In Search for a Pronatalist Population Policy for Turkey

Türkiye için Pronotalist Nüfus Politikasi Arayışı

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Abstract

Turkey has witnessed high fertility rates and low mortality rates until 2000s. Young population structure, need for infrastructure for growing population and reproductive health issues were always on the agenda of policy makers throughout the history of Turkey. After the decline in total fertility rate below replacement level, vibrant discussions and search for a new policy framework began to be visible in the recent years. After the establishment of new Republic in Turkey in 1923 pronatalist policies were active until the beginning 1960s. After the First Development Plan in 1962, policy shift was towards an antinatalist direction until 2000. After a short period between 2000 and 2012 which can not be put any category in terms of fertility policy government clearly declared its position favouring pronatalist policies and mobilised bureaucracy for developing new policy options. This paper summarizes the fertility policies and demographic transition of Turkey and evaluates possible policy options.
Key Words: Family Policy, Fertility, Gender & Family, Child care, Work & Family Balance

Özet

Türkiye 2000'li yıllara kadar yüksek doğurganlık ve düşük ölümlülük oranlarına şahit olmuştur. Genç nüfus yapısı, büyüyen nüfus için altyapı ihtiyacı ve üreem sağlığı Türkiye'nin tarihi boyunca politika yapıcıların gündeminde olmuştur. Toplam doğurganlık oranının yenilenme düzeyinin altına inmesinden sonra, son yıllarda yeni bir politika çerçevesi arayışı konusunda canlı tartışmalar görünür hale gelmiştir. 1923 yılında Türkiye Cumhuriyeti kurulduğundan 1960'lı yılların başına kadar pronatalist politikalar etkili olmuştur. 1962 yılında ilk Kalkınma Planı'ndan sonraki politika değişikliği 2000 yılına kadar antinatalist bir yönde olmuştur. 2000 ve 2012 yılları arasında net olarak bir politika kategorisine konulamayan dönem sonrasında Hükümetin tercihi pronatalist politikalar yönünde olmuş ve bu amaç için bürokrasi yeni politikalar geliştirmesi konusunda hareketlendirilmiştir. Bu makale, Türkiye'nin doğurganlık politikalarını ve demografik dönüşüm sürecini özetleyerek muhtemel yeni politika seçeneklerini değerlendirmektedir.
Anahtar Kelimeler: Aile Politikası, Doğurganlık, Toplumsal Cinsiyet & Aile, Çocuk Bakımı, İş Hayatı & Aile Dengesi

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Introduction

Turkey has witnessed high fertility rates and steadily growing population throughout the Republican history. Mindset of politicians and policy makers has been shaped by that fact. The Republican governments aimed to struggle with the disadvantages of young population and tried to benefit from the potentials of that population structure. After 2000, fertility rates and future of population have been discussed and questioned by scholars and policy makers. In 2005 for the first time in nation's history age population of primary school has been declined and after 2010 total fertility rate has decreased below replacement level. Political parties, bureaucrats, academicians and public media have been discussed heavily about the future of Turkey's population and population dynamics.

Data and Methodology

Population Censuses, Turkish Demographic and Health Surveys (TDHS) and national Development Plans are used as data sources for the study. For total fertility rates; between 1927-1973 rates are used from Population Censuses. After 1968 Demographic and Health Surveys have been conducted as a part DHS international series. After that date Development Plans and Ministry of Health have started to use DHS results as official figures. 2013 fertility rate is the estimation of TURKSTAT's official population projections. Total population numbers are based on Population Censuses except 2013. That year's number is the estimation of TURKSTAT's official population projections.

Based on the literature on demographic transition and population policies an analytical evaluation of past policies is presented and Turkey's demographic transition has been summarized. More developed countries' demographic transition and governments' policy reflexes have been analysed. Turkey's population projections until 2050 and policy options for the coming decades have been commentated by evaluating more developed countries' policy framework.

Background: Demographic Transition of Turkey

Since the first Census that has been conducted at the fourth year of new Republic the population of Turkey has increased constantly. Especially at the first decades of the Republic population has increased very fast and after 1950s although the population has continued to grow, total fertility rates have declined.
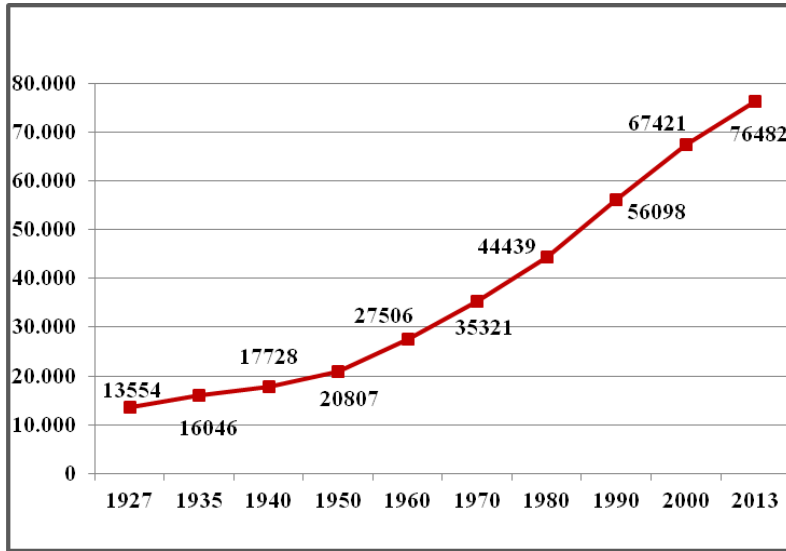
Figure 1. Total Population of Turkey 1927-2013 (.000)
Source: Population Census 1927-2000, TURKSTAT Official Population Projections 2013.

