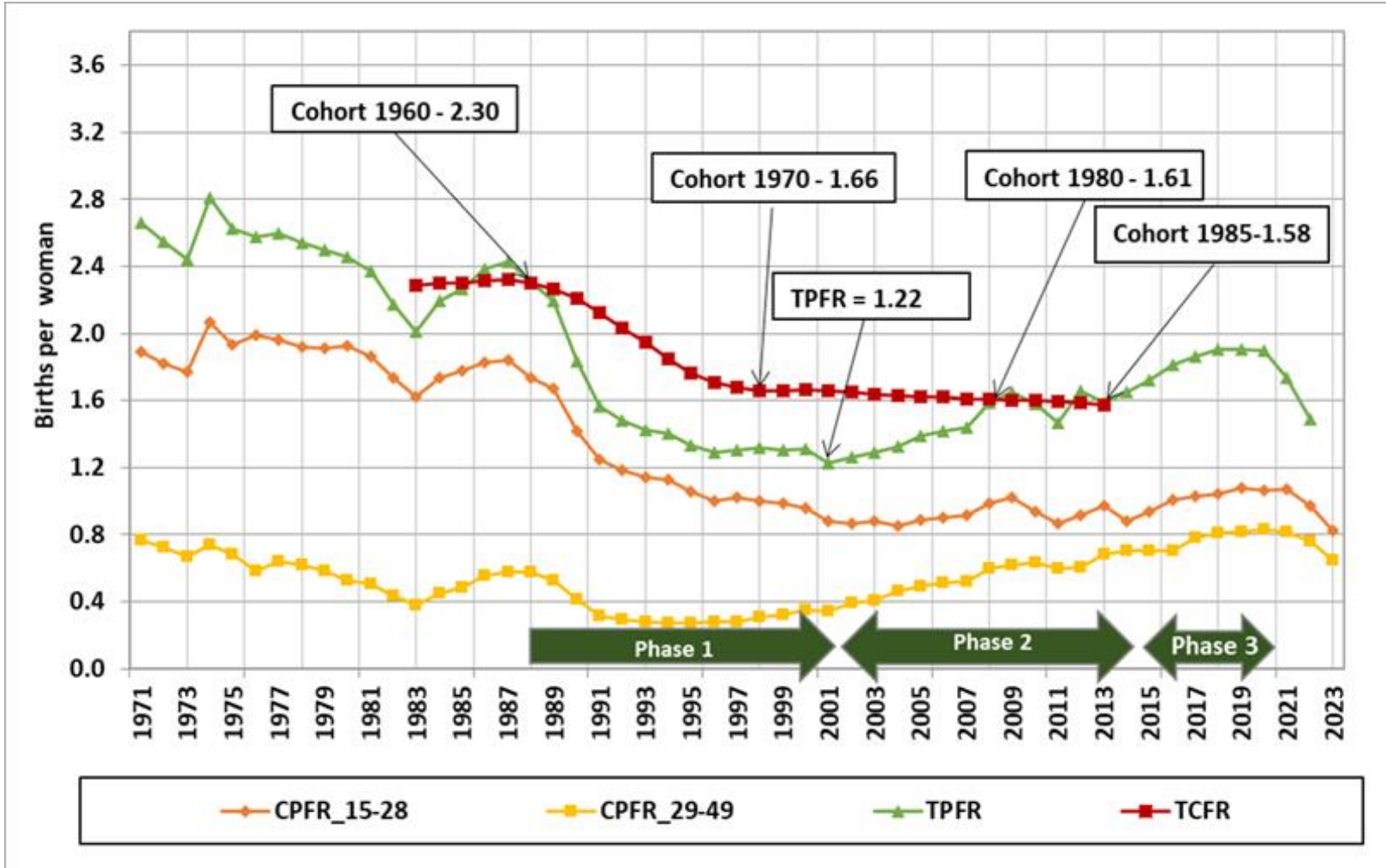
Period and cohort fertility trends in Moldova, 1955–2023



The model proposed by T. Frejka for postponing / recuperation fertility:

