

THE CHILD IN FLANDERS

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Foreword

The 2001 edition of "The Child in Flanders" is here. And the new offspring has turned out to be quite a bit heftier than its brothers and sisters! You will find a wide range of information, not only statistics but also information about specific aspects of the circumstances in which young children

live, such as child care, prosperity and deprivation, and passive smoking, and about the social and medical development of young children. Special attention has been devoted to cot deaths, hearing impairments, accidents and breast-feeding.

An important parameter for the work of Child and Family is the number of births, the number of young children. New population forecasts from the NIS enable us to get a better picture of the expected trend in the child population.

As well as updating the statistics, the report contains a number of additions to the content. Data on the free-time activities of young children are included for the first time, more attention has been devoted to living conditions, an even fuller picture is given of the diversity of families with young children, and teenage pregnancy - births and abortions - is examined in detail.

We have continued gradually to extend the scope of the report towards including all children in Flanders: we are including more and more data on children right up to adolescence in addition to data on very young children.

This publication aims to serve as a reference work for anyone in Flanders who is involved in caring for young children or who wants to know how young children in Flanders live. We have also included benchmark data from a selection of European countries.

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Ch. 1.

THE CHILD POPULATION: FEWER CHILDREN?

The number of births continued to fall in 2001. The lowest point of 60 000 births will probably be overtaken soon - in 2004? Recent population forecasts predict that this will be in 2004. This is connected with the fact that the number of potential parents is continuing to fall, and so the number of children is decreasing due to the shrinking number of potential parents.

This chapter first presents a number of basic figures and then goes on to explain these figures, indicate trends and place the figures in a European context.

In addition to children born in Flanders, there are also children who have come from other countries: immigrants, including adopted children and asylum seekers. These figures will also be interpreted.

1. Number of births

In 2001, there were 61 697 live births in the *Region of Flanders* (provisional figure). The number of births fell slightly compared with 2000 (-0.3%) (see Table 1.1 and Figure 1.2). In 2001, the birth rate in the Region of Flanders reached a new record low since the Second World War.

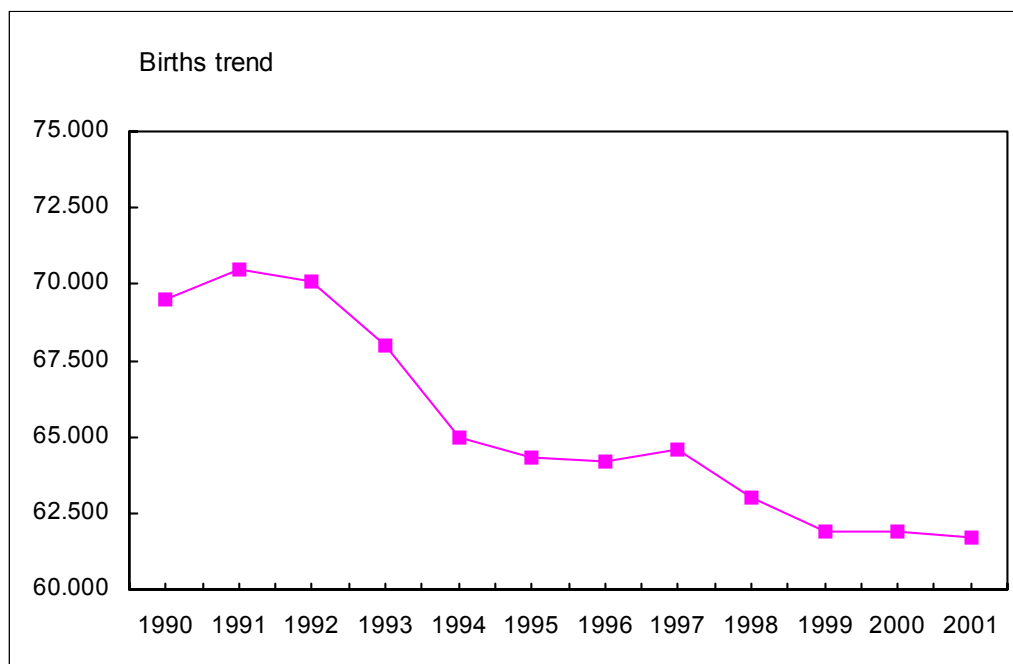
Births

2000	61 877
2001	61 697*

1.1 Number of live births in the Region of Flanders

Source: NIS - Population trends

* Provisional figur



1.2 Trend in the number of births in the Region of Flanders since 1990

Source: NIS - Population trends

Table 1.3 shows the number of births *per province* (provisional figures). The number of births was lower than in 2000 in all provinces apart from the province

of Antwerp. The decreases were: -1.1% in West Flanders, -1.5% in Limburg and -1.6% in Flemish Brabant and East Flanders. There was a 2.7% rise in the birth rate in Antwerp.

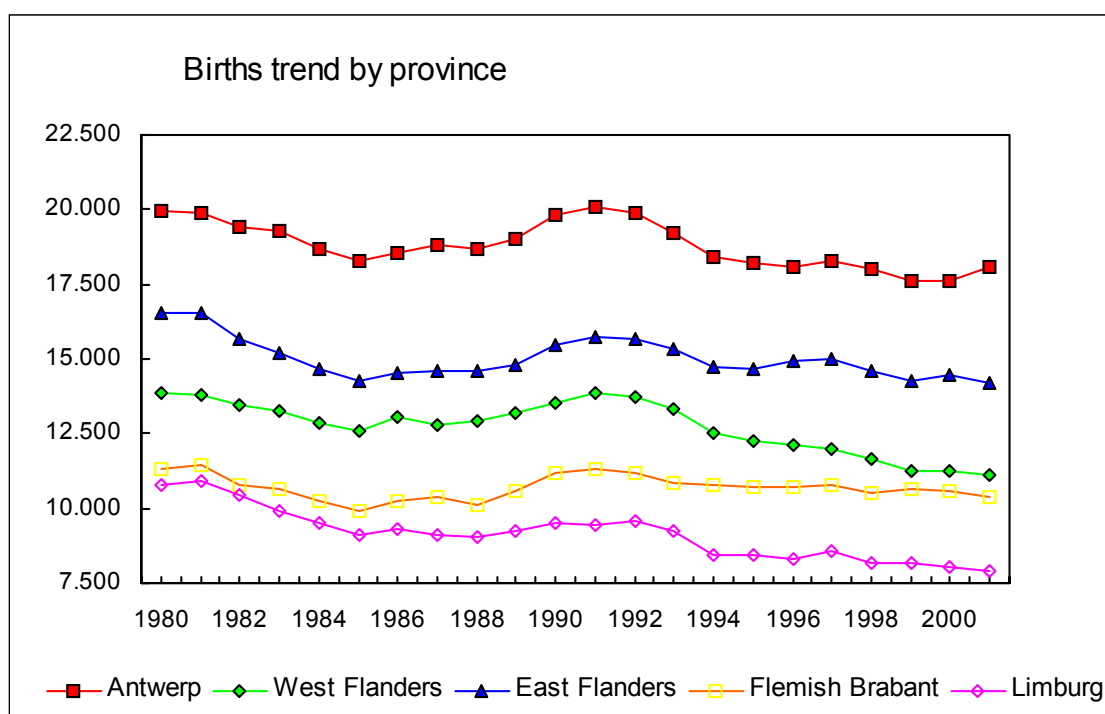
Births by province

	2000	2001*
Antwerp	17 579	18 057
Flemish Brabant	10 562	10 392
West Flanders	11 253	11 127
East Flanders	14 454	14 217
Limburg	8 029	7 904

1.3 Number of live births per province

Source: NIS - Population trends

* Provisional figures



1.4 Trend in the number of live births by province

Source: NIS - Population trends

Some children are born together with a brother or sister. About 3.7% of births come into this category. The number of children being born from multiple births fell slightly, due to a decrease in the number of triplets (see Table 1.5).

Number of multiple births

	1999	2000
Number of twins	1 097	1 100
Number of triplets	31	17
Number of quadruplets	1	1
Percentage of children born from a multiple birth	3.8	3.7

1.5 Number of multiple births and percentage of children born from a multiple birth - Region of Flanders and Flemish maternity hospitals in Brussels

Source: Study Centre for Perinatal Epidemiology

2. Immigration, adoption, asylum seekers

In addition to children born in Flanders, there are children who come to Flanders as immigrants either from the Walloon or Brussels Regions, or from outside Belgium.

In this context, we also present figures for adoptions - the majority of adoptions in Flanders are intercountry adoptions - and figures for minors who are asylum seekers.

2.1. Immigration

In 2000, 4 601 children aged under 12 migrated to the Region of Flanders *from other countries*. This figure is approx. 4.9% lower than in 1999. In addition, 3 466 children migrated *from the Region of Brussels and the Walloon Region*. The number of migrations from other regions was also lower than in 1999 (see Table 1.6).

Immigration

	From another region		From outside Belgium	
	1999	2000	1999	2000
Children aged under 3	1 156	1 063	1 183	1 232
Children aged 3-6	1 089	948	1 426	1 351
Children aged 6-12	1 607	1 455	2 230	2 018
Total	3 852	3 466	4 839	4 601

1.6 Number of children aged under 12 migrating to the Region of Flanders from another region or from outside Belgium

Source: NIS - Population trends

2.2. Adoptions

In the course of 2001, the *authorised adoption services** placed a total of 202 children *for adoption*. This was 43 fewer than in 2000. The majority of placements were of children who came from outside Belgium (85.6%) (see Table 1.7 and Figure 1.8).

The children from outside Belgium came mainly from India, Haiti, China, Vietnam, Ethiopia and the Philippines (see Table 1.7).

At the time of placement in a family, 43.1% of the children were under 1 year old and 32.7% were between 1 and 2 years old. About 24% of the children were 2 years old or more (see Table 1.9).

The average age of the children was 1.1 years, younger than in 2000, when the average age was 1.5 years.

In 48.5% of adoptions, the child was adopted by a childless family. In the case of placement in a family with children, the adopted child was usually younger than the children in the family. No children were placed together with one or more other children (see Table 1.10).

Most of the adoptive parents were aged between 30 and 45. The average age of the adoptive father was 37.1 and of the adoptive mother 35.8. The average age of the adoptive fathers and mothers remained virtually unchanged. A total of 6 children are in a family with no adoptive father and 2 children are in a family with no adoptive mother.

* No information is available on the number of "private" adoptions, i.e. adoptions not arranged through an authorised adoption service.

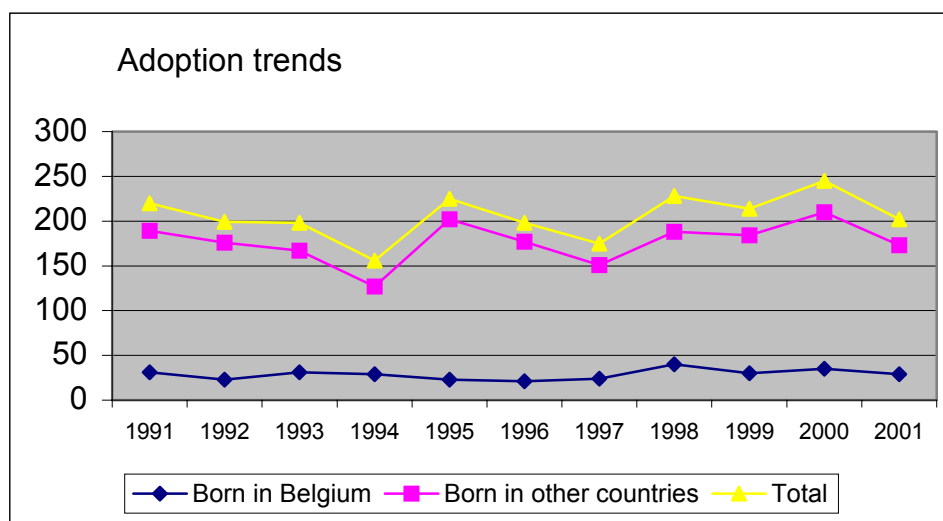
Adopted children

2000

2001

	Number	%	Number	%
Born in Belgium	35	14.3	29	14.4
Born in other countries				
India	35	14.3	32	15.8
Haiti	23	9.4	31	15.3
China	34	13.9	29	14.4
Vietnam	27	11.0	25	12.4
Ethiopia	31	12.7	17	8.4
The Philippines	19	7.8	11	5.4
Russia	10	4.1	7	3.5
Romania	15	6.1	5	2.5
Ecuador	2	0.8	4	2.0
Sri Lanka	3	1.2	3	1.5
Bulgaria	2	0.8	3	1.5
Colombia	2	0.8	3	1.5
Thailand	1	0.4	2	1.0
South Africa	2	0.8	1	0.5
Moldavia	2	0.8	0	0.0
Chile	1	0.4	0	0.0
El Salvador	1	0.4	0	0.0
<i>Total figure for children from other countries</i>	<i>210</i>	<i>85.7</i>	<i>173</i>	<i>85.6</i>
Total	245	100.0	202	100.0

1.7 Children placed for adoption: numbers by country of origin
 Source: Child and Family - Adoption statistic



1.8 Trend in the number of children placed for adoption since 1991
 Source: Child and Family - Adoption statistics

Age on adoption

	2000		2001	
In whole years	Number	%	Number	%
0 years	112	45.7	87	43.1

1 year	64	26.1	66	32.7
2 years	25	10.2	22	10.9
3 years	16	6.5	15	7.4
4 years	10	4.1	3	1.5
5-9 years	11	4.5	6	3.0
10-14 years	7	2.9	3	1.5
Total	245	100.0	202	100.0

1.9 Age of children on placement for adoption
Source: Child and Family - Adoption statistics

Position in the family

	Number	%
Childless family, placement of 1 child	90	44.6
Childless family, placement of more than 1 child	8	4.0
Family with children, placement of 1 child as the oldest child	3	1.5
Family with children, placement of 1 child as the youngest child	99	49.0
Family with children, placement of 1 child as neither the oldest nor the youngest child	2	1.0
Family with children, placement of more than 1 child	0	0.0
Total	202	100.0

1.10 Children placed for adoption by number of children placed and position in the adoptive family - 2001
Source: Child and Family - Adoption statistics

2.3. Minors as asylum seekers*

Young asylum seekers come into *Belgium* with or without their parents. In 2001, 747 minors applied for asylum on their own behalf. The number of minors who applied for asylum was considerably lower than in 2000, when there were 1332. The number of minors included in a parent's application for asylum is not known.

* *Source: National Commissioner for Refugees and Stateless Persons, Office for Unaccompanied Minors*

3. Number of young children

On 1 January 2001 there were 187 226 children aged under 3 in the *Region of Flanders*; there were 196 182 children aged 3-6 and 421 680 children aged 6-12 (see Table 1.11). The number of children under the age of 3 in the *Region of Flanders* fell by 2599 compared with 2000 (-1.4%), the number of children aged 3 to 6 fell by 911 (-0.5%), and the number of children aged 6 to 12 fell by 2163 (-0.5%) (see Figure 1.12).

The proportion of children aged under 3 in the population is 3.15% and the proportion of children aged under 12 is 13.53%. This proportion represents a slight fall compared with 2000 (see Table 1.11).

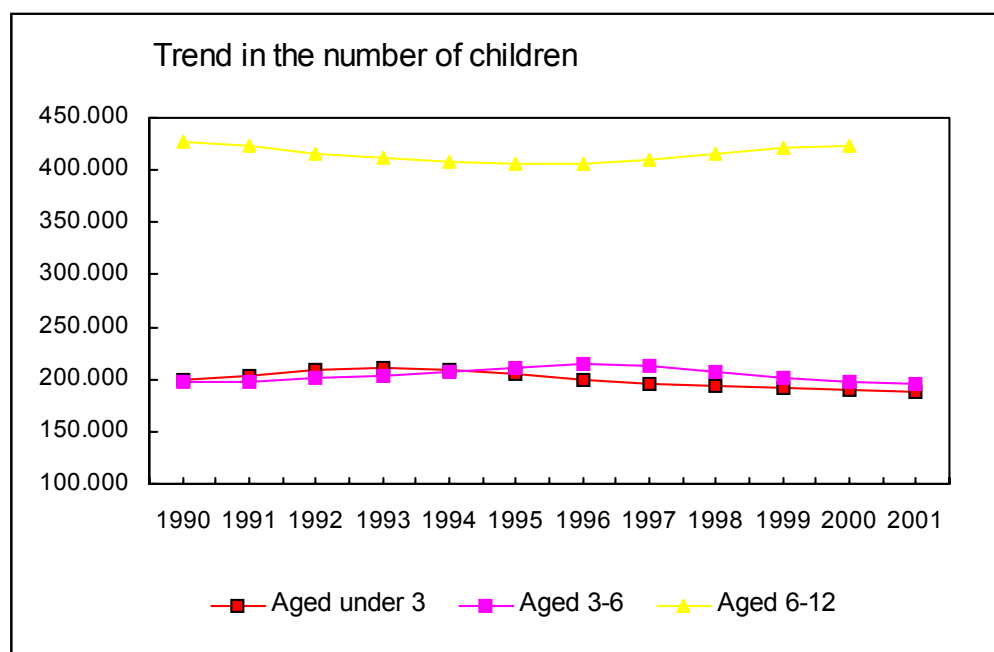
Young children

	Number		Percentage of population	
	2000	2001	2000	2001
Number of children aged under 3	189 825	187 226	3.20	3.15

Number of children aged 3-6	197 093	196 182	3.32	3.30
Number of children aged 6-12	423 843	421 680	7.14	7.08
<hr/>				
Total number of children under 12	810 761	805 088	13.65	13.53

1.11 Number of young children in the Region of Flanders and percentage of the population (on 1 January)

Source: NIS - Population trends



1.12 Trend in the number of children aged under 12 in the Region of Flanders (on 1 January)

Source: NIS - Population trends

Only a very small number of children in the Region of Flanders do *not* have *Belgian nationality*: 5.4%. In this connection, it must be borne in mind that the nationality criterion is not very suitable for identifying people of foreign origin, as a result of increased opportunities to acquire Belgian nationality. About 16.5% of the children born in 2001 were born to mothers who are not of Belgian origin. That is to say the mother did not have Belgian nationality when she was born.