Although there are significant regional variations total fertility rates declined as shown in the graph in all parts of Turkey depending on urbanization, socio-economic development and cultural changes. Infant mortality rates also declined sharply from 149 per thousand births in 1967 to 12 per thousand births in 2013. In parallel with the decreasing death rates, life expectancy at birth has increased from 33 in 1940 to 74 in 2013.
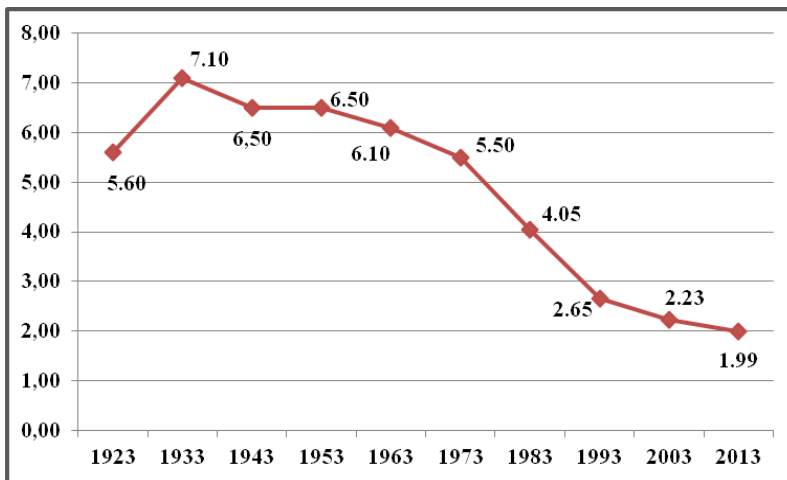

Figure 2. Total Fertility Rate 1923-2013
Source: Population Census 1927-2011, TDHS 1968-2008, TURKSTAT Official Population Projections 2013.

The path of Turkey resembles the pattern of demographic transition from high fertility and high mortality to low fertility and low mortality. According to The Population of Turkey 1923-1994 (DİE-Previous name of State Institute of Statistics) the first phase of demographic transition was between 1923 and 1950. In that period death rates declined sharply and fertility rates increased from 5.5 to 7.1. Second World War period is the exception of that argument. Second phase was between 1955-1985 (or 1990). The period began by the highest natural increase rate which is 2.8 per cent annually. Total fertility rates declined in that period but slower that the decline in death rates so total population doubled. The most striking phenomenon in that period was fast urbanization and transition of family from extended to nucleus family. Between 1985 and 2000, annual population increase was around 1.8 per cent. 0-14 age group was at the highest point both in terms of percentage and number and started to decline afterwards. For the beginning of the third and the last phase there is not any widely accepted date or any period. Commonly after the 2000s it is accepted that Turkey has entered the last phase of demographic transition (Koç, 2010:4). During that period between the establishment of Republic and 2013, population structure of Turkey can be summarised as steadily declining fertility rates, large proportion of working age (15-64) population, small but increasing share of elderly (65+) and declining young population (0-14) as shown in the graph 3.
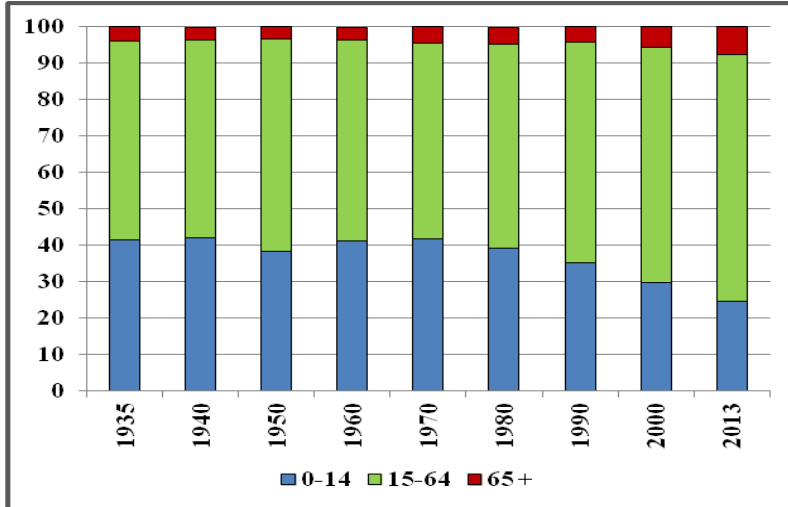

Figure 3. Share of Age Groups in Total Population (%)
Source: Population Census 1927-2000, TUKSTAT Official Population Projections 2013.