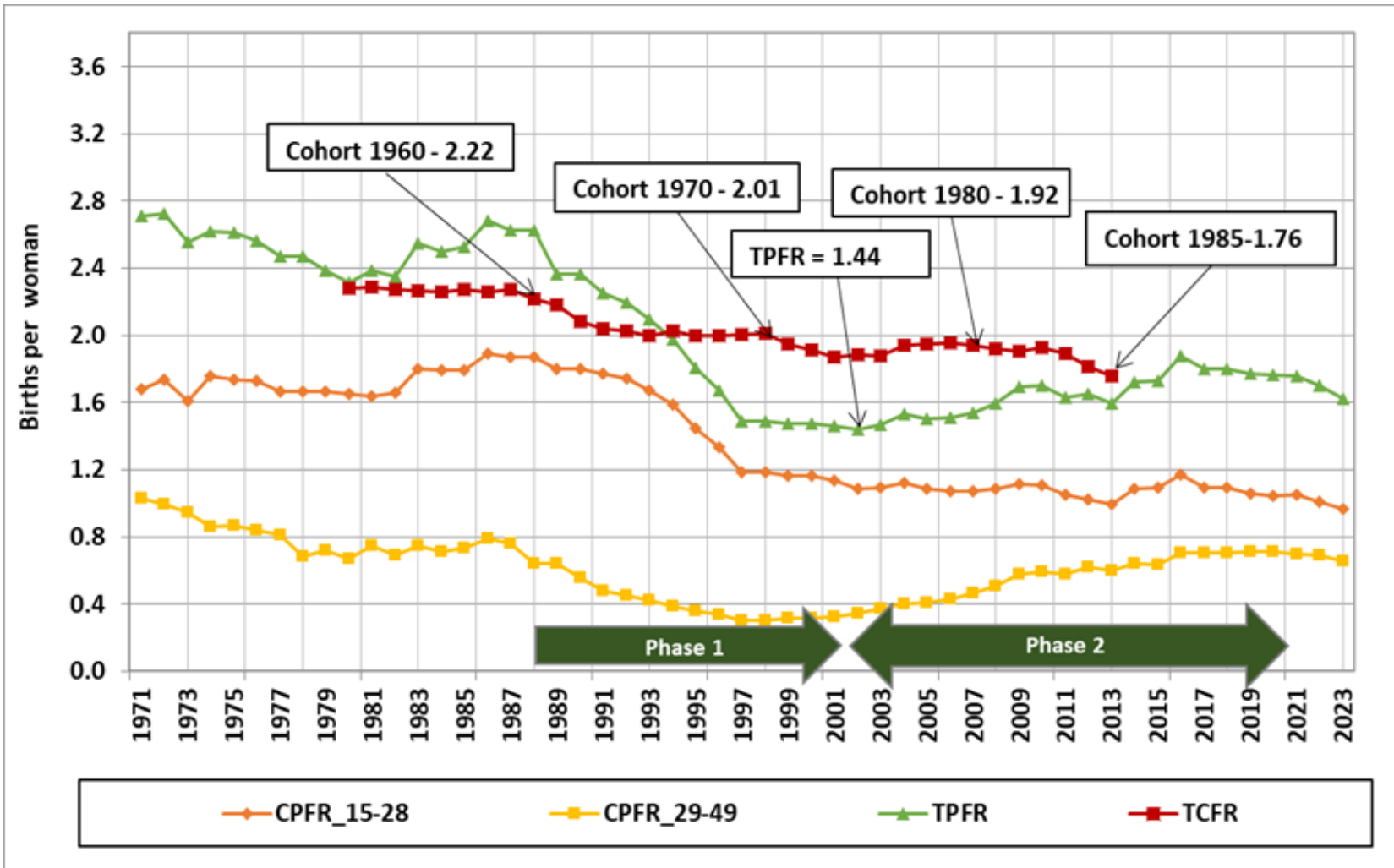
- 1. Declining total period fertility rate (TPFR), (phase 1):** Young women (aged 15-28) postpone the birth, for about 10 years, thus their fertility is declining. At this time, fertility rates for women aged 29-49 do not change and are stable, because these are the women of older cohorts that do not yet have births to recuperate, however, towards the end of this phase there may be an incipient childbearing recuperation. At the end of this phase, the TPFR is at its lowest level.
- 2. Initial TPFR increase (phase 2):** Childbearing postponement of young women continues, possibly at a slower rate. TPFR begins to increase because the cohorts of older women recuperate their deferred births that go beyond the continuous postponement of births in young ages. TPFR is usually increasing in phase 2, but there can be periods during which the TPFR trend may be more or less stable.
- 3. Final TPFR increase (phase 3):** Fertility of young women stabilizes over time, while of the older continues to increase, stimulating TPFR increase.
- 4. Stabilized TPFR (phase 4):** Childbearing recuperation has ended and there is no childbearing postponement among young women. The total period and cohort fertility rates settle at roughly the same level.