Children of other national origins

Antwerp	23.0
Flemish Brabant	13.4
West Flanders	8.2
East Flanders	12.9
Limburg	23.9
<hr/>	
Region of Flanders	16.5

1.13 Children born in 2001: percentage of children whose mother is not of Belgian origin (i.e. she did not have Belgian nationality when she was born) by province - Region of Flanders

Source: Child and Family - IKAROS

There are major differences from province to province. Limburg and Antwerp have the highest percentages of children of non-Belgian origin, at 23.9% and 23% respectively.

In Flemish Brabant there are 13.4% and there are 12.9% in East Flanders. West Flanders has the lowest percentage of children of non-Belgian origin, i.e. 8.2% (see Table 1.13).

The most important countries of origin are Morocco, Turkey, the Netherlands and Yugoslavia. 3.3% of the children born in 2001 are of Moroccan origin, 2.8% are of Turkish origin, 1.6% of Dutch origin and 0.9% of Yugoslavian origin.

4. Forecasts

4.1. Forecasts of the number of births

With regard to the fertility rate, the current pattern of behaviour is continuing rather than changing.*

The "European Values Studies" show that the views of the youngest generation surveyed (born between 1961 and 1972) on family values, such as the reciprocal obligations of parents and children, the importance of keeping the family intact, children as the fulfilment of a dream, etc., are the same as those of the preceding generation. There are no signs of a return to the "traditional family". The various lifestyles attract a fairly constant proportion of the population. Translated into demographic behaviour, this means that for the time being there will be no change in the tendency to postpone parenthood. At most, it can be said that the rate of further intensification of postponement of marriage and parenthood is slowing down.

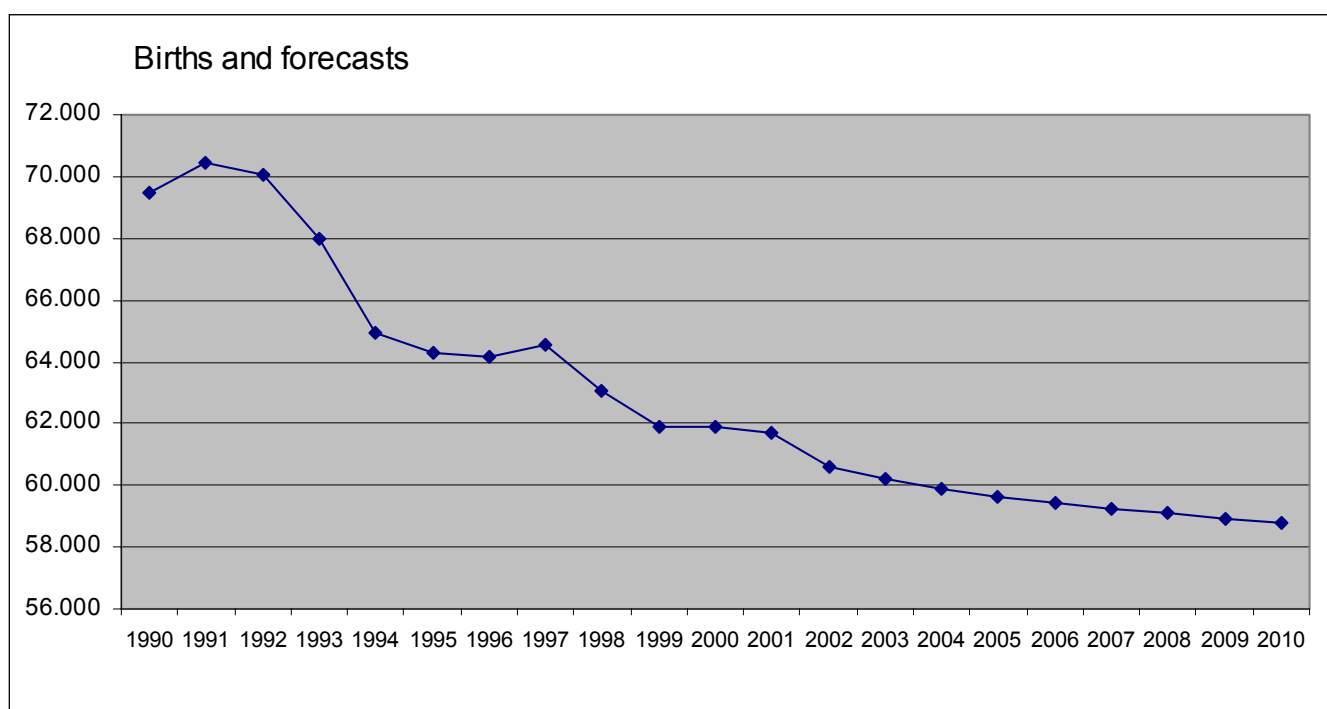
Nor do economic theories lead to any other conclusions at present.

Neoclassical economic theory explains the second demographic transition, which can be characterised as postponement of marriage and parenthood, as arising from a conscious weighing up of costs and benefits. The so-called "opportunity costs" linked to motherhood remain considerable, and the level of employment among women aged between 25 and 34 has never been as high in Flanders as it is today. There are no signs of a change in the financial autonomy of women, so that from the viewpoint of neoclassical economic theory, the demographic trend for postponement can only be expected to continue, and to further weaken marriage as an institutional framework.

Another important theory in explaining the second demographic transition is the *Easterlin vision*, and from this viewpoint also, change seems unlikely. This theory links the fertility rate to consumer aspirations developed in adolescence and the opportunities for men and women to acquire the income necessary to fulfil them through employment and a career.

The generations born in the 1970s have very high consumer aspirations: surveys show that their priorities are material wellbeing and career. Another factor is the strong competition on the labour market. So on the basis of this explanatory model also, the demographic trend for postponement can be expected to continue.

At the end of 2001, the NIS published new population forecasts for the period 2000-2050. The number of births is expected to fall slightly. By 2010 there are likely to be only around 58 779 births. This is a decrease of about 4.7% compared with the provisional birth rate for 2001 (see Figure 1.14). Table 1.15 shows the population forecasts by province.



1.14 Trend in the number of births since 1990 and forecasts until 2010 - Region of Flanders

Sources: NIS - Population trends

NIS - Population forecasts 2000-2050

* See Deboosere P., Lesthaeghe R., Surkijn J., Boulanger P.M., Lambert A., *Huishoudens en Gezinnen [Households and families]*, NIS, monograph no. 4, 1997

Births and forecasts by province

	1990	1995	2000	2005	2010
Antwerp	19 811	18 228	16 989	16 712	16 757
Flemish Brabant	11 173	10 697	10 509	10 251	10 108
West Flanders	13 513	12 226	11 398	11 113	10 906
East Flanders	15 454	14 687	14 065	13 497	12 962
Limburg	9 541	8 462	8 034	8 059	8 046

1.15 Trend in the number of births since 1990 and forecasts until 2010 by province

Sources: NIS - Population trends

NIS - Population forecasts 2000-2050

4.2. Forecasts of the number of births

In 2010 there will probably be considerably fewer children than there are today. The Population forecasts 2000-2050 estimate that there will be only 178 454 children under the age of 3 in 2010 compared with 187 226 on 1 January 2001 (-4.7%).

For children aged 3 to 5, a decrease from 196 182 to 182 864 (-6.8%) is expected and for children aged 6 to 11, a decrease from 421 680 to 379 879 (-9.9%) (see Table 1.16 and Figure 1.17).

Forecasts of number of children

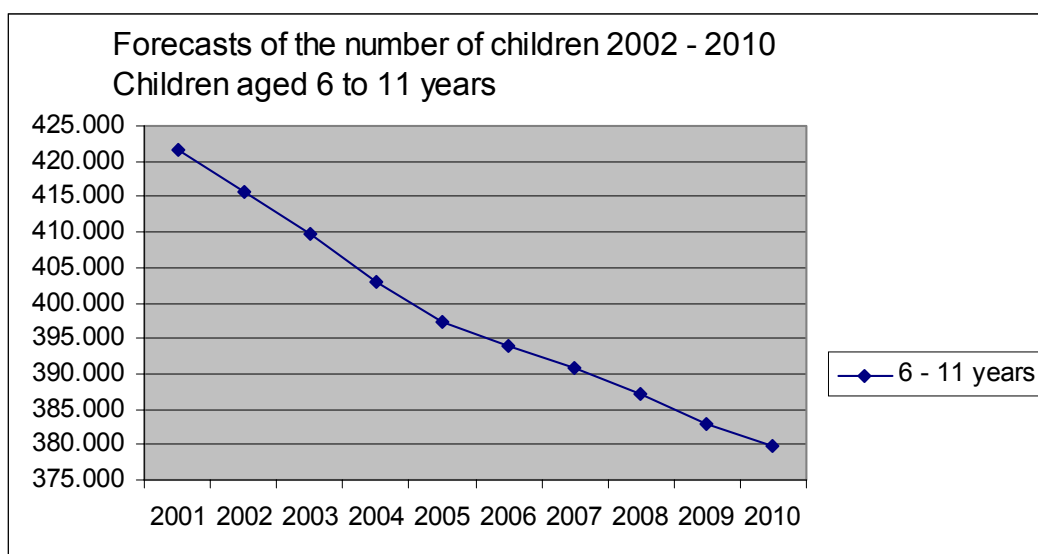
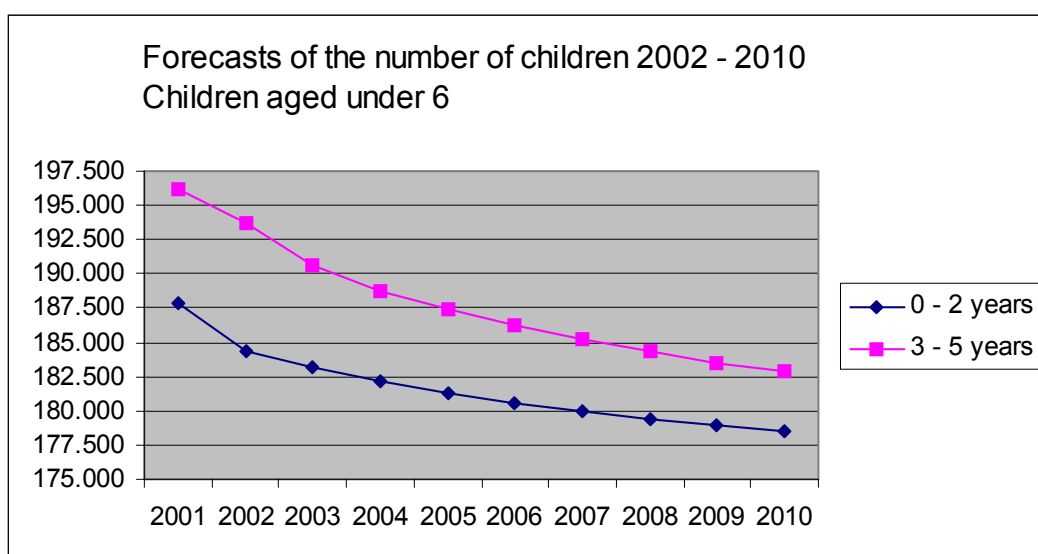
Situation on
01.01.2001

Forecasts for

		31.12.2005	31.12.2010
0 - 2 years	187 226	181 263	178 454
3 - 5 years	196 182	187 413	182 864
6 - 11 years	421 680	397 348	379 879

1.16 Forecasts of the number of children in the Region of Flanders for 2005 and 2010 by age

Sources: NIS - Population trends
 NIS - Population forecasts 2000-2050



1.17 Forecasts of the number of children in the Region of Flanders up to 2010 (on 31.12) by age - Comparison with the number of children on 1 January 2001

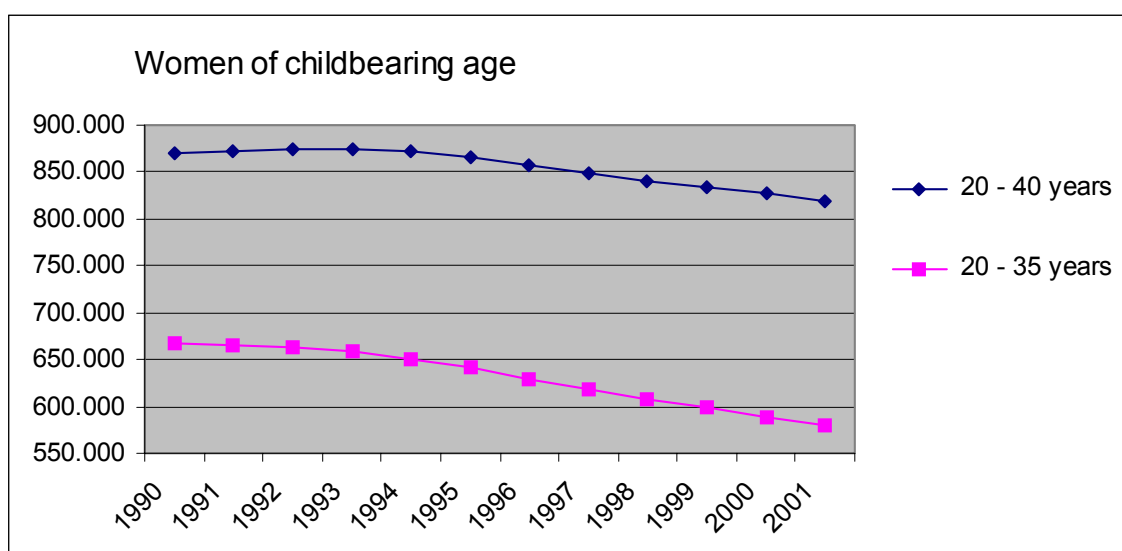
Source: NIS - Population forecasts 2000-2050

5. Explanatory notes

The birth rate is influenced by a number of social factors. We shall look at the number of women, the fertility rate, the age at which women become pregnant, abortion, teenage mothers, abortions among teenage girls, births outside and within marriage, and people's wishes as regards having children.

5.1. Women of childbearing age

An important determining factor in the trend in the number of births is the trend in the number of women aged 20-40, the age group in which the majority of births occur. The number of women aged 20 to 40 is continuing to fall. At the start of 2001 there were 0.9% fewer women aged 20 to 40 than at the start of 2000. A look at women in the age group 20 to 35 shows a decrease of 1.3% (see Figure 1.18).



1.18 Trend in the number of women aged 20-40 and 20-35 in the Region of Flanders since 1990 (on 1 January)

Source: NIS - Population trends

5.2. Fertility rates

In 1995 (most recent figures available), the average number of children per woman in the Region of Flanders was 1.5020 (see Table 1.19). The fertility rate is therefore well below the replacement factor. It is assumed that a fertility rate of 2.1 is required to replace the generation.