Population Policies between 1923 and 2013

Population policies of Turkey can be analysed in two periods; 1923-1960 the pronatalist period and 1960-2000 antinatalist periods. Before 1923, during the Ottoman Empire there is not any population policy in modern sense but a

pro-children traditional culture. After the new Republic in 1923 post war anxieties were effective on the decisions of population policies. The mentality of founders of new Republic was prone to be pronatalist but lack of data and weak institutional structure, traumas of I. World War and Independence War and population exchange with Greece did not permit for governments to implement an effective population policy. In the opening speech of Grand National Assembly in 1 March 1923 and in other official speeches M. K. Atatürk declared the population as a basic crucial matter of the nation and the need for protecting and increasing the number of Turkish people in the newly established country.

Motives for a pronatalist policy in that period have not been shaped only by military reasons. Besides wars, also epidemic diseases caused population loss. Natural population increase was not sufficient to meet the need of agricultural and non-mechanised production.

In that period, several pronatalist legislations were enacted about official age for marriage, financial awards and tax exemptions for families having six or more children. After the first free and fair elections in 1950, the elected governments of Adnan Menderes also mentioned about pronatalist policies explicitly (Behar, 1999:39). But at the second half of 1950s population policy has been questioned due to fast and unplanned urbanization, illegal and unhealthy abortions and lack of public investment for new generations. After 1960 military coup newly established State Planning Organisation and Ministry of Health worked for antinatalist policies. First Development Plan including antinatalist policies has been legalized by Parliament and in 1965 "557 numbered Population Planning Law" has been enacted. So, the beginning of 60s is accepted as the breaking point for policy change. Afterwards almost all five year development plans between 1965 and 2007 (from 1. to 8. Five Year Development Plans) referred to population and development correlations and mentioned the need for controlling the population growth. Different from the previous ones Ninth Development Plan focused on reproductive health issues and referred to ageing.

As a general evaluation of population policies three arguments can be concluded. Firstly, the evolution of population policies of Turkey is in parallel with the evolution of international agenda on population. Secondly, fertility behaviour is mostly affected by social and economic conditions and the effect of population policies were quite limited. Behar (1980:4) has calculated the effects of population policies (1965-1980) on fertility less than 10 per cent. Thirdly, fertility was perceived just as a variable in development equation and social feasibility of population policies were ignored in that period (Levine and Üner, 1978:247).

Population Projections of Turkey

According to the basic scenario of TURKSTAT, (Turkey Statistics Institution) total fertility rate by 2013 is 1.99 (below replacement level since 2010) and it is projected that rate will decrease to 1.85 in 2023 (which is

commonly referred in national documents because it is the 100th aniversary of Republic) and 1.65 in 2050. Total population of Turkey will continue to increase at a decreasing rate until 2050. Annual population increase is predicted to be 11.2 per thousand in 2013, 8.4 per thousand in 2023 and 0.3 per thousand in 2050.
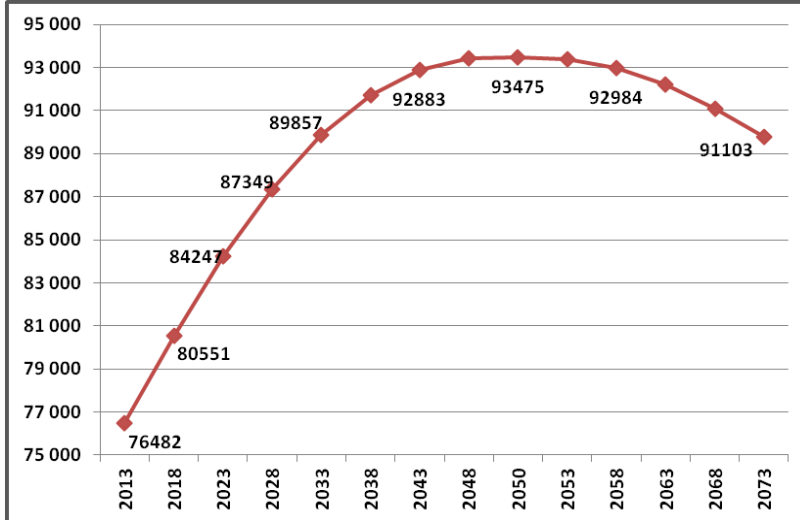

Figure 4. Total Population of Turkey 2013-2075 (.000)
Source: http://www.tuik.gov.tr/PreTablo.do?alt_id=1027#.