Phases of the Fertility Transition, T. Frejka's Model, Romania



- **Phase 1 (1988–2001):** TFR dropped significantly, 1.22 children per woman in 2001.
- **Phase 2 (2002-2012)**
- **Phase 3 (2013–2019)**
- The transition toward phase 3 coincided with the expansion of parental leave and childcare policies after 2005.

Phases of the Fertility Transition, T. Frejka's Model, Moldova



- **Phase 1 (1990–2002):** Marked by a rapid fertility decline among young women (15–28). The TFR - 1.44 children per woman.
- **Phase 2 (2003–2015):** The Cumulative Period Fertility Rate (CPFR) among older women remained stable—a distinctive feature for Moldova.
- The slower recuperation pattern may reflect weaker institutional support for work–family reconciliation.

Romania entered the postponement transition approximately one decade earlier than Moldova

ROMANIA

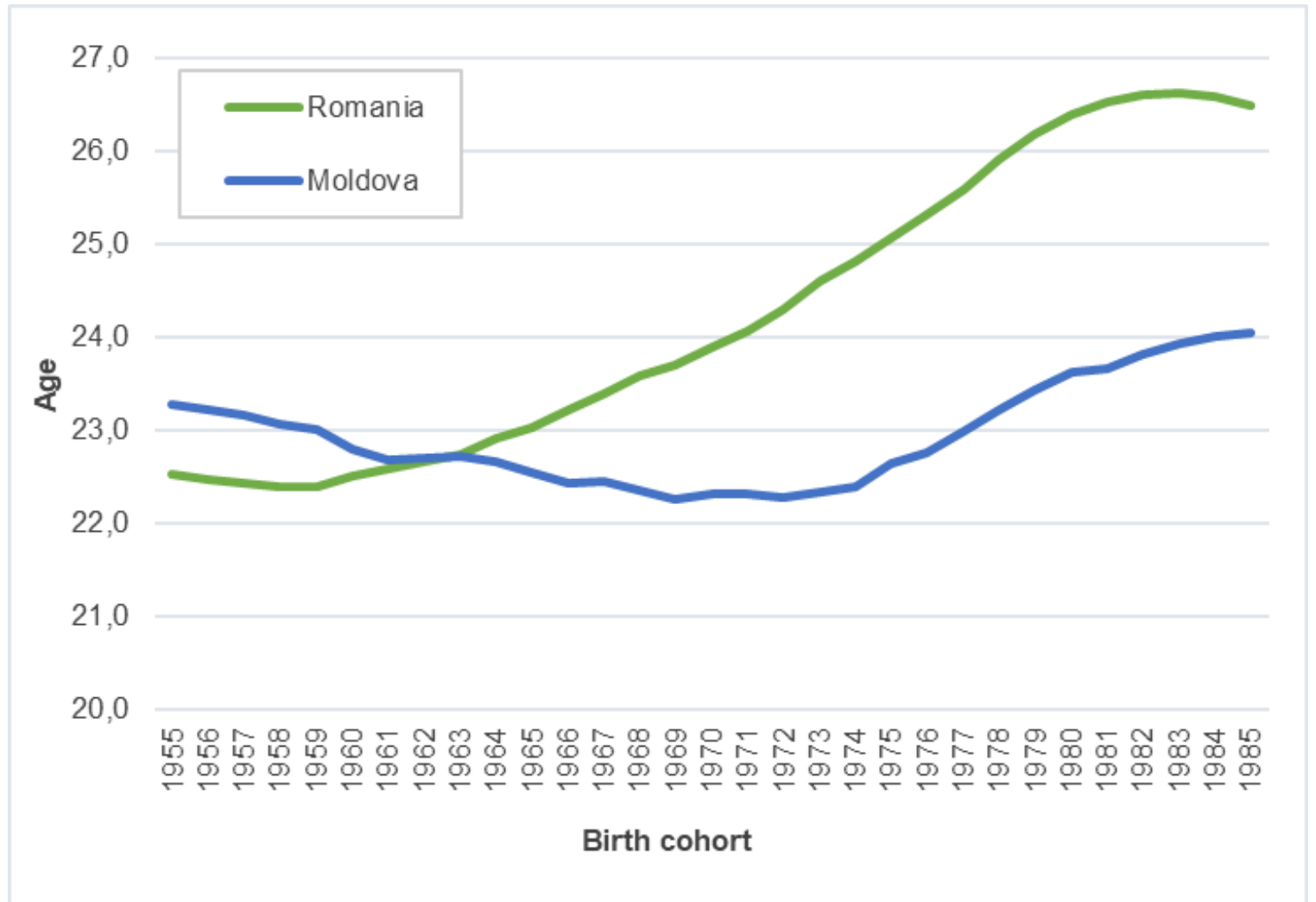
REFERENCE COHORT: 1960

First sustained increase in mean age at first birth.