Fertility rates

1990	1.5503
1991	1.5794
1992	1.5806
1993	1.5543
1994	1.4996
1995	1.5020

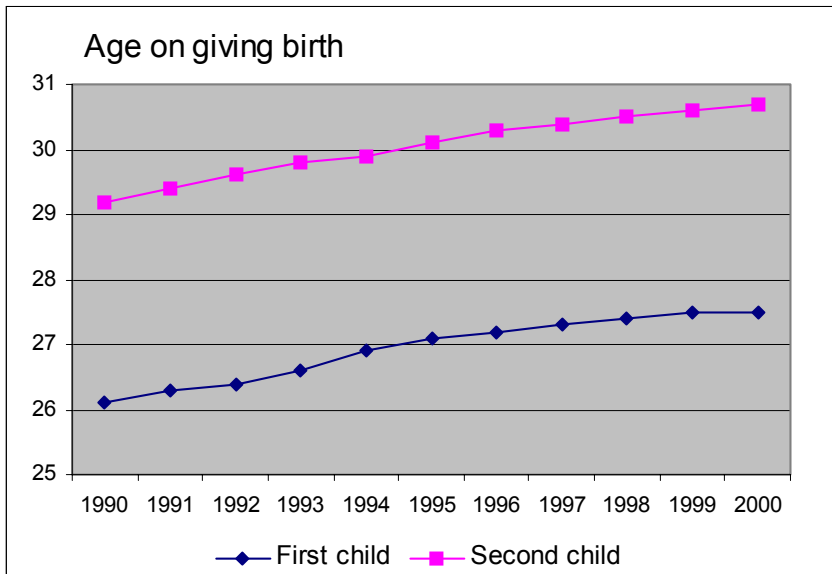
1.19 Total fertility rate - Region of Flanders

Source: NIS - Population statistics

5.3. Getting pregnant: no further postponement?

In 2000 the average age was 27.5 on the birth of a first child and 30.7 on the birth of a second child. The period from 1990 to 2000 saw a slight but steady increase in the average age of women on giving birth, to both their first child

and their second child. In 2000 this upward trend in age at giving birth to a first child stops for the first time. Is this the end of the trend to continue postponing having a first child? (see Figure 1.20)



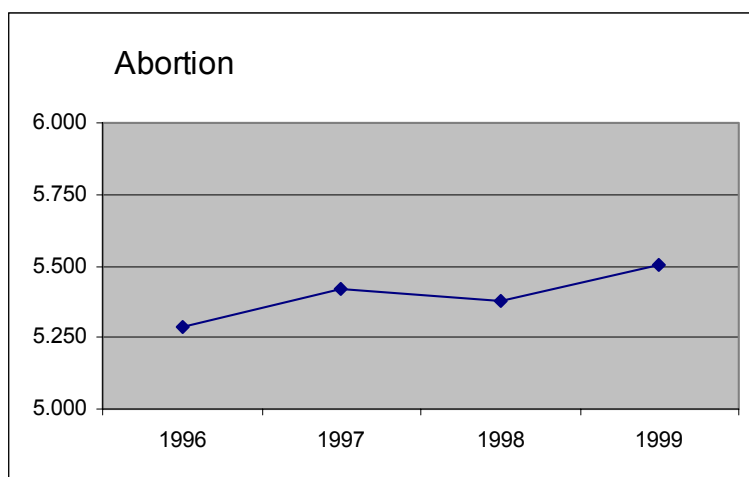
1.20 Average age at which women give birth (in years)

Source: Study Centre for Perinatal Epidemiology - Perinatal activities in Flanders

5.4. Abortion: a small number of pregnancies are terminated at the request of the woman

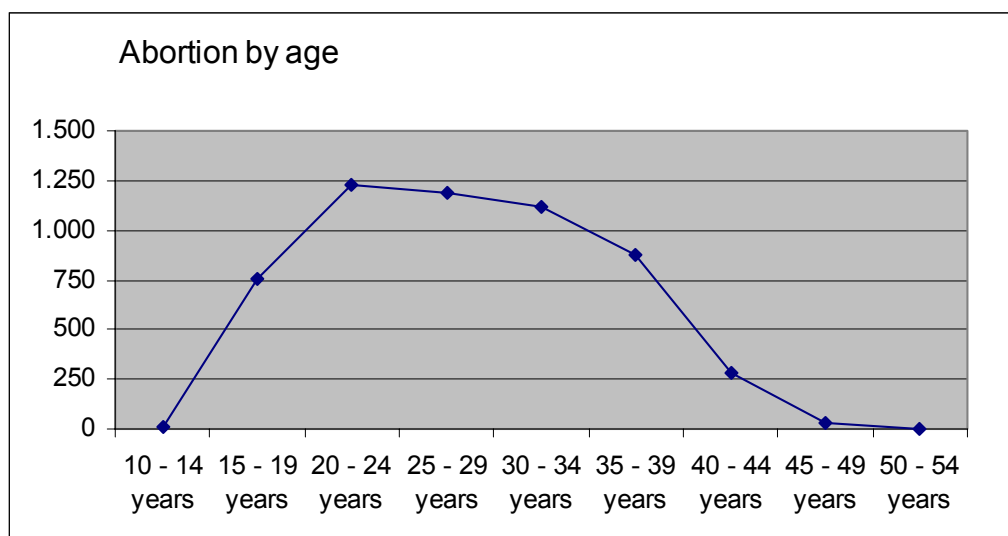
Some pregnancies are not continued to full term but terminated at the request of the woman. Pregnant women in Flanders can seek help from abortion clinics or hospitals. The number of legal abortions in these clinics and hospitals was 5502 in 1999.

This is about 4% higher than in 1996, the first year for which the National Evaluation Commission has figures (Figure 1.21 and Figure 1.22; see also section 5.5).



1.21 Trend in the number of abortions among women living in the Region of Flanders

Source: National Commission for the evaluation of the Abortion Act of 3 April 1990



1.22 Number of abortions among women living in the Region of Flanders by age - 1999

Source: National Commission for the evaluation of the Abortion Act of 3 April 1990

5.5. Teenage pregnancy: teenage mothers and abortion among teenagers

There is a link between teenage pregnancy and situations involving risks for mother and child.

Teenage mothers leave school early, are more at risk of poverty, and are more likely to be single mothers. Children of teenage mothers are more at risk of having a low birth weight, of dying within their first year of life, and of becoming teenage mothers themselves.

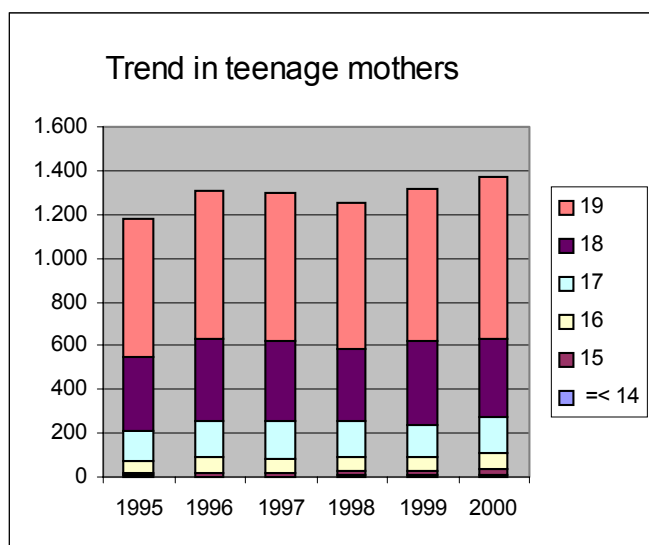
Teenage motherhood tends to be the exception in Flanders. In 2000, only 2.2% of women who gave birth were under the age of 20. Since 1995 this percentage has increased from 1.9% to 2.2%, mainly due to an increase in births among women aged 19 (see Table 1.23 and Figure 1.24).

Teenage mothers

	1999	2000
14 years or under	7	8
15 years	22	26
16 years	64	74
17 years	146	167
18 years	379	352
19 years	695	744
Total under 20 years	1 313	1 371

1.23 Number of teenage mothers in Flanders (Region of Flanders and Flemish maternity hospitals in Brussels)

Source: Study Centre for Perinatal Epidemiology



1.24 Trend in the number of teenage mothers in Flanders (Region of Flanders and Flemish maternity hospitals in Brussels)

Source: Study Centre for Perinatal Epidemiology

The number of teenage pregnancies is, however, considerably higher than the number of births to women under the age of 20. In 1999 the number of teenage pregnancies - births and abortions together - was 2080, made up of 1313 births and 767 abortions. Out of every 100 teenage mothers, therefore, over 50 had an abortion (see Table 1.25 - see also 5.4).

These were mainly women in the 15 to 19 age group. Below the age of 15, there were a total of just 15 abortions in 1999 compared with "only" 7 births.

Abortions among teenagers

	1996	1997	1998	1999
Number				
10 - 14 years	16	24	24	15
15 - 19 years	755	719	776	752
Total 10 - 19 years	771	743	800	767
Per 100 births				
10 - 19 years	59.0	57.2	61.0	56.0

1.25 Trend in the number of abortions and in the number of abortions per 100 births among women under the age of 20

Source: National Commission for the evaluation of the Abortion Act of 3 April 1990

5.6. Births and marriage

In the Region of Flanders, by far the majority of children are *born within marriage*.

In 1996 (most recent figures available), 86.6% of children were born within marriage. The number of children born outside marriage shows a small but consistent increase: from 7% in 1990 to 13.4% in 1996.

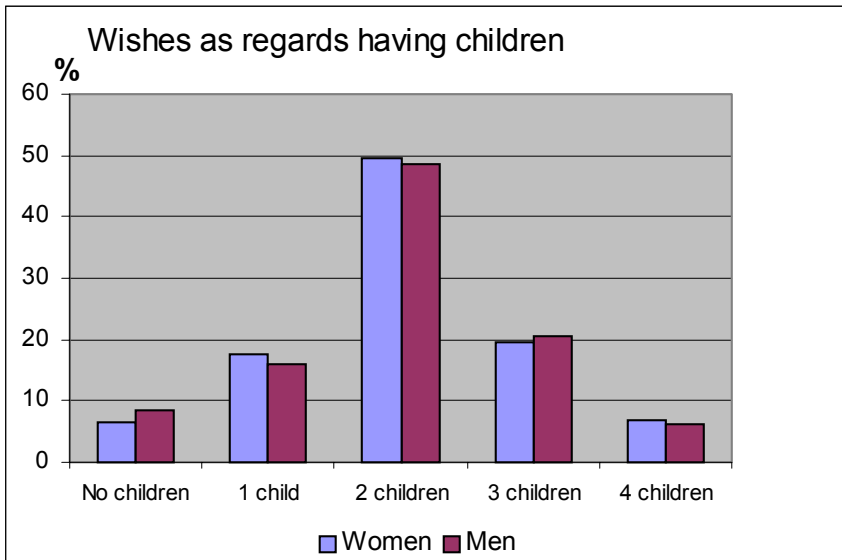
5.7. Wishes as regards having children*

When asked how many children they want, most women say that they want two children (49.4%). There is a noteworthy concentration around the figure of 2 children.

About the same percentages of women say they want 1 or 3 children, i.e. 17.6% and 19.6%, and the percentages who say they want no children or four children

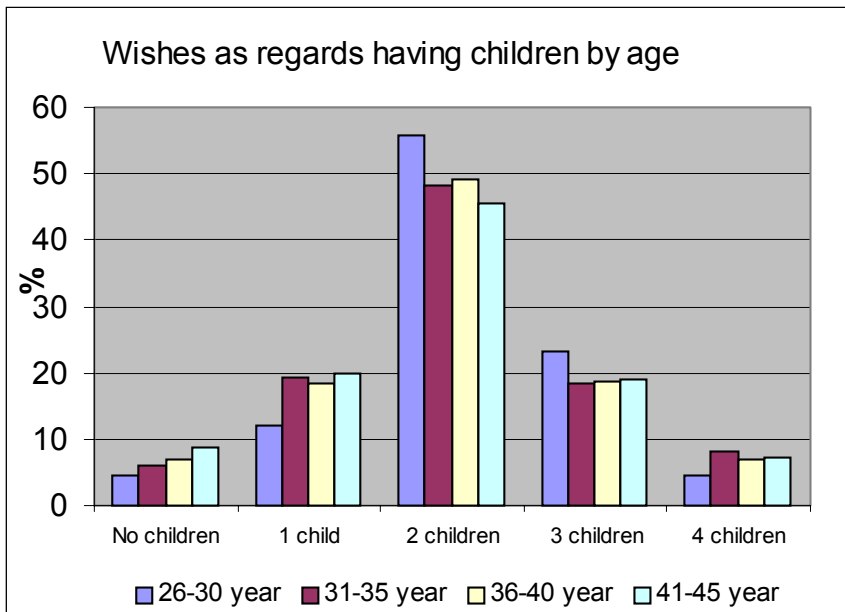
are also about the same, i.e. 6.6% and 6.8% respectively. Virtually the same picture emerges for men (see Figure 1.26).

The source of these figures is the NEGO V follow-up survey carried out between November 1996 and February 1997.



1.26 Wishes as regards having children, women and men aged 26-45 in Flanders
 Source: M. Callens and F. Deven, Data from the NEGO V follow-up survey (1996-97), Centre for Population and Family Research, Brussels

The figures vary slightly in accordance with age at the time of the survey. A relatively greater proportion of the women in the youngest age group surveyed (26-30) want two children: 55.7%. Rather fewer women in this age group opt for no children or four children (see Figure 1.27).



1.27 Wishes as regards having children among women in Flanders by age
 Source: M. Callens and F. Deven, data from the NEGO V follow-up survey (1996-97), Centre for Population and Family Research, Brussels

Women aged 41-45 appear to have fulfilled their wishes as regards having children to a great extent: 80.3% say that the number of children they have matches their wishes (see Figure 1.28).

It should be noted that they were asked about the desired situation and the actual situation at the same time, so that the respondents may have adjusted their answers accordingly.

In comparing the desired and the actual number of children, account must be taken of the fact that factors on which policy measures can at most exert only an indirect influence also play a part, such as low fertility and characteristics of the family form.

** Wishes as regards having children: the survey asked about the number of children wanted.*

Correspondence between current number of children and desired number of children

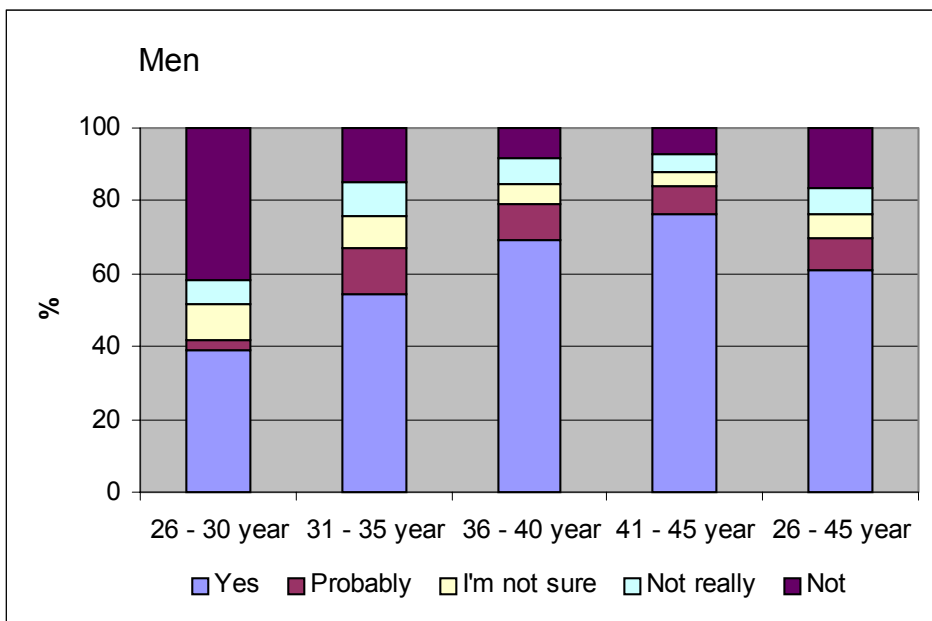
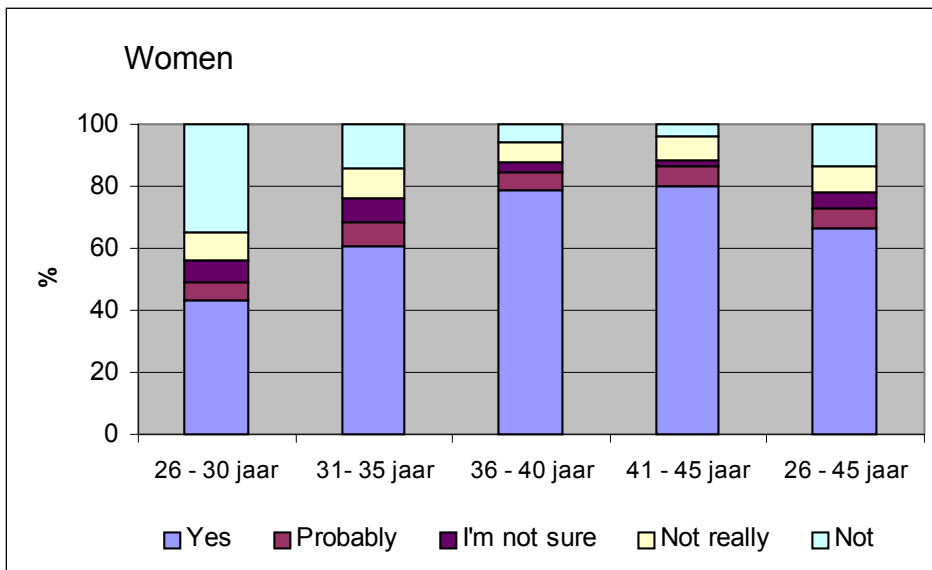


Figure 1.28 Correspondence between the current number of children and the number wanted by men and women by age - Flanders

Source: M. Callens and F. Deven, data from the NEGO V follow-up survey (1996-97), Centre for Population and Family Research, Brussels

6. The European context

How do the figures for and trends in births in Flanders fit into the European context? The figures for Flanders were compared with national figures for Belgium and some other European countries, i.e. the Netherlands, Germany and France as neighbouring countries, and also Italy (as a southern country), Sweden (as a northern country) and the United Kingdom.

6.1. Births

A number of figures for births as from 1990 are reproduced in Tables 1.29, 1.30 and 1.31: the number of births, the percentage trend in the birth rate, and the number of births per 1000 inhabitants.

Very different trends were observed in the countries investigated compared with 2000 (see Table 1.29). Only Belgium and Sweden showed a slight increase in the number of births.

In the early 1990s, in most of the countries studied the number of births was higher (Belgium and Italy) or much higher (Germany, United Kingdom and especially Sweden). Only in the Netherlands and France was the birth rate last year (2001) slightly higher than in 1990.

However, the figures for 2001 are still only estimates.

In the whole of the EU there were an estimated 4.03 million births in 2001, a decrease of about 0.5% compared with 2000.

The overall fertility rate is below the replacement level everywhere, a figure of 2.10 children per woman being assumed for the latter (see Table 1.32). There was a marked decrease in Sweden from 1990 to 1998-1999. The other countries investigated have experienced small fluctuations in their fertility rates.