Between 1923 and 2050 total population will stabilise after seven times increase. After 2050 population growth rate will be approximately "zero" and total population will begin to shrink after that date. Within that period the population "pyramid" of Turkey will turn to a "pillar" shape and will resemble developed countries' population pyramids. Based on that scenario the future expected trend of total population is shown in the graph 4. By age groups; share of 0-14, 15-64 and 65+ age groups in total population will be 24.5, 67.8 and 7.7 in 2013 and 15.7, 63.4 and 20.8 in 2050 respectively. While the total population increases 1.5 times, 65+ age group will increase three times in percentages within 40 years as shown in the graph 5.
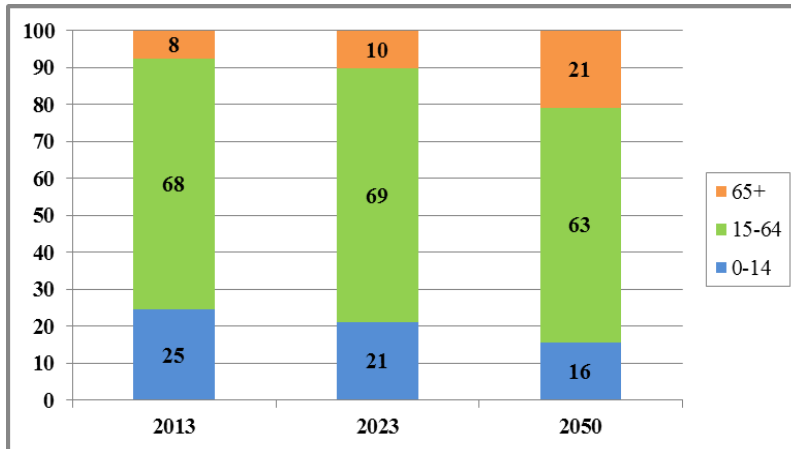
Figure 5. Percentage of Main Age Groups in Total Population (2013-2050)

Source: TURKSTAT Official Population Projections 2013.

Projections always have potential to be mistaken. Especially some developments after 1970s showed us it is more difficult now to make demographic estimations for next decades. Although fertility behaviour evolves slower and more stable than other social indicators, astonishing trends are observed after 1970s. Billari et. al. (2006:13) have analysed European countries and concluded that correlation coefficient between total fertility rate and divorce rate was -0.48 in 1975 and +0.27 in 2002. In parallel correlation coefficient between total fertility rate and births out of marriage was -0.41 in 1975 and +0.61 in 2002. Changing trends should lead policy makers to rethink on future projections and possible proactive measure for changing population trends.

Fertility Trends in Europe

Although all of the developed countries' fertility rates are going down, the patterns and speed of decline are not identical. European experience can be analysed by three main groups. As Coleman frames (2003) the first group is North Western European states including England, Scandinavia and France. Within that group, comparatively high fertility rates (1.7-1.9) persist and sometimes an upward trend can be observed. In that countries births out of marriage rates are high, extended family rates are low and households are becoming atomized (alone or single parents households) fast. Welfare and family policies are well developed. Second group consists of German speaking countries which are between two groups by geography and by fertility patterns. In that group, countries are more conservative in the field of social policy and fertility rates are below 1.5. The third group is South European model with traditional family structure, cohabitation and births out of marriage rates are low, weak or undeveloped family policies and division of labour based on gender is significant.

With parallel to the Coleman's classification, McDonald (2006) categorized countries as; countries having total fertility rates between 1.7 and 1.9 and countries having total fertility rate below 1.5. McDonald classified East

European and South European countries as the second group. But within the second group McDonald attributes different explanations for East Europe and South Europe as the reasons behind lowest low fertility. For East Europe fluctuations after transition to market economy, unpredicted job market and lack of state protection affected to postpone fertility decisions. In South Europe strong family culture with weak family policies obliged women to opt between having baby or being employed.

When considering those patterns with low female labour force participation rates (30 per cent), strong family ties and high responsibility of women within the family, low (almost none) levels of cohabitation and births out of marriage and insufficient welfare policies and family supports it is more likely for Turkey to follow the South European path. The current assumptions of national official population projections are not in line with that comment. Current official projection assumes a decline in total fertility rate from 1.99 (2013) to 1.65 (2050) in 37 years which is a very optimistic decline when considering the South European pattern. There are not clear and strong signs of transforming to a mature welfare state, strengthening women in domestic field and in employment, increasing the quality and accessibility of childcare facilities and pre-primary school for accepting a smooth decline and/or stabilisation in the total fertility rate over 1.5. That optimism partly stems from the misbelief of the potential of strong family culture and being Muslim to block the catastrophic declines in total fertility rates. Current literature does not provide any evidence of a correlation between strong family ties and high fertility. On the contrary there are some counter examples like Korea, Bulgaria and Iran all have lower total fertility rates than Sweden, Finland and France. According to the analysis of Eberstadt and Apoorva (2012) between 1985 and 2005 (for some countries 2010 values have been used) five out of ten fastest declining total fertility rates belong to Muslim countries. As a striking example Iran's total fertility rate is 1.6 in spite of a traditional culture and conservative family planning policies (Homa and Assadpour, 2000).

Policy Framework of Europe

The history of pronatalist policies and/or policies which have pronatalist effects in Europe dates back more than 100 years. Besides countries individual policies in 1984 European Parliament has accepted a directive in 1984 about the need for increasing population. Policy options vary in a very wide range from more coercive (Romania) implications to strong family supports (France) and more developed welfare states (Sweden). Today it is not possible for any modern and democratic state to implement coercive policies like banning abortion and contraceptives. In this context, only countries of which policies have potential to be taken as a model for Turkey will be referred.