MOLDOVA

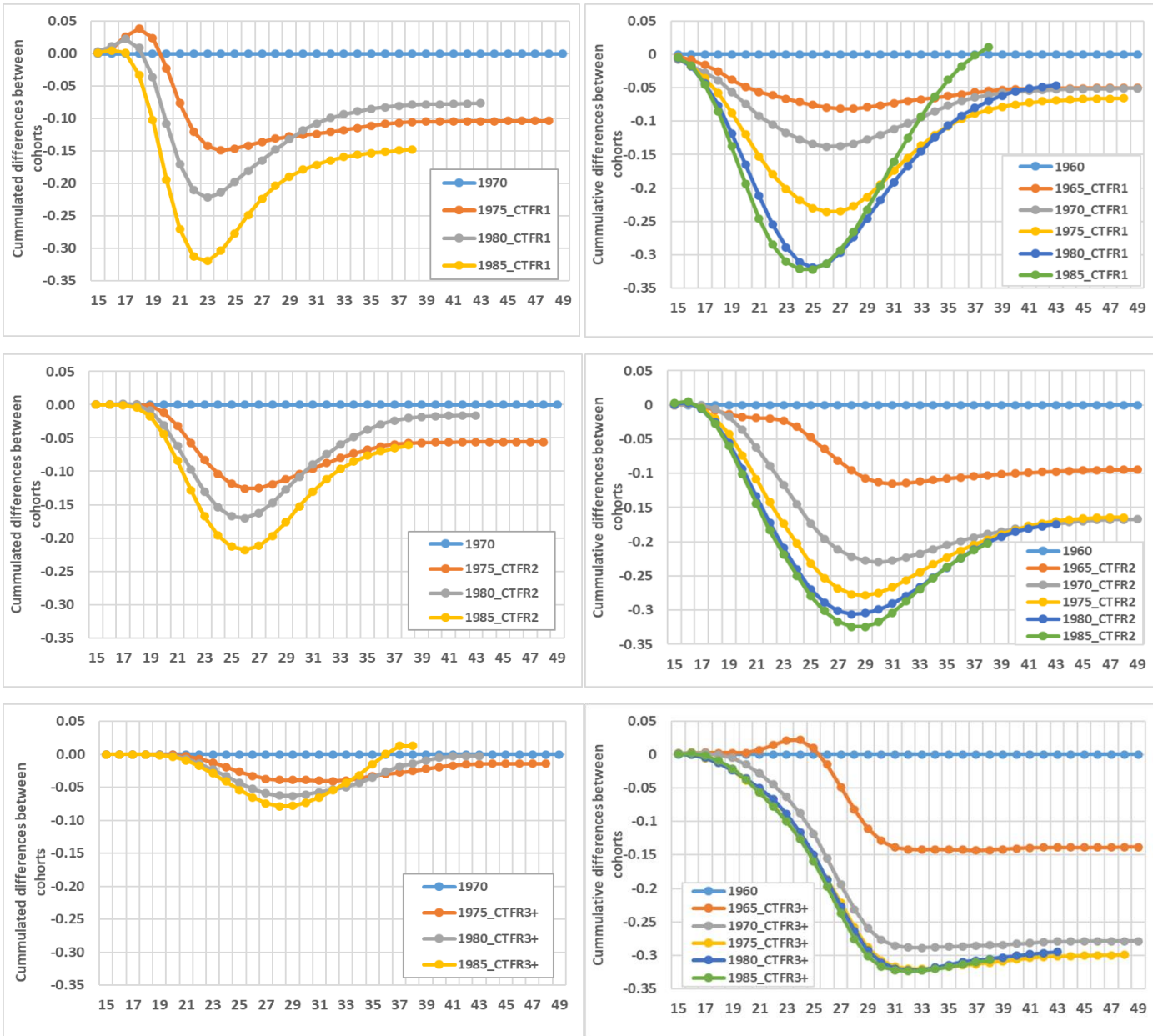
REFERENCE COHORT: 1970

Beginning of the postponement of first births.