The age at which women are having children is rising everywhere. According to the most recent figures available, the average age at which women give birth is over 28 in all the countries investigated. The Netherlands has the highest average age at 30.3 years (see Table 1.33).

The fertility rate among teenagers is low in Belgium, as it is in France. In Italy, the Netherlands and Sweden, however, it is even lower. The United Kingdom has a high number of births among women under the age of 19 (see Tables 1.34 and 1.35).

In Belgium, childbirth to cohabiting couples is still the exception, but the rate is increasing. In 1999, 20.1% of births occurred outside marriage.

The figure is a little higher in Germany and the Netherlands. Sweden, France and the United Kingdom have a much higher percentage of births outside marriage.

In Italy, only a small percentage of births occur outside marriage (see Table 1.36).

Table 1.37 shows an overview of the number of abortions per 1000 births. The Region of Flanders, Belgium, the Netherlands and Germany have low numbers; Italy, the United Kingdom and especially Sweden have much higher numbers of abortions.

Births

	1990	1995	1999	2000	2001	Difference 2000-2001 (in %)
Region of Flanders	69 492	64 300	61 906	61 877	61 697*	-0.3%*
Belgium	123 554	114 226	114 164	114 883	115 592**	+0.6%*
Germany	NA	765 221	770 744	760 000**	743 500**	-2.2%**

France	762 407	729 609	744 100	778 000**	772 500**	-0.7%**
United Kingdom	798 612	732 049	700 192	680 100**	669 000**	-1.6%**
Italy	569 255	525 609	523 463	560 100**	545 000**	-2.7%**
The Netherlands	197 965	190 513	200 445	206 619**	200 200**	-3.1%**
Sweden	123 938	103 422	88 173	89 700**	90 900**	+1.3%

1.29 Number of live births in certain European countries from 1990 onwards

Sources: Council of Europe, *Recent demographic developments in Europe 2000*

Eurostat, *Population and social conditions, Statistics in focus, 19/2001*

The Netherlands, CBS, *Statline*

NA: not available (reunified Germany as from 3 October 1990)

* Provisional figures

** Estimates

Births trend

	1990	1995	1999	2000	2001
Region of Flanders	100.0	92.5	89.1	89.0	88.8*
Belgium	100.0	92.5	92.4	93.0	93.6*
Germany	100.0 (1)	92.2	92.9	91.6**	89.6**
France	100.0	95.7	97.6	102.0**	101.3**
United Kingdom	100.0	91.7	87.7	85.2**	83.8**
Italy	100.0	92.3	92.0	98.4**	95.7**
The Netherlands	100.0	96.2	101.3	104.2**	101.1**
Sweden	100.0	83.4	71.1	72.4**	73.3**

1.30 Trend in the numbers of live births from 1990 onwards in certain European countries

Sources: Council of Europe, *Recent demographic developments in Europe 2000 (own calculations)*

Eurostat, *Population and social conditions, Statistics in focus, 19/2001*

(1) Figures for 1991

* Provisional figures

** Estimates

Births per 1000

	1990	1995	1999	2000	2001
Region of Flanders	12.0	11.0	10.4	10.4	10.4*
Belgium	12.4	11.3	11.2	11.2	11.2*
Germany	NA	9.4	9.4	9.2**	9.0**
France	13.5	12.6	12.6	13.1**	13.1**
United Kingdom	13.9	12.5	11.8	11.4**	11.2**
Italy	10.0	9.2	9.1	9.7**	9.4**
The Netherlands	13.3	12.4	12.7	13.0**	12.5**
Sweden	14.5	11.7	10.0	10.1**	10.2**

1.31 Birth rate: number of births per 1000 inhabitants from 1990 onwards in certain European countries

Sources: Council of Europe, *Recent demographic developments in Europe 2000*

Eurostat, *Population and social conditions, Statistics in focus, 19/2001*

NA: not available

* Provisional figures

** Estimates

Fertility rates

	1990	1995	1998	1999	2000
Region of Flanders	1.55	1.50			
Belgium	1.62	1.55	1.60	1.61	1.65*
Germany	NA	1.25	1.33	1.36	1.34*

France	1.78	1.70	1.75	1.79	1.89*
United Kingdom	1.83	1.71	1.71	1.68	1.64*
Italy	1.33	1.20	1.15	1.19	1.25*
The Netherlands	1.62	1.53	1.63	1.65	1.72*
Sweden	2.13	1.73	1.50	1.50	1.54*

1.32 Overall fertility rate per woman from 1990 onwards in certain European countries

Sources: Council of Europe, *Recent demographic developments in Europe 2000*
NIS, *Population statistics*

NA: not available

* Provisional figures

Age on giving birth

	1990	1995	1998	1999	2000
Region of Flanders	27.8	28.7	29.1	29.1	29.2
Belgium	27.9	28.5			
Germany	27.6	28.3	28.6		
France	28.3	29.0	29.3		
United Kingdom	27.7	28.2	28.3	28.4	
Italy	28.9	29.7			
The Netherlands	29.3	30.2	30.6	30.6	30.7
Sweden	28.5	29.2	29.7	29.8	

1.33 Average age of women giving birth from 1990 onwards in certain European countries

Sources: Council of Europe, *Recent demographic developments in Europe 2000*
Study Centre for Perinatal Epidemiology (SPE)

The Netherlands, CBS, Statline

Teenage fertility rates

	1990	1995	1996	1997
Belgium	8.6	6.7		
Germany	14.6	9.4	9.6	9.5
France	9.2	6.9	6.8	6.7
United Kingdom	27.0	22.0	22.9	
Italy	6.5	5.3		
The Netherlands	6.4	4.2	4.1	4.4
Sweden	9.8	6.1	5.5	5.0

1.34 Number of births per 1000 women under the age of 19

Source: Eurostat, *Key data in health 2000*

Teenage births

	1998	
	15- to 17-year-olds	18- to 19-year-olds
Belgium	3.4	19.6
Germany	5.3	25.2
France	3.4	18.6
United Kingdom	16.6	51.8
Italy	2.9	11.6
The Netherlands	2.2	12.0
Sweden	2.2	13.0

1.35 Number of births per 1000 women aged 15 to 17 and aged 18 to 19

Source: UNICEF, *A league table of Teenage Births in Rich Nations, 2001*

Births outside marriage

	1990	1995	1998	1999	2000
Region of Flanders	7.1	11.7			
Belgium	11.6	17.3	NA	20.1	
Germany	15.3	16.1	20.0	21.6	23.0*
France	30.1	37.6	40.1	40.7	
United Kingdom	27.9	33.6	37.6	38.8	39.5*
Italy	6.5	8.1	9.0	9.2	
The Netherlands	11.4	15.5	20.8	22.7	24.9
Sweden	47.0	53.0	54.6	55.3	55.3

1.36 Percentage of births outside marriage in certain European countries from 1990 onwards

Sources: NIS, Population statistics

Council of Europe, Recent demographic developments in Europe, 2000

Eurostat, European Social Statistics, Demography, 2001 edition

* Provisional figures

Abortions

	1990	1995	1998	1999
Region of Flanders	NA	NA	8.5	8.9
Belgium	NA	9.8		
Germany	15.0*	12.8		
France	22.4	21.4		
United Kingdom	24.7	23.9	27.9	27.9
Italy	28.4	26.0	24.0	
The Netherlands	9.3	11.0		
Sweden	30.2	30.4	34.8	34.8

1.37 Number of abortions per 1000 births

Source: Council of Europe, Recent demographic developments in Europe, 2000

NA: not available

* 1991 figure

6.2. Number of young children

The Region of Flanders is a *small region* within Europe. With 320 682 children under the age of 5, Flemish children represent only a very small fraction of the number of young children in the European Union. On 1 January 2000, there were a total of approximately 20.2 million children under 5 in the European Union.

Since 1995 the *number* of young children has decreased steadily. There were 7.6% fewer children under 5 in the Region of Flanders in 2000 than in 1995. The Region of Flanders is one of the areas where the numbers are falling most steeply. Only in Sweden (-22.6%) was the fall even greater. There was only a very small fall in France (-1%) and the Netherlands (-0.5%).

Table 1.38 shows the number of children under 5 from 1995 onwards. Table 1.39 shows the percentage trend, with 1995 as the basis (1995 = 100).

A striking aspect of the demographic trend in European countries is the *drop in the number of children*, which is the complement to the more frequently mentioned ageing of the population. From 1995 onwards, there has been a drop in the *percentage of young children in the overall population* in all the countries studied.

In the period 1995-2000, the Region of Flanders and the United Kingdom came in the *middle* of the range of figures for the trend in the percentage of young children in the population (-0.5%). The drop was smaller in Germany (-0.3%),

Italy (-0.2%), France (-0.1%) and the Netherlands (-0.2%); the drop was much greater in Sweden (-1.6%) (see Table 1.40).

In the long term (2010 - 2020) a further decrease in the number of young children can be expected, except in Sweden and the United Kingdom. An increase of about 5% in the number of children under 5 is expected in Sweden. In Belgium, the Netherlands and Germany the population of children under 5 will not be much smaller than in 2000 (no more than 1% lower). In other words, these countries are coming to the end of the period of a decreasing number of children. At -17%, the unexpected decrease in Italy is nothing less than spectacular (see Table 1.41).

Children aged under 5

	1995	1998	1999	2000
Region of Flanders	346.9	329.1	323.8	320.7
Belgium	615.1	584.9	579.1	577.2
Germany	4 190.5	3 973.9	3 944.6	
France	3 623.5	3 557.2	3 586.3	3 623.3
United Kingdom	3 858.8	3 691.3	3 646.2	3 607.7
Italy	2 769.5	2 688.9	2 652.9	2 659.0
The Netherlands	988.7	969.4	976.2	983.5
Sweden	605.7	518.5	491.4	468.7

1.38 Number of children aged under 5 (in thousands) from 1995 onwards in certain European countries

Source: Council of Europe, *Recent demographic developments in Europe, 2000*

Trend in the number of children

	1995	1998	1999	2000
Region of Flanders	100.0	94.9	93.3	92.4
Belgium	100.0	95.1	94.1	93.8
Germany	100.0	96.5		
France	100.0	98.2	99.0	
United Kingdom	100.0	95.7	94.5	93.5
Italy	100.0	97.1	95.8	96.0
The Netherlands	100.0	98.0	98.7	99.5
Sweden	100.0	85.6	81.1	77.4

1.39 Trend in the number of children aged under 5 from 1995 onwards in certain European countries (1995 = 100)

Source: Council of Europe, *Recent demographic developments in Europe, 2000* (own calculations)

Percentages of young children

	1995	1998	1999	2000
Region of Flanders	5.9	5.6	5.5	5.4
Belgium	6.0	5.7	5.7	5.7
Germany	5.1	4.8		
France	6.2	6.1	6.1	6.1
United Kingdom	6.6	6.2	6.1	6.1
Italy	4.8	4.7	4.6	4.6
The Netherlands	6.4	6.2	6.2	6.2
Sweden	6.9	5.9	5.5	5.3

1.40 Age structure: percentages of children aged under 5 in the overall population from 1995 onwards in certain European countries

Sources: Council of Europe, *Recent demographic developments in Europe, 2000*
NIS, *Population statistics*

Forecasts

	2005	2010	2020
Belgium	-1.2%	-3.0%	-0.2%
Germany	5.4%	5.1%	-0.3%
France	-0.6%	-3.5%	-3.4%
United Kingdom	-2.3%	1.2%	0.0%
Italy	4.9%	-3.2%	-17.0%
The Netherlands	4.5%	-5.8%	-1.0%
Sweden	1.6%	4.8%	5.6%

1.41 Prospective trends in the numbers of children aged under 5 in the period 2005-2010 in certain European countries, in comparison with 2000 (percentages)
 Source: Eurostat, *European Social Statistics, Demography, 2001 edition*

6.3. Intercountry adoption

Of all the countries studied, the lowest figure for the relative number of *intercountry* adoptions is the UK, with 0.59 per 100 000 inhabitants. Flanders and Italy also have very small numbers of intercountry adoptions: 2.91 per 100 000 inhabitants in Flanders and 3.68 in Italy. France, the Walloon Region, the Netherlands and especially Sweden have a higher rate of intercountry adoptions than Flanders. There are no figures available for Germany (see Tables 1.42 and 1.43).

Adoptions

Receiving country	1995	1998	1999	2000	2001
Flemish Community (1)	202	188	184	210	173
Walloon Region (1)	228	299	266	290	246
Germany	NA	NA	NA	NA	
France	3 028	3 777	3 528	2 964	3 094
United Kingdom	154	258	277	351	
Italy	NA	2 233	2 177	NA	2 127
The Netherlands	704	825	993	1 192	
Sweden	895	928	1 019	981	

1.42 Trend in the numbers of intercountry adoptions in certain European countries from 1995 onwards

Sources: Information provided by the central authorities

CBS, Statline

(1) adoptions arranged through an authorised adoption service only

NA: not available

Adoptions per 100 000

Receiving country	1995	1998	1999	2000	2001
Flemish Community (1) (2)	3.44	3.18	3.10	3.54	2.91
Walloon Region (2) (3)	6.88	8.99	7.98	7.24	7.35
Germany	NA	NA	NA	NA	
France	5.22	6.43	5.88	5.00	5.20
United Kingdom	0.26	0.44	0.47	0.59	
Italy	NA	3.88	3.78	NA	3.68
The Netherlands	4.56	5.27	6.30	7.51	
Sweden	10.15	10.49	11.51	11.07	

1.43 Trends in the numbers of intercountry adoptions per 100 000 inhabitants in certain European countries from 1995 onwards

Source: Information provided by the central authorities

(1) per 100 000 inhabitants in the Region of Flanders

(2) adoptions arranged through an authorised adoption service only

(3) per 100 000 inhabitants in the Walloon Region

NA: not available

Ch. 2.

FAMILIES WITH YOUNG CHILDREN: INCREASING DIVERSITY

In this section, we shall be discussing the family context of young children in Flanders. We shall look at the types of families in which children are growing up (two-parent or one-parent families, married couple or cohabiting couple), growing up with brothers or sisters, multiculturalism, older parents and grandparents. We shall also describe the child-rearing environment - roles and values - in the family.

By way of background information in the context of the family, we shall look at marriage and divorce in Flanders.

Finally, some of the figures for Flanders will be set in a European context.

1. Two-parent or one-parent family?

Most young children live in a *two-parent family*. The number of children aged under 3 living in a *one-parent family* amounts to 2.1%; the figure is 5.5% for children aged between 3 and 7, and 5.6% for children of primary school age. The number of very young children (under 3 years) living in a one-parent family is falling. In 1998 it was still 4.2% (see Table 2.1).

The majority of children living in one-parent families live with their mother, since following divorce custody is still awarded to the mother in most cases.

A very small number of children live in *multi-generation families* (under 0.5%) (see Table 2.2).

Type of family

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
One-parent family	2.1	5.5	5.6	4.9
Two-parent family	97.9	94.5	94.4	95.1
Total	100.0	100.0	100.0	100.0

2.1 Children aged under 12 by type of family (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

2. In the traditional nuclear family?

The decline of the traditional nuclear family is attracting more and more attention. Data on the families in which young children live show that for them the traditional nuclear family is still usually the norm. Almost 9 out of 10 children aged under 12 live with their *natural fathers and mothers*, who also constitute a *married couple* (see Table 2.2).

13.5% of children under 3 live with a natural father and mother who are cohabiting. More children aged under 3 than previously are living with parents who constitute a cohabiting couple (13.5% as against 9.8% in 1998). Cohabitation is not merely a statistical category, but also has an impact on the relationships. The question, therefore, is whether this cohabitation constitutes a temporary or permanent situation. Longitudinal analysis of the data for 1992-95 shows that the most common change experienced by children in the composition of their family is the marriage of their cohabiting parents.

Table 2.2 also shows that very few children (2.7%) do not live with their natural mothers. The number of children who do not live with their natural fathers is also small, but still amounts to 5.6%. 5.5% of children aged 3 to

7 do not live with their natural father; for children of primary school age the figure goes up to 6.7%.

Family composition

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
Child of a married couple consisting of its natural father and its natural mother	82.3	89.8	89.3	88.2
Child of a married couple consisting of its natural father and its non-natural mother	0.7	0.0	0.6	0.4
Child of a married couple consisting of its natural mother and its non-natural father	0.0	0.0	0.8	0.4
Child of a married couple consisting of its non-natural mother and its non-natural father	0.0	0.4	0.8	0.5
Child of a cohabiting couple consisting of its natural father and its natural mother	13.5	3.1	0.3	3.7
Child of a cohabiting couple consisting of its natural mother and its non-natural father	1.4	0.0	0.0	0.3
Child of a cohabiting couple consisting of its natural father and its non-natural mother	0.0	0.8	2.3	1.3
Child of a cohabiting couple consisting of its non-natural father and its non-natural mother	0.0	0.0	0.0	0.0
Child in a one-parent family with its natural mother	1.4	5.1	5.1	4.4
Child in a one-parent family with its natural father	0.7	0.4	0.6	0.5
Child in a multi-generation family with its father/mother and grandparents	0.0	0.4	0.3	0.3
Total	100.0	100.0	100.0	100.0

2.2 Children aged under 12: composition of the family in which they live (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

3. Only child?

Most young children live in a family with 1 or 2 brothers or sisters. Almost 30% of children aged under 3 are only children, and 46.8% have 1 brother or sister in the family. In the case of children aged between 3 and 7, 14.1% are only children and 56.6% have only 1 brother or sister in the family. In the case of children aged between 7 and 12, 45.5% have 2 or more brothers or sisters in the family (see Table 2.3).