France and Sweden are the first countries that should be analysed when discussing fertility. France has the longest history of pronatalist policies which are also known as one of the most generous and most comprehensive policies. Since the establishment of National Center for Cooperation of Declining Population in 1896 low fertility rates have been a national issue. After 1920

inclusive policies restricting the abortion and contraceptive and after Second World War tax and cash benefits have been implemented. 1970 and onward policies have concentrated on family and work life balance. It is claimed that after 1980s pronatalist policies have made a contribution at 0,3 level on fertility and total fertility rate has increased from 1,5 to 1,8 (Calot and Chesnais, 1983).

Sweden has the best supportive environment for women to have babies. Second important factor for analysing Sweden is its challenge to common perceptions in theory. Sweden has challenged the arguments that marriage is a necessary social institution for having a baby (Ahn and Mira, 1999) and fertility declines will be persistent and irreversible. Billari et. al (2009) showed that the relation between development and fertility is not linear in their study covering 1977-2002 periods. Up to a certain level, development is negatively correlated with fertility. After 0.85-0.90 Human Development Index coefficient, fertility trends starts to move upwards. Japan and Korea are the exceptions of that argument.

In parallel, in OECD countries while there is a negative correlation between women employment and total fertility rate was in 1980 (determination coefficient is 0.16), in 2010 a positive correlation coefficient (determination coefficient is 0.07) is observed (OECD Family Database Online, 2013).

Sweden and other Scandinavian cases do not show us that the more cohabitation and women labour force participation rates will increase the total fertility rate. Nordic cases shows us more equality in employment and in domestic field, better chances for women to be employed again after birth, less risk of poverty ease for women to have a/additional children. Women tend to have babies in modern age unless it will be possible both having baby and work at the same time (Andersen, 2004:383). The comparison of successful Nordic cases and unsuccessful direct pronatalist cases (Russia, Singapore, Hungary) guides policy makers to take necessary measures as a part of comprehensive welfare state policies instead of developmentalist approaches.

According to the Hoem (2008:250) the success of Nordic countries in stabilising fertility rates are neither miracle nor by nature. Well designed, generous and timely implemented policies have effected positively on fertility decisions.

Together with implemented successful policies in search for increasing birth rates, some radical solutions have also been recommended. Demeny (1987) has offered a new social security model which pays a certain amount of premium to the parents of the premium payer. In that scenario families having more children or better premium payers will have higher retirement salaries. Although that proposal has not been implemented by any state, it is a striking example of theoretical and intellectual exercises on pronatalist policies.

Findings and Discussion: Possible Paths for Turkey

To be proud of the size of population and be anxious about population decline as old as the history of states. But to take systematic measures is a comparatively new phenomenon for states. In Turkey anxiety about decision makers are both about the size and the age structure of future population.

Decline of birth rates has two different and related effect on population structure; shrinking the population size and ageing of population. The first effect will be seen after 2050 in Turkey. Even if that possible effect is not so far, there is not any evidence that the size of population is a preventive factor for development. For Western societies there is not any statistically significant relation between per capita income and the size of population (Coleman, 2003:6).

On the other hand change of age structure, increasing mean age of population and increase of the share of elderly population have the potential to effect social and economic development. For Turkey when comparing to developed world, the effects of ageing are not acute. The mean age of population is expected to increase from 30.1 in 2013 to 42.9 in 2050. The percentage of elderly population is projected to increase from 7.7 per cent in 2013 to 20.8 per cent in 2050.

When comparing to European and other developed societies Turkey's elderly ratios are not likely to cause major problems. But taken into consideration that the effects of pronatalist policies are modest and only can be seen in the long run it is the right time to review policy structure of Turkey and think on possible paths for the coming decades. For an ageing Turkey three policy options or a combination of those policies can be possible. Those three options are; migration, direct pronatalist policies and welfare (especially family) policies.

Migration

Accepting migrants regularly may contribute to sustain a dynamic society. But the Western experience also shows some drawbacks of migration policies for a few reasons. USA and Canada as best examples for a permanent migration policy have weak potential to be imitated for Turkey. In the long run migrants also adopt the host countries fertility behaviour and start to age. So in the long run, migration will also be an unsustainable policy for most of the developed countries. Since it is not always possible to control the skills of migrants, it is more likely for Turkey (like any other country accepting migrants) to attract unskilled and uneducated labour. It is known from the European experience that unemployment and poverty rates of migrants are higher than national average it is highly probable that migrants will have integration problems due to social exclusion stemming from material (poverty) and nonmaterial (ethnic and other discriminations) reasons. Turkey has an additional disadvantage for migration flows because of its geographical position. On the condition that Turkey adopts a more migration friendly policies, it will be first step for migrants whose ultimate destination are Europe and will probably turn into a transition country for migration flows.

Above mentioned social integration problems, need for investment to regulate the migration flows, and the education and skills of potential migrants are crucial questions causing Turkish government to remove migration from the policy options list.

Direct Pronatalist Policies

Second option is to promote having children by direct pronatalist policies of which examples can be evaluated by analysing the Eastern European, Russian and Singaporean cases. Among set of alternatives for direct pronatalist policies cash transfers are the most common policy tools. Financial supports have been implemented in a wide range covering lump sum payments, monthly allowances, awards, credits, tax benefits, reduction of premium payments. Romania as a more coercive example has banned abortion and sometimes contraceptive many times. Abortion has been banned in 1936, accepted as criminal activity in 1948, released in 1955, restricted in 1957 and banned in 1966 again and lastly released in 1990 (Bradatan, 2009). After 1967 child allowances has been began to be paid by government. But all those efforts measures could not prevent Romania to have one of the lowest levels of total fertility rate.