Mean age at first birth, for generations of women born in 1955-1985

Fertility Postponement and Recuperation by Birth Order, Moldova and Romania

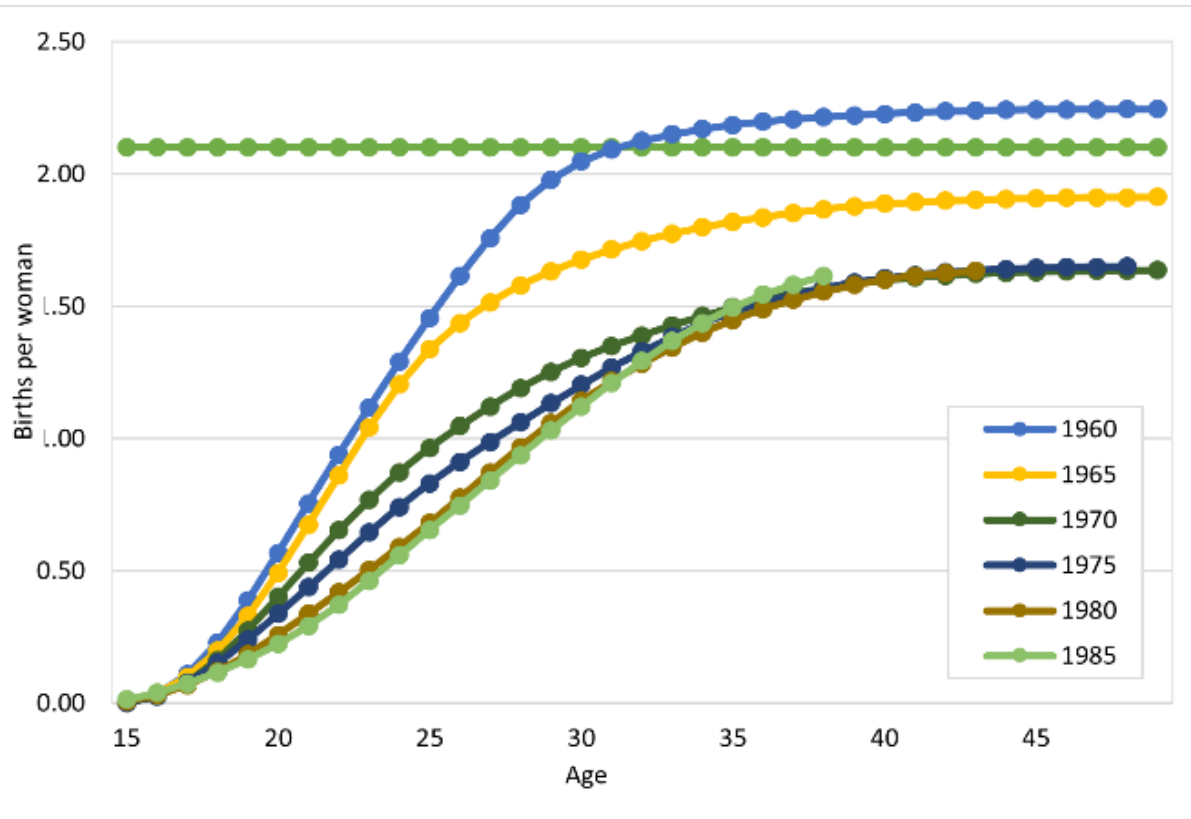


Moldova

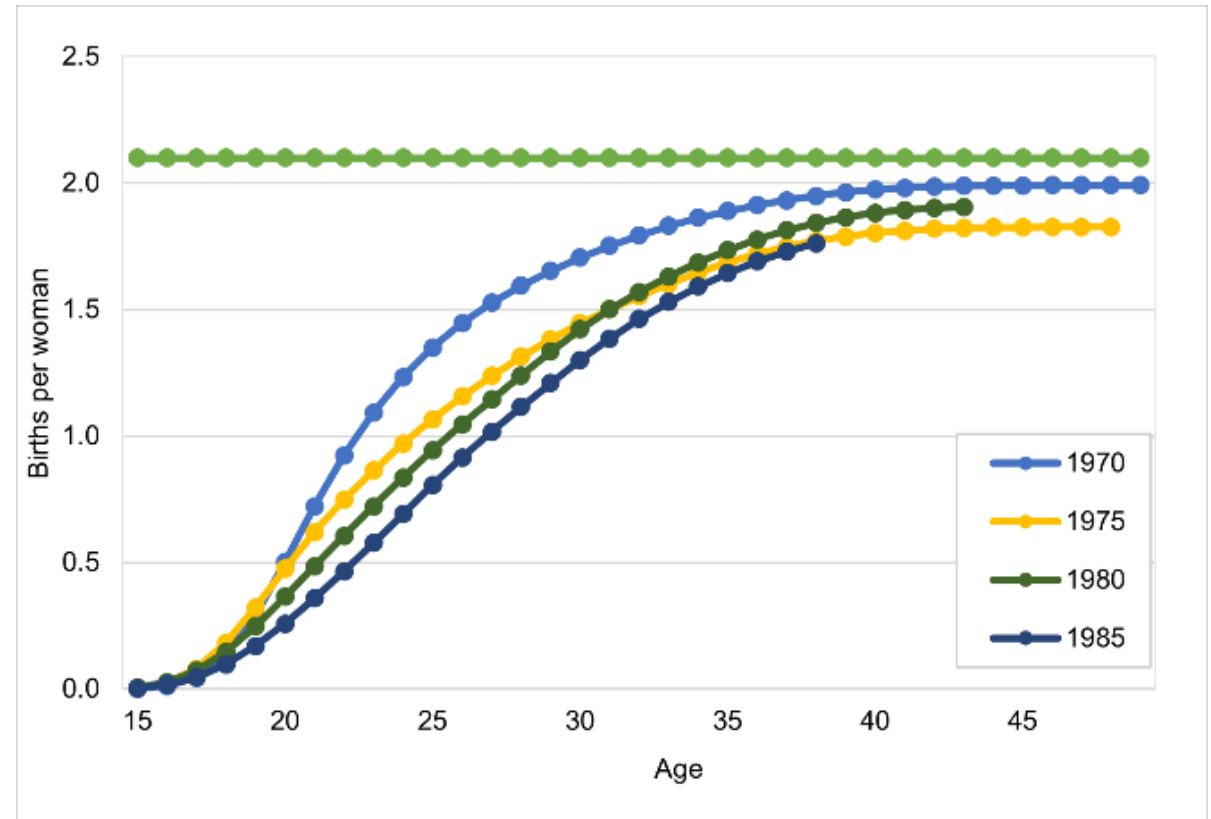
Romania

- Fertility decline in Romania is driven mainly by reductions in higher-order births, reflecting a transition toward smaller family size.
- The Moldovan pattern suggests a slower transition toward low fertility and a continued persistence of the two-child family model.

Cohort fertility patterns by age in Romania and Moldova



Romania



Moldova

Conclusions

1. Despite the strong cultural and historical proximity between Romania and the Republic of Moldova, the fertility transition followed distinct trajectories shaped by different family policy regimes and post-socialist institutional contexts.
2. The findings suggest that the long-term effects of demographic policies extend beyond fertility levels, influencing reproductive timing, postponement, recuperation, and parity progression patterns across cohorts.
3. Romania experienced a faster transition toward low fertility and incomplete recuperation, while Moldova preserved for a longer period a reproductive model closer to the two-child family pattern.
4. Overall, fertility transition in both countries reflects the interaction between demographic change, socioeconomic transformation, and family policy development, highlighting the importance of context-specific and long-term policy approaches.

Fertility in Romania and Moldova: Exploring the Dynamics, Determinants and Policy Impact (FERM) 2024-2026

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Thank you for your attention!

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