Brothers and sisters

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
Only child	29.8	14.1	8.6	14.4
One brother or sister in the family	46.8	56.6	46.0	49.7

Two brothers and/or sisters in family	17.7	21.9	31.5	25.7
Three brothers and/or sisters in family	5.0	5.5	8.4	6.8
Four or more brothers and/or sisters in family	0.7	2.0	5.6	3.4
Total	100.0	100.0	100.0	100.0

2.3 Number of brothers and/or sisters with whom children aged under 12 live (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

4. Multicultural families

A considerable number of young children are growing up in a family in which one or both parents do not have Belgian nationality (see Table 2.4). These percentages have increased since 1998, when 5.8% of young children had one non-Belgian parent and in the case of 2.3% of young children neither parent had Belgian nationality.

Multicultural families				
	Children aged under 3	Children aged 3-6	Children aged 7-12	Total
Both parents are Belgian	84.4	91.9	89.5	89.4
Neither parent is Belgian	3.9	2.6	3.1	3.1
One parent is Belgian	11.7	5.5	7.4	7.6
Total	100.0	100.0	100.0	100.0

2.4 Children aged under 12: percentage of children whose parents are or are not Belgian at the present time

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

5. Older parents?

Extensive information is available on the age of mothers at the time of the birth of their children thanks to the obstetric records of the SPE (see also Chapter 1, section 5.3). The Panel Study of Belgian Households also gives information on the age of fathers on the birth of their children, which shows that a significant number of children have an *older father*. 19,5% of the children started their lives with a father aged 36 or over (see Table 2.5).

Older parents

	Children aged under 3	Children aged 3-6	Children aged 7-12	Total
Age of the mother at the birth				
- 20 years	2.2	3.2	3.1	2.9
21 - 30 years	59.7	66.1	71.6	67.5
31 - 35 years	28.8	26.4	20.9	24.2
36 - 40 years	8.6	4.3	4.5	5.2
41 years or over	0.7	0.0	0.0	0.1
Total	100.0	100.0	100.0	100.0

Age of the father at the birth				
- 20 years	1.5	0.0	0.3	0.4
21 - 30 years	37.7	42.8	59.4	49.6
31 - 35 years	41.3	45.3	29.3	37.0
36 - 40 years	12.3	11.1	7.6	9.7
41 years or over	7.2	0.8	3.5	3.3
Total	100.0	100.0	100.0	100.0

2.5 Children aged under 12: age of the mother and the father when the child was born (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

6. Contact with mother and father

The data on the frequency of the child's contact with its parents confirm what was already suggested by the composition of the family (see section 1): only some 11.5% of young children do not see their mother and father every day.

This percentage increases slightly as the children get older, from 6.4% of children under 3 to 14.8% of children aged 7 to 12. Where children do not see one of their parents every day, it is usually the father (see Table 2.6).

	Parental contact			
	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
Sees mother and father every day	93.6	90.2	85.2	88.5
Sees mother every day and father several times a week	2.1	2.4	5.3	3.7
Sees mother every day and father around once a week	2.8	0.8	2.8	2.1
Sees mother every day and father once or twice a month or less often	0.7	2.4	3.1	2.4
Sees mother every day and never sees father	0.0	1.2	2.0	1.3
Sees mother several times a week and father several times a week	0.0	0.4	0.8	0.5
Sees father every day and mother several times a week	0.7	1.2	0.0	0.5
Does not see father or mother every day	0.0	1.6	0.8	0.9
Total	100.0	100.0	100.0	100.0

2.6 Children aged under 12: frequency of contact with parents (children in two-parent families only - percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

7. Young children and grandparents

About half of the children still have four grandparents. The percentage is slightly lower for children of primary school age (see Table 2.7). This percentage is probably an underestimate, as for quite a number of children the data on this were not available.

Most children live only a short distance from their grandparents: around 10% of children live less than 1 km away; some 60% live a maximum of 9 km away. Relatively speaking, children aged 7-12 live slightly further away. This last item of data is for 1997. Since 1998 the Panel Study of Belgian Households has stopped including the distance from grandparents.

Grandparents

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
4 grandparents	55.5	52.5	44.1	49.1
3 grandparents	28.5	29.2	30.1	29.5
2 grandparents	3.7	8.8	16.1	11.2
1 grandparent	0.7	2.1	2.7	2.1
No grandparents	0.0	0.0	1.8	0.8
Not known	11.7	7.5	5.4	7.3
Total	100.0	100.0	100.0	100.0

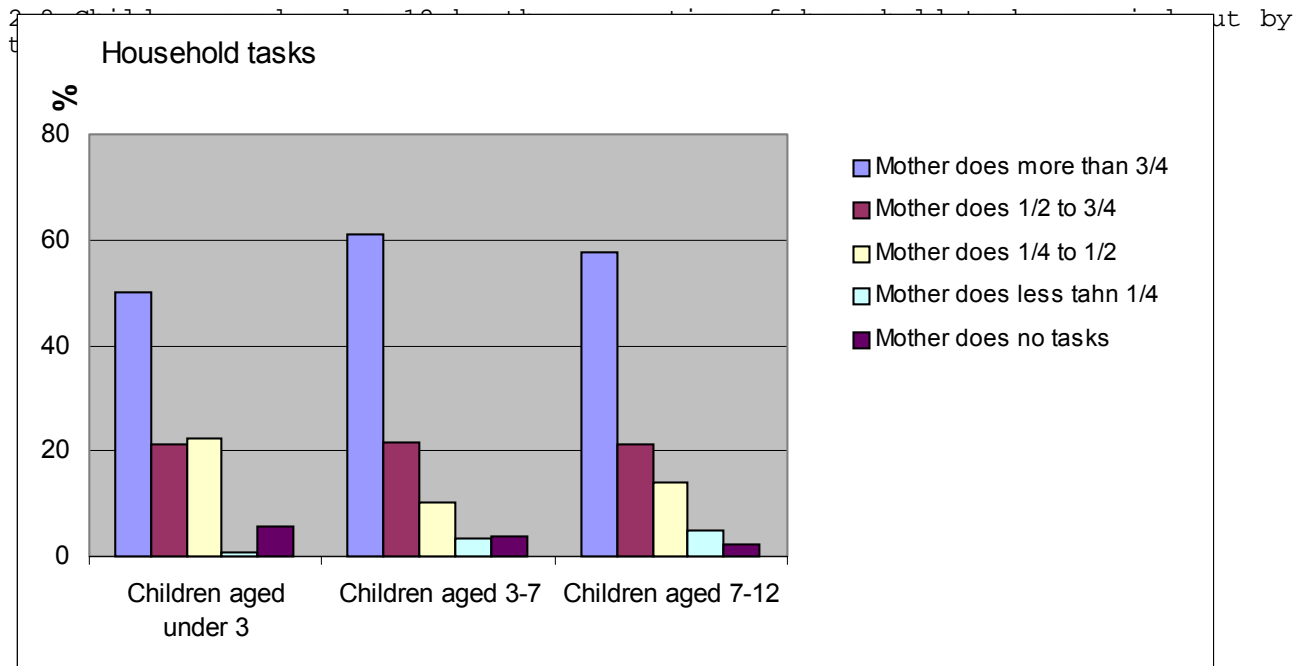
2.7 Children aged under 12: number of grandparents still alive (children in two-parent families only - percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

8. Roles and values in families with young children

The majority of young children live in a family in which the mother says that she is responsible for more than half of household tasks. Nearly 6 out of 10 children aged under 12 live in a family in which the mother is responsible for more than three-quarters of household tasks. In families with children under 3, the division of household tasks appears to be more balanced. "Only" 50% have a mother who says that she does more than three-quarters of household tasks. About 20% do half to three-quarters and another group of slightly more than 20% do "only" a quarter to half of household tasks (see Figure 2.8).

The question remains as to whether we are dealing with a development over time here - a trend towards more sharing of caring tasks - or whether this is connected with the age of the child - more sharing of the work involved in caring for very young children.



Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

Another element that is crucial to family lifestyle is the division of *decision-making* between mother and father. Almost 6 out of 10 young children live in a family in which more than half the decisions are predominantly taken by both parents. Around 15% of the children live in a family in which more than half the decisions are taken by the father only.

Most young children are socialised in a family in which the voices of the mother and father carry equal weight, with a culture of consultation prevailing (see Table 2.9).

Decision-making

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
More than half the decisions are taken jointly	59.1	65.6	54.6	59.7
More than half the decisions are taken by the father only	16.8	13.3	16.3	15.4
The partners disagree about who takes about half of the decisions	13.9	12.9	16.9	15.0
Other situation	10.2	8.2	12.2	9.9
Total	100.0	100.0	100.0	100.0

2.9 Children aged under 12 by who takes decisions in the family (children in two-parent families only - percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

The largest percentage of young children (around 40%) have parents whose *child-rearing values* are primarily or completely geared to furthering the child's autonomy (see Table 2.10). The second-largest group consists of young children whose parents do not share the same child-rearing values: one parent is primarily or completely conformist, while the other parent supports an upbringing that is completely or primarily geared to the autonomy of the child. Parents who are *geared to the autonomy* of the child attach importance to values such as being independent, having a sense of responsibility, being imaginative and creative, being tolerant, respecting people, possessing leadership qualities, showing self-control, being resolute and persevering. Being *conformist* means that parents attach importance to values such as having good manners, being polite and being tidy, being brave, honest and patient, being able to save, being pious, helpful and altruistic, and being obedient and loyal.

Child-rearing values

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
Primarily or completely Conformist	14.2	17.6	17.8	17.1
Mixed	32.6	33.2	28.8	31.0
Primarily or completely geared to autonomy	44.0	40.6	43.9	42.8
No answer	9.2	8.6	9.5	9.1
Total	100.0	100.0	100.0	100.0

2.10 Children aged under 12 by child-rearing values held by their parents (children in two-parent families only - percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

The majority of children live in a family that is very open to *contacts with friends and relatives* (see Table 2.11). Open families agree that they are often in the company of friends (reciprocal visits) and say that they have a lot of contact with relatives.

Openness of families

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
Closed. not very open	14.6	9.5	14.2	12.7
Fairly open family	15.3	17.8	16.9	16.9
Very open family	70.1	72.6	68.8	70.5
Total	100.0	100.0	100.0	100.0

2.11 Children aged under 12 by the extent to which the family to which they belong is open/closed (children in two-parent families only - percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

9. Explanatory notes

9.1. Marriages

There were 24 994 *marriages* in the *Region of Flanders* in 2000; a slight increase of 245 (+1.0%) compared with 1999. The overall marriage rate is 4.20 per 1000 inhabitants. 2000 is the first year since 1990 in which the number of marriages has not continued to fall. However, this does not mean that the long-term downward trend has come to an end. The provisional figure for 2001 indicates 23 201 marriages, a decrease of 7.1% (see Table 2.12 and Figure 2.13).

In our country, the *average age on marriage* is 32 years and 11 months for men and 30 years and 1 month for women. The median age is about 3 years younger: 29 years and 8 months for men and 27 years and 3 months for women (2000). There has been an increase in both the average and median ages of about 5 months for men and 3 months for women compared with 1999. There is a conspicuous difference between the average age on marrying for the first time and the second time. The average age on marriage of men and women who have not been married before is 28 years and 4 months and 26 years respectively. The average ages on their first marriage were noticeably lower than in 1999 (3 months and 7 months younger respectively). Where divorced men marry divorced women, the average age of the men was 45 years and 4 months and the average age of the women was 41 years and 7 months (2000). The average age on remarriage of divorced men and women increased compared with 1999 (by 2 years and 6 months and 2 years and 2 months respectively).

Marriages at a young age are fairly unusual: 2.5% of women and 0.5% of men under the age of 20 got married in the *Region of Flanders* in 2000. In 60 marriages or 0.2%, both the man and the woman were under the age of 20. There was a decrease in the number of marriages of women under 20 (-10.6%) and an increase in the number of marriages of men under 20 (+5.2%) compared with 1999.

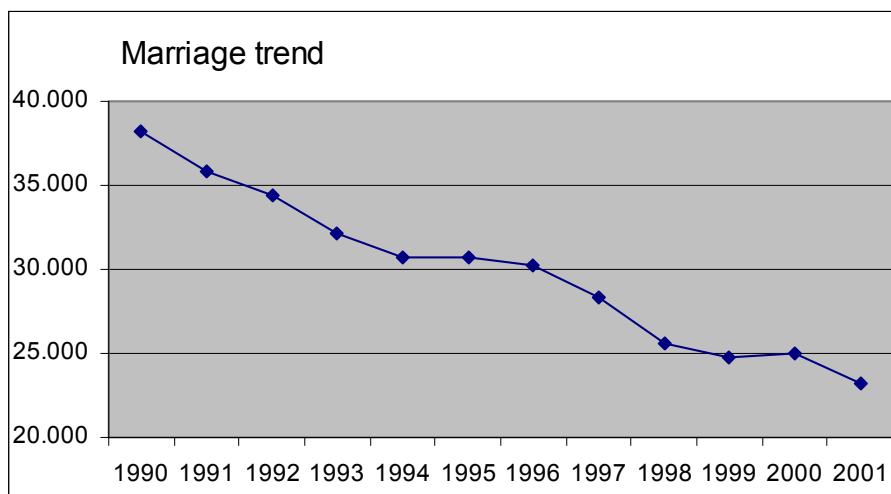
Marriages

	Number	Per 1000 inhabitants
1999	24 749	4.17
2000	24 994	4.20
2001	23 201*	

2.12 Number of marriages in the *Region of Flanders*

Source: NIS - Marriage and divorce statistics

* Provisional figure



2.13 Trend in the number of marriages in the Region of Flanders
 Source: NIS - Marriage and divorce statistics

9.2. Relationship breakdowns

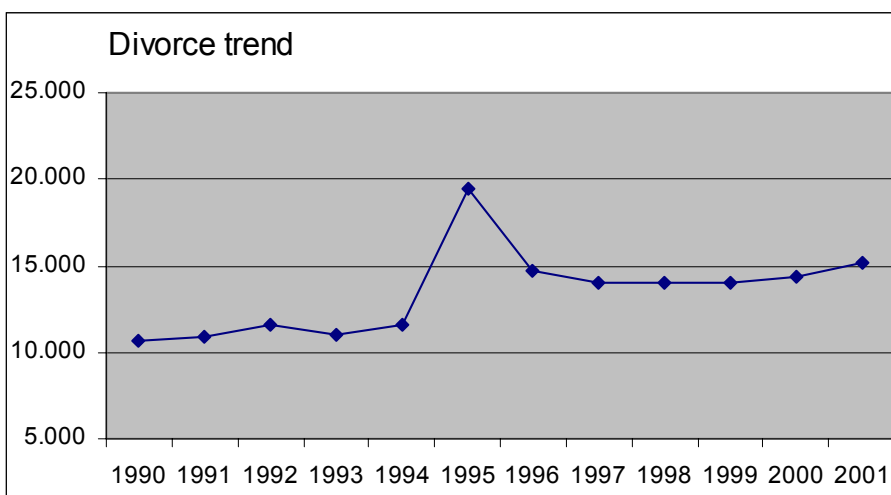
In 2000, there were 14 389 *divorces* in the *Region of Flanders*, representing an increase in comparison with 1999. In 2000, there were over 242 divorces per 100 000 inhabitants. The provisional figure for 2001 is 15 197, an increase of 808 or 5.6% (Table 2.14 and Figure 2.15).

However, divorce figures do not give a complete picture of the number of breakdowns in cohabitation. In addition to divorces there are separations and the dissolution of other forms of relationship.

Divorces

	Number	Per 100 000 inhabitants
1999	13 961	235.55
2000	14 389	242.22
2001	15 197*	

2.14 Number of divorces in the Region of Flanders
 Source: NIS - Marriage and divorce statistics
 * Provisional figure



2.15 Trend in the number of divorces in the Region of Flanders

Source: NIS - Marriage and divorce statistics

10. The European context

Many children live in *one-parent families*, but they are still in a minority. The increase in the number of children living in one-parent families has been one of the most conspicuous socio-demographic trends in Europe in recent years. Attention has been drawn to a parallel with the increase in the two main phenomena leading to one-parent families, namely the breakdown of relationships and births outside marriage.

In Belgium, 8.2% of families with children are one-parent families, a figure which is comparable with the figures for France, the Netherlands and Germany. The United Kingdom and Sweden have much higher percentages: over 20% of children live in a one-parent family (see Table 2.16).

Children in one-parent families

Belgium (1992)	8.2
Germany (1994)	9.8
France (1994)	7.7
United Kingdom (1995)	20.0
Italy	NA
The Netherlands (1994)	7.4
Sweden (1995)	21.3

2.16 Children in one-parent families in certain European countries: percentage of children under the age of 18 who lived in a one-parent family around 1995

Source: UNICEF, *A league table of Child Poverty in Rich Nations, 2000*

NA: not available

The *marriage rate* is rather on the low side in the Region of Flanders (see Table 2.17).

Only Sweden has fewer marriages per 1000 inhabitants. The marriage rate is highest in the Netherlands.

Willingness to get married has decreased over the past few decades in all the countries investigated. This falling trend is coupled with marriage at an ever later age and an increase in other forms of cohabitation.