Singapore although has not been coercive, have the same destiny. After implementing very stable antinatalist policies between 1966-1986, Singapore has changed fertility policy in the opposite direction and announced new pronatalist policy with the motto of "three or more" (Andersen, 2004). The government used mass media, public campaigns, financial supports and new institutions - like Social Development Unit of which aim was to increase marriage rates among university graduates - in that process. After the 2000 although family supports have been more generous, promotions were not persuasive for people and fertility rates continued to decline steadily (Leong, 2006). Despite all efforts Singapore's partly discriminatory case has been recorded as an unsuccessful policy example.

Some other country examples from East Europe like Hungary can also be cited in that perspective (Macura, 1999). Russia also implemented stable pronatalist policies which have roots from Soviet period since 1944 but could not succeed to increase birth rates (Avdeyeva, 2011). After 1982 cash benefit for second and third child, long maternal leaves and housing supports had small positive effects on fertility. That effect was not in the direction to increase total fertility rates but had a tempo affect which means to backdate the postponed fertility decisions. After a short period of tempo effect, the supports have been perceived as taken for granted by families and lose its attractiveness for parents (Demeny, 2003:351).

In spite of President Putin's central government has announced "Maternal Capital" support program which covers in cash and in kind benefits up to 10.000 USD and additional federal governments' supports total fertility rate of Russia remained low. Avdeyeva (2011) explains the failure of policies by lack of gender perspective of policies and overestimating the effects of cash benefits. For Avdeyeva (2011) cash benefits will remove the burden from husband to state and bring nothing for women. Hence cash benefits have potential to contribute to patriarchal relations within the family.

More developed countries are abstaining from implementing direct pronatalist for three reasons. Firstly hitherto pronatalist policies have not been successful explicitly. Secondly pronatalist rhetoric is associated with totalitarian

governments in the past. Thirdly matured welfare states deal with the happiness of the population rather than the size of them.

Cash benefits and other direct policies have little or no positive effect on fertility behaviour as different country practises and academic evidences depict. But that kind of policies are still on the agenda of policy makers because of implementations easiness. It is easier to plan and implement cash benefits and media campaigns when compared to family supports given as services. Lack of time and qualified professional staff are other constraint for short lived governments.

For Turkey direct pronatalist policies have little chance to be implemented. There are some considerations in Turkey to give cash benefits to families. Institutional trust of citizens to governments is weak for persuading potential parents. Especially cash benefits will not convince people as a long lasting support that will persist after the government changes. Another factor of potential failure is the underestimating the cultural transformation towards more individualistic, comfort seeking and more independent life style. Financial supports may have limited effects just on the lowest income level families. Since the better off families have fewer children, it is paradoxical to increase the fertility rates by financial promotions. Another discussed policy option, to support certain segments of society based on education, employment status or geography, is a common catastrophic mistake for governments that will damage state-society relations in an irrecoverable way. That policy option will mean that the government sees the citizens as two categories; those who are eligible for reproduction and those are not.

Another structural factor is that even if the pronatalist policies are successful increase at the birth rates are not adequate for preserving the same age structure because of increasing life expectancy and decline in the number of women at fertility ages. As a matter of fact transformation of age structure is not only affected by changing fertility behaviours.

Supportive Welfare Environment and Building Trust for Future

In order to overcome the burdens of ageing, the third policy option is to benefit from the demographic window of opportunity and building supportive environment for families. The rationale of that perspective is changing the question of "What kind of population structure should we have for our policies?" with "Which kind of policies should we implement for our population?" To prepare the young population for following years by high quality education and creating qualified and secure jobs, increasing healthy years in life by especially preventive health services will bring a secure future for population and sustainable birth rates. In brief if the governments look after the society well, the society will look after itself.

Although Turkey has recorded significant progress in access to education indicators quality of education, regional disparities and neither in education nor in employment (NEET) youth remains still acute problems of Turkey. In PISA 2009 (Program for International Student Assessment) Survey Turkey has been the 31. country among OECD countries in terms of quality of

education. In Human Development Index education ranking Turkey is not among first 100 countries. According to OECD Statistics (2013) neither in education nor in employment rate for 15-24 years old population is 30.2 and for 15-19 years is which is approximately two times higher than OECD average. For 15-19 years old females that rate is 34 per cent. When looking at employment indicators without giving too much detail, it may be enough to mention that in the past 30 years employment creation rate was below population increase rate.

In the next 30 years Turkey's major policy concern should be increasing human capital and creating jobs for young population. Otherwise it is more likely that as literature suggests demographic window of opportunity will turn into demographic burden. That conclusion does not suggest that the burden of ageing which will be more visible after 2040 is negligible. But attracting attentions on post-2040 problems should not shade current acute problems of providing education and employment for youth. Even for decreasing health care expenditures in the coming decades, government should invest more on current young population by preventive health care. Because there is high correlation between the status of health at younger ages and the status of health at older ages.