Marriages per 1000

	1990	1995	1998	1999	2000	2001
Region of Flanders	6.7	5.2	4.3	4.2	4.2	3.9*
Belgium	6.5	5.1	4.4	4.3	4.4	4.1*
Germany	6.5	5.3	5.1	5.2	5.1*	
France	5.1	4.4	4.8	4.8*	5.1*	
United Kingdom	6.5	5.5	5.1	5.1		
Italy	5.6	5.1	4.8	4.8		
The Netherlands	6.4	5.3	5.5	5.7	5.5*	
Sweden	4.7	3.8	3.6	4.0	4.5	

2.17 Number of marriages per 1000 inhabitants (overall marriage rate) from 1990 onwards in certain European countries

Sources: Council of Europe, *Recent demographic developments in Europe, 2000*

Eurostat, *European Social Statistics, Demography, 2001 edition*

NIS, *Population statistics*

* Provisional figures

In all the countries studied, with the exception of Italy, there are 2 to 3 divorces per 1000 inhabitants. Italy has only 0.6 divorces per 1000 inhabitants (see Table 2.18).

Divorces per 1000

	1990	1995	1998	1999	2000	2001
Region of Flanders	1.8	3.3	2.4	2.4	2.4	2.6*
Belgium	2.0	3.5	2.6	2.6	2.6	2.8*
Germany	3.9	2.1	NA	2.3		
France	1.9	2.1	NA	2.0		
United Kingdom	2.9	2.9	2.7	2.7		
Italy	0.5	0.6	0.6	0.6	0.6	
The Netherlands	1.9	2.2	2.1	2.1	2.1*	
Sweden	2.3	2.6	2.3	2.4	2.4	

2.18 Number of divorces per 1000 inhabitants from 1990 onwards in certain European countries

Sources: Council of Europe, *Recent demographic developments in Europe, 2000*

Eurostat, *European Social Statistics, Demography, 2001 edition*

NIS, *Population statistics*

* Provisional figures

Ch. 3.**PROSPERITY AND DEPRIVATION**

In this chapter, we look at the income situation of families with young children, both objectively and from the families' own perspective. The participation of parents in employment is an important determining factor here. Employment still offers the most important protection against poverty. Other details to do with employment, such as whether parents work full-time or part-time and whether they work outside normal working hours, also influence the availability of parents for child care.

We shall then look at deprivation in Flanders.

We will also look at the home circumstances of young children, an indicator of the level of comfort in the family but also of the stability or instability of the living environment, and at the possession of certain consumer goods in families with young children.

Finally, the situation in Flanders will be compared in a number of respects with the situation in certain European countries.

1. One-income or two-income families

The number of wage or salary earners in the family is a good starting point from which to outline the income situation of families with young children. Most children live in a *two-income family*. The number of two-income families is lowest among the children aged 7 to 12 years (70.4%).

Most two-income families have two incomes from employment (see Table 3.1).

One-income or two-income families

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
Two-income families	76.2	83.8	70.4	76.0
<i>of which</i>				
2 incomes from employment	67.5	73.1	62.7	67.1
1 income from employment and 1 replacement income	8.7	10.3	6.5	8.2
2 replacement incomes	0.0	0.4	1.2	0.7
One-income families	23.8	16.3	29.3	23.9
<i>of which</i>				
income from employment	15.9	12.4	21.6	17.4
replacement income	7.9	3.9	7.7	6.5
No income from employment or income replacing this	0.0	0.0	0.3	0.2

Total	100.0	100.0	100.0	100.0
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3.1 Children aged under 12 living in one-income or two-income families (children in two-parent families only - percentages)

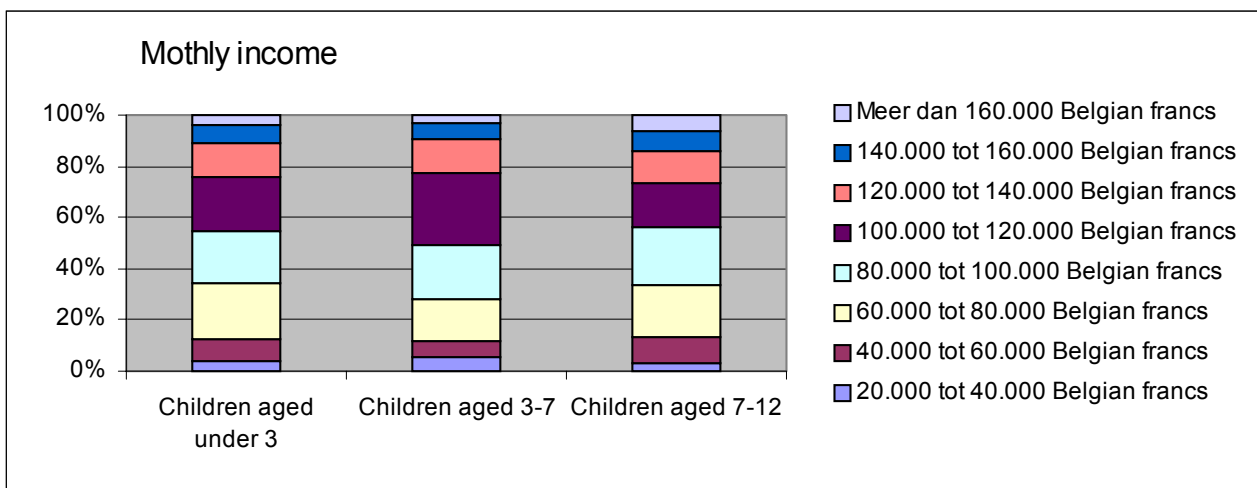
Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

2. Family income level

Figure 3.2 gives an overview of the net monthly disposable income of families with young children. About 4% have to live on a net disposable income of less than 991.57 euro (40 000 Belgian francs). Almost 25% have an income above 2974.72 euro (120 000 Belgian francs) per month.

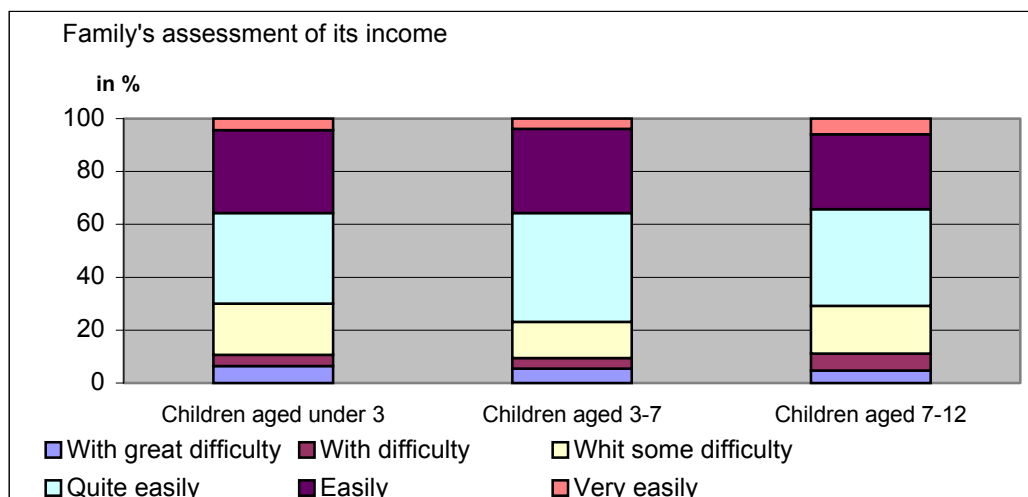
Almost 73% of young children live in a family that says it finds it quite easy to very easy to manage. Around 10% of children aged under 12 live in a family that finds it difficult to very difficult to manage. Almost 17% live in a family that finds it quite difficult to manage on its income. Figure 3.2 shows this by age group.

This subjective opinion parallels the situation with respect to the family's ability to save. The families of 67.4% of the children manage to save. This percentage is lower among families with children aged 7 to 12 (see Figure 3.4).



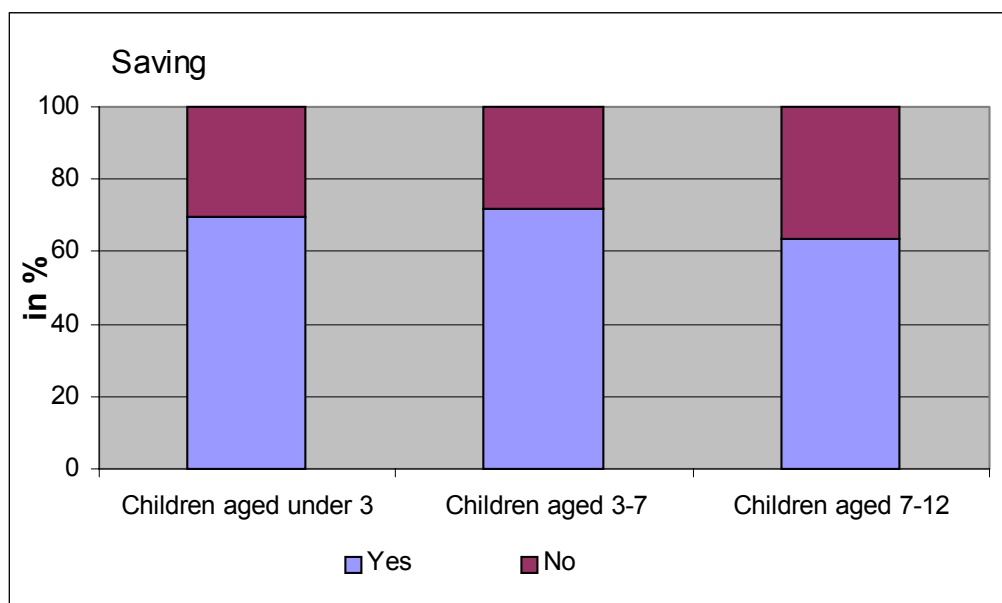
3.2 Children under the age of 12: net disposable income of the family (income after deduction of tax and social insurance contributions) (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family



3.3 Children aged under 12: how does the family manage on its current monthly income? (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family



3.4 Children aged under 12: does the family manage to save? (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

3. Children in families living at subsistence level

Approximately 14 000 children live in families that have to get by on a subsistence-level income (1 January 2000). These are the children these families have to provide for. Compared with 1 January 1999, the number of children in families with a subsistence-level income has fallen slightly (-2.5%) (see Table 3.5).

Children in families on a subsistence income

	1999	2000
Families with 1 child	3 427	3 218
Families with 2 children	4 216	4 088
Families with 3 children	2 985	2 937
Families with 4 children	1 852	1 904
Families with 5 or more children*	2 012	1 984
Total number of children*	14 492	14 131
Per 1000 children aged under 18:	11.8	11.6

3.5 Number of children in families on a subsistence level of income by family size and number per 1000 children under the age of 18 - Flemish Region

Source: Ministry of Social Affairs, Public Health and the Environment, Minimum Income Department

* Estimated figures

4. Participation of parents of young children in employment

4.1. Participation in employment, full- or part-time, breaks in employment

Around 67% of children aged under 12 have a *mother in paid employment*. More pre-school children have a mother who has taken a temporary break from employment than do children who attend school: 9% as against approximately 4% or less for children attending school (see Table 3.6).

Mothers quite often work *part-time*: in the case of over 1 in 4 of the pre-school children who have a working mother, she works part-time. Mothers of schoolchildren work part-time more often than do mothers of pre-school children. 79.3% of pre-school children have a mother who works full-time, compared with 63.4% of nursery-schoolchildren and 67.1% of primary-schoolchildren whose mothers work full-time (see Table 3.7).

Most children have a *father in paid employment*, virtually always working full-time (see Tables 3.6 and 3.7).

In the case of children whose mothers are currently *not in paid employment*, the mother has usually been in paid employment at some time. Only in the case of about 19% of children has the mother never been in paid employment. The figure is highest among primary-schoolchildren (21.1%) (see Table 3.8).

Employment situation

	Pre-school children	Children attending nursery school	Children attending primary school	Total
Mother				
Paid employment	66.7	74.7	62.9	67.2
No paid employment	24.4	21.1	36.0	29.4
Temporary break from work	8.9	4.2	1.1	3.4
Total	100.0	100.0	100.0	100.0
Father				
Paid employment	91.3	93.8	91.0	92.0
No paid employment	8.7	6.2	9.0	8.0
Temporary break from work	0.0	0.0	0.0	0.0
Total	100.0	100.0	100.0	100.0

3.6 Employment situation of parents of children aged under 12 (children in two-parent families only - percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

Employment situation: full-time/part-time work

	Pre-school children	Children attending nursery school	Children attending primary school	Total
Mother works				
full-time	79.3	63.4	67.1	67.9
part-time*	20.7	36.6	32.9	32.1
Total	100.0	100.0	100.0	100.0
Father works				
full-time	100.0	97.9	98.5	98.6
part-time*	0.0	2.1	1.5	1.4
Total	100.0	100.0	100.0	100.0

3.7 Children aged under 12: employment situation of parents: full-time or part-time work (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

* Part-time: a minimum of 15 hours and a maximum of 30 hours of work per week

No employment or temporary break from employment

	Pre-school children	Children attending nursery school	Children attending primary school	Total
Mother is unemployed and claiming benefit and has had paid work at some time	28.1	28.3	12.8	18.4
Mother is unemployed and claiming benefit and has never had paid work	3.1	2.2	0.8	1.4
Mother is a housewife and has had paid work at some time	50.0	54.4	58.7	56.1
Mother is a housewife and has never had paid work	18.8	13.0	21.1	18.9
Other	0.0	2.2	6.8	5.3
Total	100.0	100.0	100.0	100.0
Percentage of children whose mother has no paid employment or is taking a temporary break from employment	26.0	21.6	36.5	30.1

3.8 Children aged under 12: situation of mothers without paid employment or taking a temporary break from employment (children in two-parent families only - percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

4.2. Working outside normal working hours

For about 48% of the children whose mothers work, this means that she works normal hours, that is to say she never works at the weekend and she never works before 7 a.m. or after 8 p.m. Where mothers do work outside normal working hours, this usually involves weekend work combined with early or late hours. There is virtually no difference according to whether the child does or does not attend school.

It is much more common for fathers to work outside normal working hours. Around 3 out of 4 children have fathers who also work outside normal hours (see Table 3.9).

Working outside normal working hours

	Pre-school children	Children attending nursery school	Children attending primary school	Total
Mother works				
Not in the week before 7 a.m. or after 8 p.m. and not at the weekend	44.9	50.4	47.1	47.8
In the week before 7 a.m. or after 8 p.m.	11.5	7.1	7.4	8.3
At the weekend	12.8	14.2	12.2	12.9

In the week before 7 a.m. or after 8 p.m. and at the weekend	30.8	28.4	33.3	31.1
Total	100.0	100.0	100.0	100.0
Father works				
Not in the week before 7 a.m. or after 8 p.m. and not at the weekend	26.7	29.2	25.3	26.5
In the week before 7 a.m. or after 8 p.m.	18.6	16.9	22.2	20.2
At the weekend	10.5	4.6	6.9	6.7
In the week before 7 a.m. or after 8 p.m. and at the weekend	44.2	49.4	45.6	46.5
Total	100.0	100.0	100.0	100.0

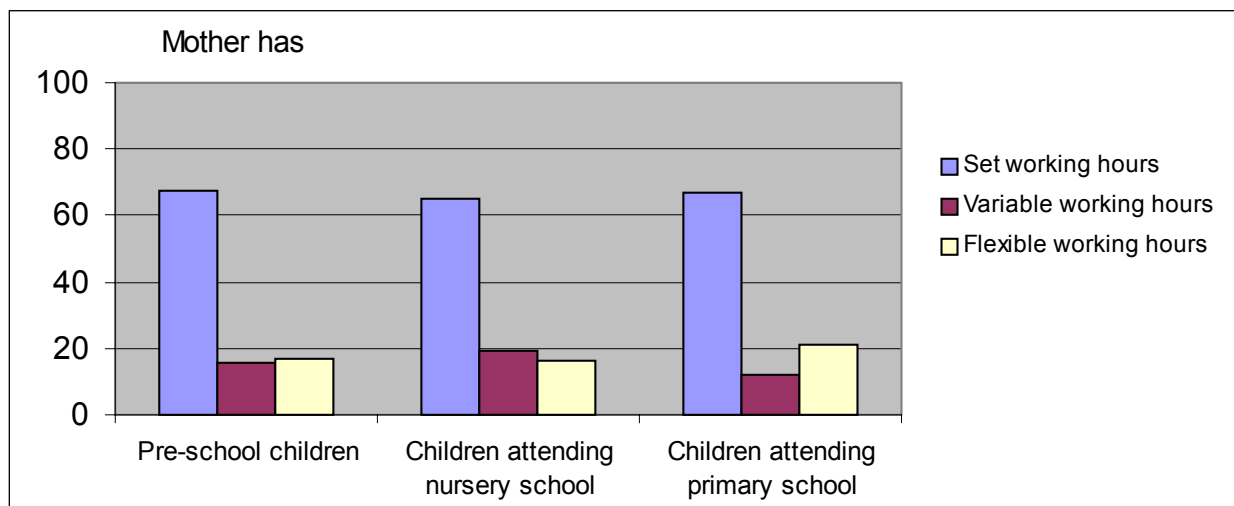
3.9 Children aged under 12: incidence of parents working outside normal working hours (percentages)

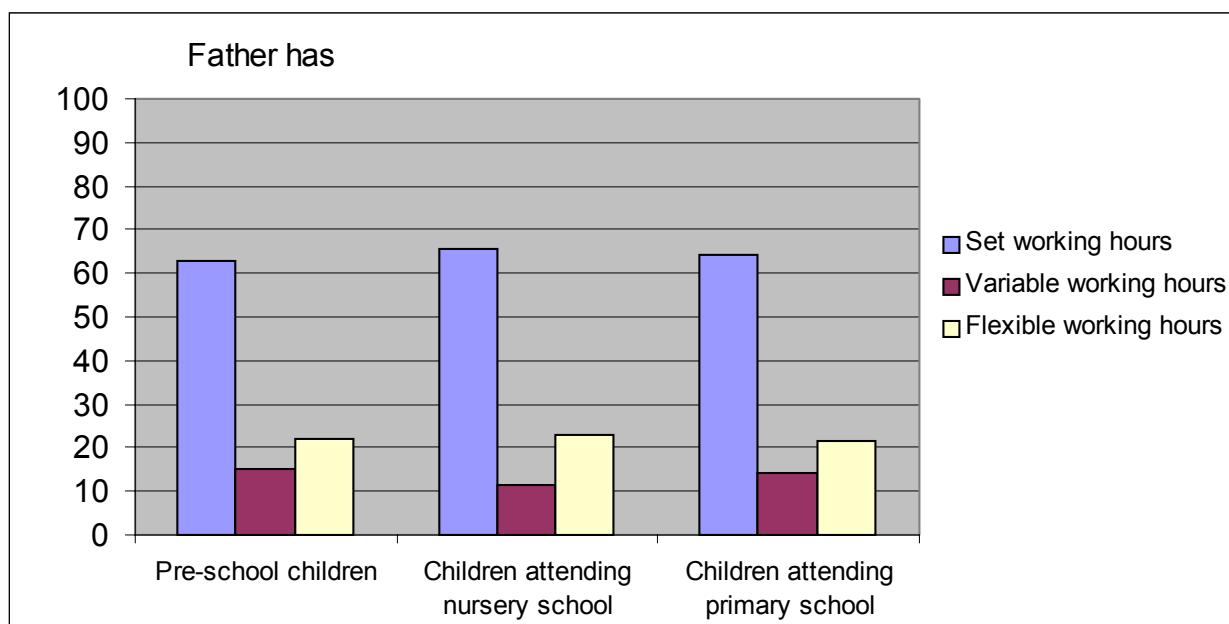
Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

4.3. Working set or variable hours

Over 6 children in 10 have a mother who works set hours. The percentage of children with a father who works set hours is only slightly lower. About 20% of the parents work flexible hours (see Figure 3.10).

Working hours





3.10 Children aged under 12: incidence of parents working set, variable or flexible working hours (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

5. Deprivation in children

Child and Family records data on deprivation every year. In these records, deprivation is defined as a lasting situation in which people are deprived of opportunities to participate adequately in things to which society attaches great value, such as education, employment and housing.

Six selection criteria have been derived from this definition, on the basis of which it is determined whether or not a family is considered to be underprivileged, namely the family's *monthly income*, the parents' *educational level*, the children's *development*, the parents' *employment situation*, and *housing and health*. If a family fulfils three or more criteria, it is considered to be underprivileged.

All families with a child born between 1 January 2001 and 31 December 2001 were assessed in accordance with the 6 criteria, and each underprivileged family was asked for information in connection with the assessment criteria.

About 4.8% of children born in 2001 (in the Region of Flanders) were born into an underprivileged family (provisional figure). This percentage represents 2952 children in the Region of Flanders. The percentage of children born into underprivileged families has remained virtually unchanged in comparison with 2000 (see Table 3.11).

Figure 3.12 shows the trend since 1992. Over this period the percentage has gradually risen to almost double. Given that Child and Family focuses its attention on the problem of deprivation, this rise may reflect increased access to this group and better recording of the phenomenon rather than an actual increase in the problem in Flanders.

Underprivileged families

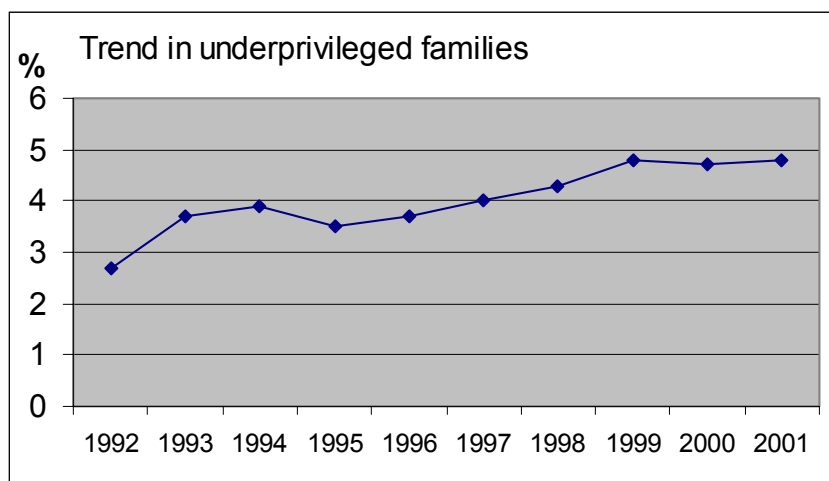
	2000	2001*
Antwerp	5.8	5.6
Flemish Brabant	2.7	1.8
West Flanders	4.6	5.0
East Flanders	4.8	5.4
Limburg	5.2	5.4

Total	4.7	4.8
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3.11 Number of underprivileged families among families with a child born in the course of the year, by province (percentages)

Source: *Child and Family - Atlas of deprivation in families with young children*

* Provisional figures



3.12 Trend in the percentage of underprivileged families in families with a child born in the course of the year - Region of Flanders

Source: *Child and Family - Atlas of deprivation in families with young children*

The percentage of underprivileged families varies by province. The highest percentage of underprivileged families with young children, namely 5.6%, is found in the province of Antwerp, and the lowest in Flemish Brabant, with 1.8%. In the provinces of Limburg, East Flanders and West Flanders, percentages of 5.4%, 5.4% and 5.0% respectively were recorded (see Table 3.11). Compared with 2000, the figure is higher in the provinces of East Flanders, West Flanders and Limburg and lower in the provinces of Antwerp and Flemish Brabant.

Deprivation is highly concentrated in a limited number of municipalities. Half of all children born into an underprivileged family live in nine municipalities. These are Antwerp, Ghent, Mechelen, Ostend, Bruges, Heusden-Zolder, Aalst, Beringen and Menen.

Antwerp (665), Ghent (333) and Mechelen (109) have the largest numbers of births into underprivileged families.

Most underprivileged families face a complex combination of problems. A low monthly income and the poor employment situation of the parents are the criteria indicated most frequently. A low level of education on the part of one or both parents is indicated in almost 2 out of 3 underprivileged families. Poor housing is reported for slightly over half of underprivileged families. Over 4 in 10 of the children have developmental problems. Poor health scores lowest (see Table 3.13).

The records also show that in the case of almost 4 out of 10 children born into an underprivileged family, the family is living in poor socio-economic circumstances (38.7%). This means that these families are poorly situated in terms of income, education and employment.

Problems of deprivation

	2000	2001*
Low monthly income	77.0	77.3
Poor employment situation of parents	77.7	76.7
Low level of education of one or both parents	66.8	64.4
Poor housing	54.9	54.1
Problems in children's development	43.5	41.1

Poor health 28.5 26.5

3.13 Fulfilment of the various criteria for deprivation in underprivileged families (percentages)

Source: *Child and Family - Atlas of deprivation in families with young children*

* Provisional figures

6. Home circumstances

Most children live in a *single-family home*. About 4% live in an apartment or flat. The family usually also owns the home. This percentage increases as the child grows older (see Table 3.14).

Many young children have experienced *moving house*. Almost half the children in the 7-12 age group have not always lived in the same home (see Table 3.15).

Over 40% of the children live in a *home which has a number of faults*. The main faults are insufficient space (20.1%), poor soundproofing within the home (13.9%) and mould and damp (10.5%) (see Table 3.16).

Over 30% of the children live in a *living environment which has one or more faults*. Street noise scores highest here (15.4%), noise from neighbours scores next (12.6%), and pollution (10.6%) comes in third place (see Table 3.16).

Home

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
Type of home				
Single-family home - detached house	36.8	54.3	53.9	50.9
Single-family home - semi-detached or terraced house	53.7	39.8	39.0	42.0
Apartment or flat in building with fewer than 10 homes	2.9	3.5	4.0	3.6
Apartment or flat in building with 10 or more homes	0.7	0.8	2.0	1.4
Other	5.9	1.6	1.1	2.2
Total	100.0	100.0	100.0	100.0
Residential status				
Owner	67.1	78.1	80.8	77.4
Tenant	27.9	19.1	16.7	19.6
Living rent-free	5.0	2.7	2.5	3.1
Total	100.0	100.0	100.0	100.0

3.14 Children aged under 12: type of home in which the child's family lives and residential status (percentages)

Source: *Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family*

Mobility

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
Child has always lived in the same home	79.3	62.2	50.6	60.0
Child has moved house at least once	20.7	37.8	49.4	40.0
Total	100.0	100.0	100.0	100.0

3.15 Children aged under 12 according to whether or not the child has moved house at least once (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

Living conditions

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
Faults in the home				
Insufficient space	29.3	19.5	17.0	20.1
Too dark	8.6	5.5	8.1	7.3
Difficult to heat	6.4	2.4	3.6	3.7
Leaking roof	5.0	5.5	2.8	4.1
Mould and damp	17.4	9.4	8.7	10.5
Rotting woodwork	6.5	5.9	5.0	5.6
Subsidence, cracks	5.0	4.7	6.4	5.6
Poor soundproofing within the home	10.7	14.1	15.1	13.9
Too little privacy with respect to other people in the home	2.9	5.9	7.8	6.3
Too little privacy with respect to neighbours	5.0	5.5	6.2	5.7
<i>Percentage with one or more faults in the home</i>	49.3	42.6	40.2	42.7
Faults in living environment				
Noise from neighbours	17.1	12.9	10.6	12.6
Street noise	22.9	12.9	14.3	15.4
Pollution	8.0	10.2	12.0	10.6
Vandalism	10.0	5.1	8.7	7.7
Polluted air	3.7	2.3	3.9	3.3
<i>Percentage with one or more faults in the living environment</i>	40.4	29.7	31.8	32.7

3.16 Children aged under 12: faults in the home and in the living environment (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

7. Consumer goods in the family

Almost all children live in a family that has a car (96.2%). 40% of families actually have more than 1 car. Possession of a colour TV (94.6%) and a telephone (96.2%) is also almost universal.

51% have a mobile phone. Of the "consumer goods" that the families were asked about, the least common were an Internet connection (20.9%), answering machine (29.3%) and dishwasher (56%)(see Table 3.17).

Possession of consumer goods

	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
Car	94.8	98.0	95.5	96.2
Colour TV	92.2	94.1	95.8	94.6
Video recorder	81.6	85.6	87.4	85.7
Microwave oven	85.8	87.9	82.1	84.8
Telephone	92.2	97.3	96.9	96.2
Answering machine	31.4	32.6	26.1	29.3
Mobile phone	52.5	51.2	51.0	51.0
Dishwasher	40.4	57.8	60.8	56.0
Airing cupboard	79.4	88.3	82.1	83.7
Personal computer	56.7	63.3	68.7	64.5
Internet connection	18.4	21.9	21.1	20.9

3.17 Children under the age of 12: possession by the family of a number of consumer goods (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

8. The European context

8.1. Participation in employment of families with young children

There are no European figures available on participation in employment of families that include the child as a unit in the calculations. However, the number of families with children under 14 that do not include an adult in employment is known. The figure for Belgium is on a par with that for the EU. Belgium scores better than the UK, but worse than Italy, Germany, France and the Netherlands (see Table 3.18).

Families with no adult in employment

Belgium	11.0
Germany	8.6
France	8.8
United Kingdom	19.5
Italy	7.6
The Netherlands	9.3
EU	10.5

3.18 Percentages of families with children aged under 14 that do not include an adult in employment in certain European countries, 1996

Source: OECD

There are wide variations in the countries studied in the *level of employment of women with young children*. With over 60%, Belgium has the second-highest rate behind Sweden, with 75%. In Italy, the former Federal Republic of Germany and the Netherlands, fewer than half these women are in employment. There are also wide variations in *full-time/part-time working*, with Italy at one end of the scale with virtually all women in employment working full-time, and the Netherlands at the other end with most women working part-time (see Table 3.19).

Working mothers

	Full-time	Part-time	Total in employment
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Belgium	38	24	62
Germany	26	25	51
France	40	19	59
United Kingdom	18	35	53
Italy	37	6	43
The Netherlands	6	41	46
Sweden*	55	40	75

3.19 Percentages of women with a child aged under 10 who are in employment in certain European countries - 1993

Source: European Commission Network on Childcare, *A Review of Services for Young Children in the European Union 1990-1995*

* Sweden: figures relate to women with young children aged under 7

8.2. Poverty

Another important aspect is the income situation of families with young children. One way of looking at this is to use the monetary poverty standard. According to the EU norm, a child is living in poverty when the family has an income that is less than 50% of the average net reference income in the country in question.

There are great differences among the European countries investigated in terms of child poverty rates. The highest percentages are found in Italy and the UK. Percentages in Germany, France and the Netherlands are also slightly higher than in Belgium. Sweden has an even lower percentage than Belgium.

The percentage is much higher among children in one-parent families, except in Italy (see Table 3.20).

Relative poverty*

	All families	One-parent families	Two-parent families	Ratio**
Belgium (1992)	4.4	13.5	3.6	3.8
Germany (1994)	10.7	51.2	6.2	8.3
France (1994)	7.9	26.1	6.4	4.1
United Kingdom (1995)	19.8	45.6	13.3	3.4
Italy (1995)	20.5	22.2	20.4	1.1
The Netherlands (1994)	7.7	23.6	6.5	3.6
Sweden (1995)	2.6	6.7	1.5	4.5

3.20 Percentages of children aged under 18 living in families in relative poverty in certain European countries around 1995, by one-parent and two-parent families

Source: UNICEF, *A league table of Child Poverty in Rich Nations, 2000*

* Relative poverty: income below 50% of the average income of the country, measured using the median (EU - 1984 definition)

** Ratio: % in one-parent families / % in two-parent families

However, poverty can also be measured on the basis of non-monetary indicators. To do this, the European Observatory on National Family Policies uses indicators such as living in a house with a leaking roof or damp walls, since these indicators are associated with poverty in all European countries.

These figures show that, using the 'leaking roof' indicator, about 7% of children under the age of 16 live in poor conditions.

Measured on the basis of the 'damp walls' indicator, there are fairly large differences between the countries studied, with the lowest percentage in Italy and the highest percentages in the UK and France (see Table 3.21).

Living conditions

Leaking roof

Damp walls

Belgium	7.3	17.3
Germany	7.1	13.2
France	8.0	22.0
United Kingdom	6.7	23.1
Italy	7.8	7.7
The Netherlands	9.4	14.1
Sweden	NA	NA

3.21 Percentage of children aged under 16 who live in poor living conditions in certain European countries, 1993

Source: *European Observatory on National Family Policies (ECHP data)*

NA: not available

Ch. 4.

SOCIAL DEVELOPMENT

Socialisation of young children does not take place exclusively within the family. From a very young age, children come into contact with a wide variety of worlds. TV and video are an important channel for contact with the world outside the family. The annual holiday also plays an important part here. For most young children there is also their child care: child care in the pre-school years is a fact of daily life for many children in Flanders. School attendance from the age of 2½ is fairly universal in Flanders. Many children also have experience of out-of-school care.

We also look at a number of traditional free-time activities among schoolchildren: sport, dance, art and crafts, music and theatre, youth organisations.

A small number of children receive special support through the special youth welfare service or social services, subsidised by Child and Family.

Finally, this chapter compares the situation in Flanders with the situation in a number of European countries.

1. Use of child care

1.1. Children aged under 2½

51.2% of children aged between 3 months and 2½ years are regularly, i.e. for at least one continuous period of 5 hours per week, looked after by relatives, a child minder or a child care centre (autumn 2001). Then there is another group of 9.6% who make limited use of child care. 39.2% of children aged 3 months to 2½ years are not looked after by relatives, a child minder or a child care centre.

Figure 4.2 shows the trend in the regular use of child care since 1991. The fluctuations in previous years are probably partly due to *changes in the research method*, in particular the survey methods and the *definition* of "regular" use of child care.

Up to and including 1997, surveys were carried out in person by Child and Family's district nurses. In 1999 the survey into the use of child care was incorporated into a broader study of child care in Flanders. This used written questionnaires. In 2001 the traditional survey of the use of child care was reinstated, although the interviews were mainly conducted by telephone with "average families", with face-to-face interviews only with underprivileged and ethnic minority families. In addition, since 1999 people have been asked to state the exact number of hours' child care they use and regular use has been defined as at least one continuous period of care of at least 5 hours per week. This precise definition replaced the categories "regular", "occasional" or "none" that the interviewees used to rank themselves.