For improving policies to increase birth rates four general principles should be mentioned by looking at the study of Sleebos (2003) which has analysed 42 national and cross cultural studies. Firstly, persistent effects of pronatalist policies can only emerge in the long run. Secondly, there is not any "best policy" for countries, but the true combination of policy options for each country should be formulated. Thirdly, policies should target the society not just the potential parents or certain segments of the society. Fourthly, expectations of policy makers should be modest from pronatalist policies because even the effects of "successful policies" have remained limited until now.

Among many implemented or unimplemented and radical or widely accepted policy options, Turkey"s policy framework should be developed on the basis of affordable, high quality, accessible childcare, women's empowerment, ensuring work-life balance.

Child care will have potential positive effects not only on increasing fertility but also gender balance and ensuring equalities of opportunity. Recently child care has been offered as a prominent policy option by many studies. (See Esping-Andersen et al., 2002 and Kimberly Morgan, 2009) Free child care facilities will increase for women to participate in work force. According to the World Bank Report (2009) major reason for low female labour force participation in Turkey is; low wages can not compensate in house duties of women in Turkey. Free child care will contribute to gender equality by easing the financial burden of families, liberating women for making choice between to work and having children and balance time use in domestic field between man and women.

Secondly, thanks to the childcare facilities work and family balance will be better and Turkey will not live the fate of South European countries which force women to choose either to work or having children.

Third positive effect will be on education. The effect of socio-economic background is higher than many OECD countries. For a better equality of opportunity and removing background factors on success is to invest on pre-school education.

Institutional childcare for 0-2 year old is 2.4 per cent in Turkey (Turkey Family Survey 2011:239), 26.7 per cent in EU-27 (2007) and 30.3 per cent in OECD. As an indicator of time use within the household, respondents said that childcare is given by mother 89.6 per cent and by father 1.5 per cent (Turkey Family Survey 2011:239).

In Turkey informal childcare by grandparents are no longer possible because intergenerational solidarity weakens in spite of strong traditional family culture. Turkey Family Surveys (2006 and 2011; and also Koç et al. 2010) show that grandparents choice is to live in the same neighbourhood (but not in the same house) with their children in order to ensure proximity and autonomy. But high immigration rates and increasing retirement age impedes intergenerational solidarity for child care. In the absence of institutional care for children and increasing need of caring for elderly population will increase the pressure on women and impede increase in female labour force participation.

For an effective future implementation child care services should have three characteristics; accessible, affordable and qualified (Michel and Mahon 2002, Gornick and Meyers 2003, Szelewa and Polakowski 2008). Besides childcare centre investments other physical environment also should be designed in a "baby friendly" manner. Both physical environment and cultural perceptions should facilitate for women to appear in recreation areas, to use public transportation and leisure time facilities and to take care of children in work places.

Childcare support is one of the most effective policies for promoting families to have more children. But In Turkey current and possible social responsibility obligations of companies are generally desgned for large companies that have over 200 or 250 employers. For example Ministry of Family and Social Policy of Turkey has proposed that companies over 200 employers must have nurseries at workplaces. But in Turkey less than 2 per cent of employment work at large scale enterprises. Second proposition of the Ministry is; private nurseries will be promoted with value added tax exempts, low interest bank credits and providing land for constructing the buildings. Although foreseen supports are necessary and positive for promoting private sector, it is ambiguous that those supports will increase the profitability of nurseries or reduce the childcare cost of families. Additionally current rigid legislative necessities for establishing a nursery should be more flexible in terms of physical and full time staff requirements. For a sustainable effect for childcare support, accessible, high quality and affordable nurseries at all neighbourhoods with walking distance should be considered. But due to the high cost and staff requirements, it is not on the agenda of related ministries for the present.

Today Belgium, Finland, France, Denmark and Sweden are implementing policies in order to strengthen women and to keep them in work force after having children. In his comparative analyses Sleebos (2003) has

estimated total fertility rate and in cash direct benefits determination coefficient as 0.07, total fertility rate and accessible childcare determination coefficient as 0.43 and total fertility rate and family-work life balance as 0.27.

Maternal leave is four months in Turkey and behind the six month European average. Maternal leave should be extended to cover at least the first six months and mother's leave should be used as parental leave. Father's leave has been perceived as useless in Turkey's cultural context. But legal regulations have potential to effect cultural values and attitudes in the long run. Previous applications at other countries indicate that after legal leave rights are granted fathers start to take role in child care and share home duty responsibilities in time.

Currently, mothers have 1.5 hour permit leave of work for breast-feeding up to one year. In public sector the permit is 3 hours for the first six months. But currently there is not any mechanism for employers to work part time for child care. Although part time employment is a very effective instrument for ensuring work-life, it is not implemented in public or private sector currently. Regulations should be revised in order to provide part time work until the child begins to school. Flexible working women is 31,6 per cent of women employment is European countries and helps women to ensure work-life balance. To guarantee the same position/salary is also among policy instrument that can be ensured by legislative regulations. But that potential policy arrangement adversely may effect on women employment and may increase the propensity of employers to prefer male employees more after that new rights.

Among OECD countries Turkey has the highest gender employment gap with 40 per cent. It should be mentioned that percentage is less than 5 in Nordic countries. By increasing double income families and decreasing risk of poverty some positive (but limited) effects can be achieved (Palomba and Kotowska 2003, Hantrais 2005) on fertility rates. But considering the current situation and prospective pronatalist policies, it is less likely that the gender gap in Turkey will decrease. Insufficient support for work life balance will result with limited increase in female labour force participation rates or a sharp decline in total fertility rates which has been the deadlock of South European countries.

Age of first marriage has increased steadily by time in Turkey. It is expressed by policy makers that a bank credit without interest will be available for new married couples if they are between 18 and 24 years in order to prevent increase of age of first marriage. The credit is expected to be 6.000 USD equivalent which is far behind the cost of setting up a home and does not have a potential to promote early marriages and decreasing the age of having baby at first birth.

An effective family support system requires generous for financial resource allocation as it is the case in Nordic European countries. Family supports are more than 3 per cent of GDP in those countries and 2.6 in OECD countries. When taking into consideration that all social assistance including free health care for poor is 1.35 per cent of GDP in Turkey, it is clear that Turkey has an inadequate policy framework for supporting families in that respect. The cost

of possible new regulations is expected to be around 1 billion USD equivalent which is approximately 2 per thousand of GDP.

Turkey should both increase the amount of money for family supports and diversify the benefits. For example tax exempts and refunds have never been used as a family support. Pro-family (or pro-children) tax regulations have potential to help families but currently only a worker can benefit from income tax exemption on the conditions that having five children, his/her wife/husband does not work and salary at the minimum income level.

When developing the mentioned policies, best combination of timing, and amount of public resources (both in terms of money and staff) allocated and compliance with other policies also should be taken into consideration. For example comparison of France and Germany in Neyer and Anderssan's study (2008:706) is striking. Both of two countries are in the same classification of welfare state in Esping-Andersen's work and implemented similar family policies but France has succeeded to keep fertility levels at a certain point and fertility of Germany has declined steadily. Major reason for that difference is the duration of family supports. Unlike France, has family supports more than 80 years, Germany has implemented effective and generous family after 2000s.

Media campaigns are also on the agenda of policy makers for promoting having more babies. It is redundant to say that posting happy family pictures father and mother with three children holding each others' hand. But for a government in search of a pronatalist policy the words used in public have crucial role. As it happened in Singapore (Graham, 1995) and some other countries people are inherently reflexive for intervention to private life. The statements of labour force needs in the future, national security risk and similar developmentalist or statist arguments will imply that "citizens exist for the sake of states". Whereas having a baby is an important component of life satisfaction and almost in all of the countries desired number of children are higher than actual fertility levels. If we accept not having children as desired number is a kind of deprivation, it becomes imperative for governments provide necessary policy framework for that. In parallel with A. Sen's (1987 and 1999) capability approach promotions and supports for having babies should aim to ensure the citizens what they want to do or what they want to have. And eventually that perspective should form the policy makers" and governments" rhetoric.

Conclusion

After having total fertility rate at replacement level, future of Turkish population and related government policies have been heavily discussed. Nevertheless population prospects do not present a catastrophic scenario for the next future. The share of elderly in total population will increase from 8 per cent to 21 per cent in 40 years which is comparatively manageable. A preventive policy is needed to overcome the burdens of ageing in the long run. Among three main options of ageing, migration and direct cash benefits are not on the agenda of the country. The third option embraced by government is providing supportive environment for families.

Maternal leave, part-time work for mothers, financial support for marriages at early ages and child care support are possible policy options for

Turkey. But the variety of policies foreseen and planned amount of financial resources is not adequate when comparing to European countries which succeeded to cease the decline or stabilise fertility rates around 1.7. The government should take the matter into consideration in detail with a broader perspective and should benefit from the experiences of the European countries. It should also be kept in mind that pronatalist policies can only have effect in the long run and expectations of fertility increase should be modest.

Expectation of policy makers is to design new regulations for promoting increase of fertility. Two important considerations should be mentioned here. First even if Turkey has stabilised fertility rates at replacement level, the population will continue to age. It is not possible to preserve current age structure of Turkey due to both declining fertility rates and increasing life expectancy. In that respect ageing is also inevitable for Turkey. But necessary education, employment and social security policies will mitigate the burdens of ageing and long term, professionally designed and culturally acceptable family policies may end up with stabilising fertility rates at a safe range of 1.7-1.9.

Second, the decision of having a baby should not be perceived by governments as a variable in development equation. In Turkey, desired number of children is around three children which is higher than actual total fertility rate. The gap between actual number of children and desired number of children can be accepted as welfare gap for families. The rationale of policies should intend to close the welfare gap and to increase the hope of families for the future of themselves and their children.

Finally, for better policy making, social and economic conditions obstructing families of having children should be understood by especially qualitative studies and public policies should be formulated accordingly. Especially longitudinal data is needed on gender roles, time use in domestic responsibilities, institutional and informal childcare, cost of child care by regions and social groups, detailed questions on desired number of children, reasons behind decreasing family size, social perception by time and region, institutional trust to government support, effects of current and possible supports, general life satisfaction and future expectations, employee perspective for employing women with children, level of intergenerational support and gap between women's wage and cost of childcare.

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