Use of child care

Percentage of all children aged between 3 months and 2½ years

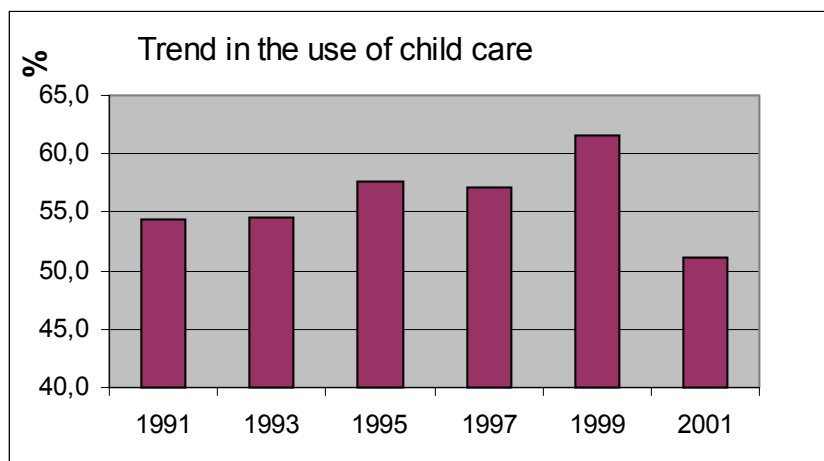
Regular use

51.2

Limited use	9.6
No use	39.2
<hr/>	
Total	100.0

4.1 Use of child care for children aged 3 months to 2½ years in the Region of Flanders - 2001 (percentage of all children aged 3 months to 2½ years)

Source: *Child and Family - Survey on the use of child care for children aged under 3, autumn 2001*



4.2 Trend in the use of child care for children aged between 3 months and 2½ years - percentages

Source: *Child and Family - Survey on the use of child care for children aged under 3, autumn 2001*

Use of child care by ethnic minority children and children from underprivileged families is much lower than in the group as a whole (see Table 4.3).

Use of child care by subgroups

	Regular use	Limited use	No use
Ethnic minority children	22.5	5.4	72.1
Children in underprivileged Belgian families	24.6	15.7	59.7
Children in underprivileged ethnic minority families	14.0	0.0	86.0
All children	51.2	9.6	39.2

4.3 Ethnic minority children and children in underprivileged families: use of child care for children aged 3 months to 2½ years in the Region of Flanders - 2001

Source: *Child and Family - Survey on the use of child care for children aged under 3, autumn 2001*

Child care for children aged between 3 months and 2½ is provided to a great extent by *child care facilities subsidised by Child and Family*: 30.0% use a child minder affiliated to a child care service, and 17.0% use a day nursery, making a total of 47.0%. There has been a decrease of 5.5% in the percentage of child care subsidised by Child and Family in comparison with 1999. *Grandparents* provide 29.3% of child care and other family members 3.1%. Informal child care accounts for a total of 32.4%, remaining virtually unchanged from 1999.

Private child care - private child minders and day nurseries - accounts for 18.6% of children. This share has risen by 3.6%, which can be attributed to an

increase in care by private child minders (+1.6%) and in private day nurseries (+2%) (see Table 4.4 and Figure 4.5).

Types of child care

	Percentage of users of child care		
	1997	1999	2001*
Grandparents	37.0	27.3	29.3
Other relatives, friends, neighbours, etc.	3.9	4.8	3.1
Child minder affiliated to a service (subsidised by Child and Family)	22.7	30.0	30.0
Day nursery (subsidised by Child and Family)	16.6	22.5	17.0
Private child minder registered with or supervised by Child and Family	12.3	8.5	10.1
Private child care centre registered with or supervised by Child and Family	5.4	6.5	8.5
Other (live-in staff, child-care and family Support centre, local employment Agency (PWA), au pair, etc.)	2.0	0.7	1.3
Total	100.0	100.0	100.0

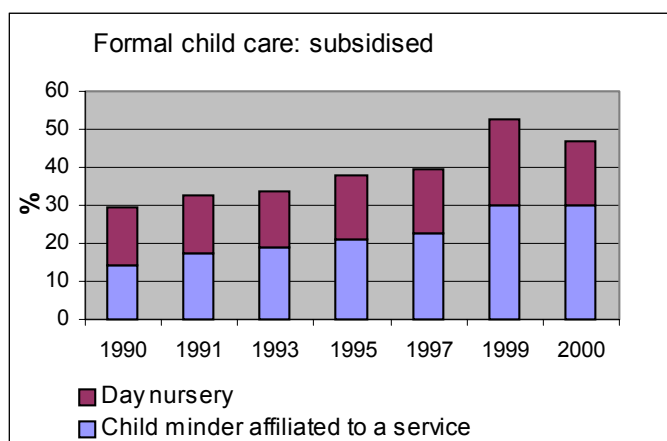
4.4 Children aged 3 months to 2½ years: use of child care by type of child care (Region of Flanders)

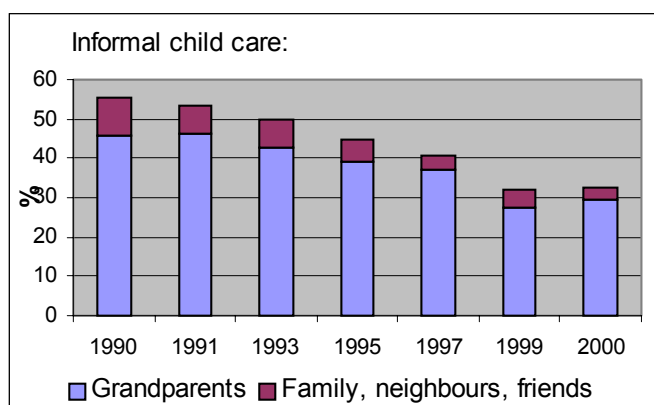
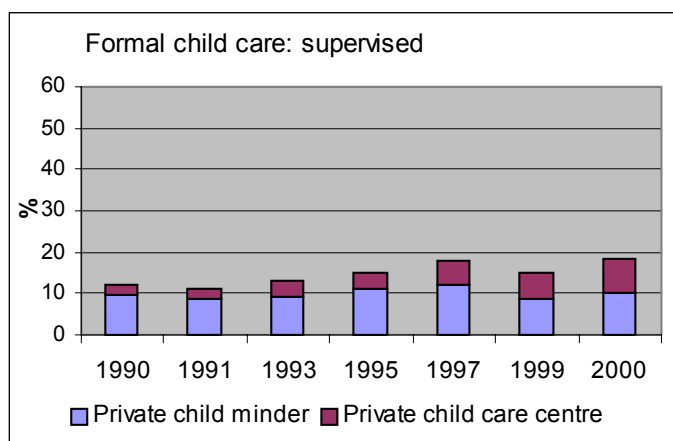
Sources: *Child and Family - Survey on the use of child care for children aged under 3, autumn 1997 and 2001*

Vanpée K., Sannen L., Hedebouw G., *Child care in Flanders. Use, choice of child care type and evaluation by the parents, HIVA, Leuven, 2000*

* Not included: child minders of whom it is not known whether or not they are subsidised (0.6%) and child care centres of which it is not known whether or not they are subsidised (0.3%)

Trends in child care type





4.5 Trend in the use of formal and informal child care for children aged between 3 months and 2½ - percentages of users of child care

Sources: *Child and Family - Survey on the use of child care for children aged under 3*

Vanpée K., Sannen L., Hedebouw G., *Child care in Flanders. Use, choice of child care type and evaluation by the parents, HIVA, Leuven, 2000*

29.4% of the children who are cared for on a regular basis are cared for part-time (see Table 4.6). 28.8% of regular users sometimes make use of atypical child care, that is to say care before 7 a.m., after 6 p.m. or for more than 11 hours per day.

Length of child care in days

	1997	1999	2001
Full-time	29.3	33.7	29.4
Part-time	69.1	66.3	70.6
Day and night, night, weekend	1.6	0.0	0.0
Total	100.0	100.0	100.0

4.6 Intensity of child care per week among children aged 3 months to 2½ years who regularly go to child care (= at least 5 hours per week) in the Region of Flanders

Sources: *Child and Family - Survey on the use of child care for children aged under 3, autumn 1997 and 2001*

Vanpée K., Sannen L., Hedebouw G., *Child care in Flanders. Use, choice of child care type and evaluation by the parents, HIVA, Leuven, 2000*

1.2. School-age children

About 50% of children who are at nursery school and 28.6% of children at primary school are regularly looked after by persons or facilities other than their parents *during the week* (see Table 4.7).

In the case of children at nursery school, *grandparents* are the most important child care resource. Grandparents look after about 40% of children attending nursery school. In the case of children at primary school, child care provided by and at the school is the most important type: 35.8%. Grandparents look after 34.3% of these children (see Table 4.8).

Use of out-of-school care

	Children attending nursery school	Children attending primary school
Regularly	51.1	28.6
Very occasionally or never	48.9	71.4
Total	100.0	100.0

4.7 Use of out-of-school care for children attending nursery school or primary school in the Region of Flanders, 1999 (percentages)
Source: Vanpée K., Sannen L., Hedebouw G., *Child care in Flanders. Use, choice of child care type and evaluation by the parents, HIVA, Leuven, 2000*

Types of child care

	Percentage of users of child care	
	Children attending nursery school	Children attending primary school
Grandparents	40.6	34.3
Other relatives, friends, neighbours	7.3	14.9
Child care outside school (Out-of-school Child Care Initiative (IBO))	7.9	4.5
Child care provided by and at school	27.9	35.8
Child minder affiliated to a service	7.0	0.0
Private child minder	4.9	1.5
Day nursery	1.1	1.5
Private child care centre	0.8	0.0
Other (local employment agency (PWA), au pair, live-in staff, etc.)	2.5	7.5
Total	100.0	100.0

4.8 School-age children: use of child care by children attending nursery school or primary school by type of child care, Region of Flanders, 1999 (percentages)
Source: Vanpée K., Sannen L., Hedebouw G., *Child care in Flanders. Use, choice of child care type and evaluation by the parents, HIVA, Leuven, 2000*

1.3. Sick children

A sick child creates a difficult situation for families who use child care facilities. In the autumn of 2001, 18.2% of the *children aged 3 months to 3 years* were ill during the week of the survey. For almost 4 out of 10 children (37.7%), being ill meant that their child care arrangements changed. Many parents make arrangements within the immediate or extended family, by taking leave, days off in lieu or social leave, by working at home or by calling on the grandparents.

Children who normally go to day nursery experience more changes when they are ill. Children who are normally looked after by grandparents experience the least change.

Child care used in the event of illness: children aged under 3

Impact on the child care

Child care arrangements not changed	62.3
Child care arrangements changed	37.7

Total	100.0
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Nature of the change*

Non-working partner looked after the child	6.1
Parent worked at home	12.1
Parent took social leave	12.3
Parent took leave or days off in lieu	23.3
Grandparents looked after the child	39.9
Relatives, neighbours, acquaintances looked after the child	3.8
Used service that provides care for sick children	1.3
Baby-sitter	2.5
Child care instead of school	1.2
Other	8.7

4.9 Care in the event of illness of children aged between 3 months and 3 years who normally make use of child care facilities or attend nursery school - 2001
 Source: *Child and Family - Survey on the use of child care for children aged under 3, autumn 2001*

* More than one answer possible

Almost half of *school-age children* cannot go to their usual child care facility when they are ill. In this situation also, the parents often take a day's leave, a day off in lieu or leave for social or family reasons, or the grandparents step in (see Table 4.10).

Child care used in the event of illness: school-age children

	Children aged 2½-6	Children aged 6-12
Usual child care facility	49.1	41.5
- <i>grandparents</i>	42.1	33.8
- <i>other</i>	7.2	7.7
Parent(s) take(s) leave or a day off in lieu	39.3	32.3
Grandparents look after the child (1)	37.6	50.8
Parent(s) take(s) leave for social or family reasons	36.8	36.9
Partner does not work	20.1	9.2
Other (relatives, neighbours, friends) look after the child (1)	10.5	3.1
Parent(s) work(s) at home	10.5	7.7
Specific organisation that provides child care for sick children	8.8	4.6
Child stays at home alone	0.5	3.1
Other solution	4.5	4.6

4.10 Care used in the event of short-term illness of school-age children who normally use child care in the Region of Flanders, 1999 (more than one type possible)

Source: *Vanpée K., Sannen L., Hedebouw G., Child care in Flanders. Use, choice of child care type and evaluation by the parents, HIVA, Leuven, 2000*

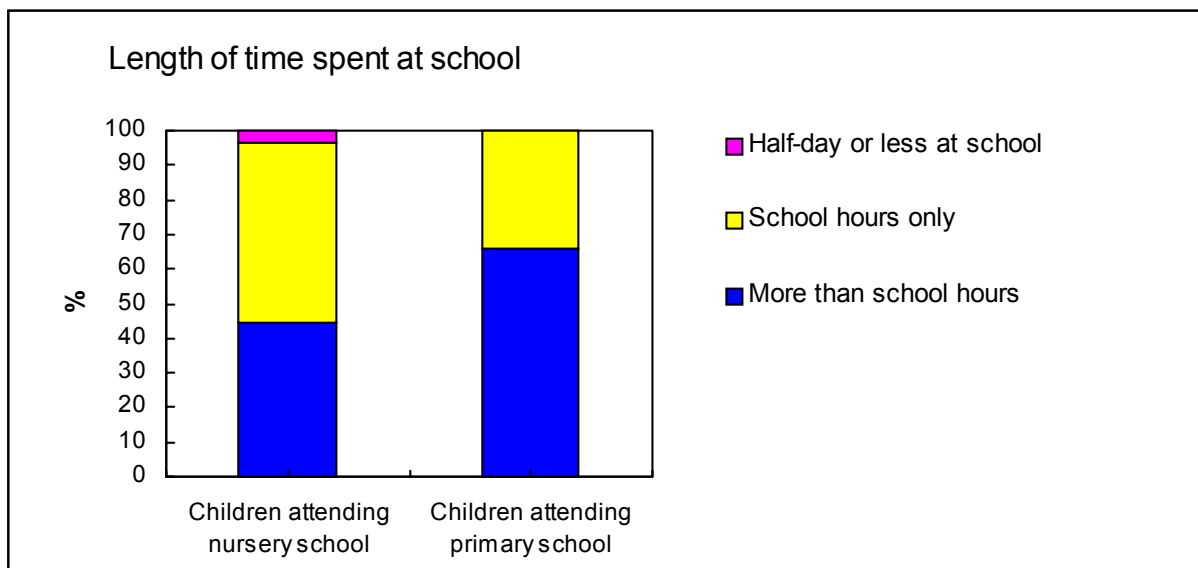
(1) Grandparents/others who care for the child on a regular day-to-day basis are not included here; they are included in the category "Usual child care facility".

2. Going to school

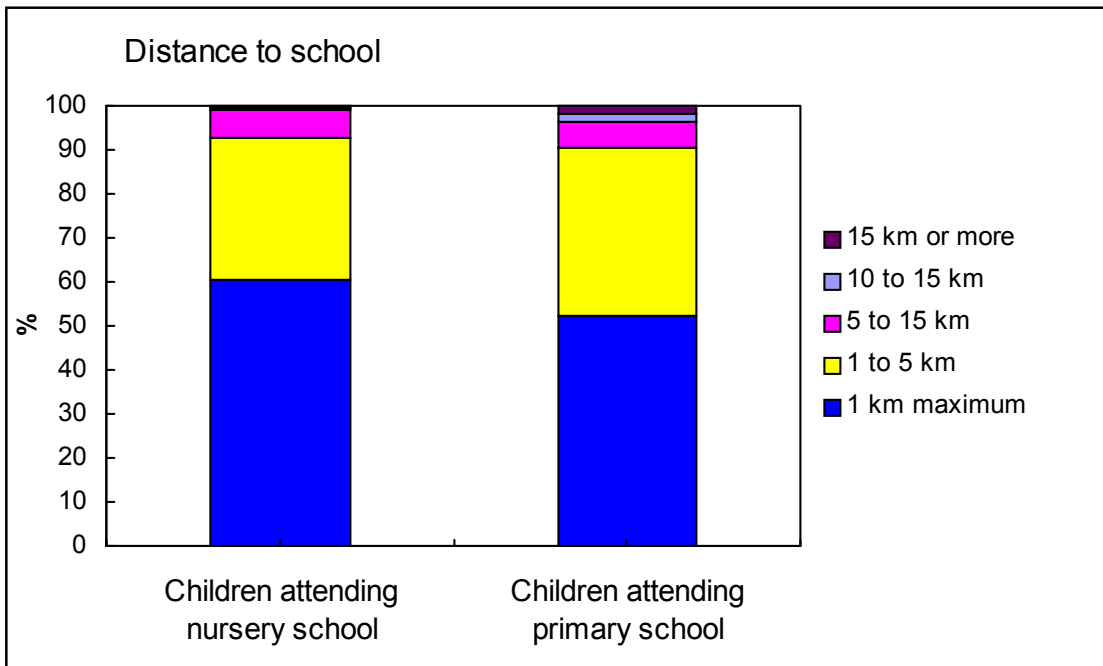
Most children in the Region of Flanders attend nursery school. Even before the age of 3, school attendance is *fairly universal*. In the autumn of 2001, 43.6% of children aged between 2½ and 3 attended school full-time and 37.9% part-time, not every day or not always for full days. 18.5% of these children were not yet attending school.

For many children attending nursery school or primary school, a *day at school* lasts longer than the actual school hours: about 44% of children at nursery school and almost 66% of primary school pupils stay at school for longer than school hours (see Figure 4.11). On average they stay at school after official school hours for 51 minutes and 41 minutes respectively.

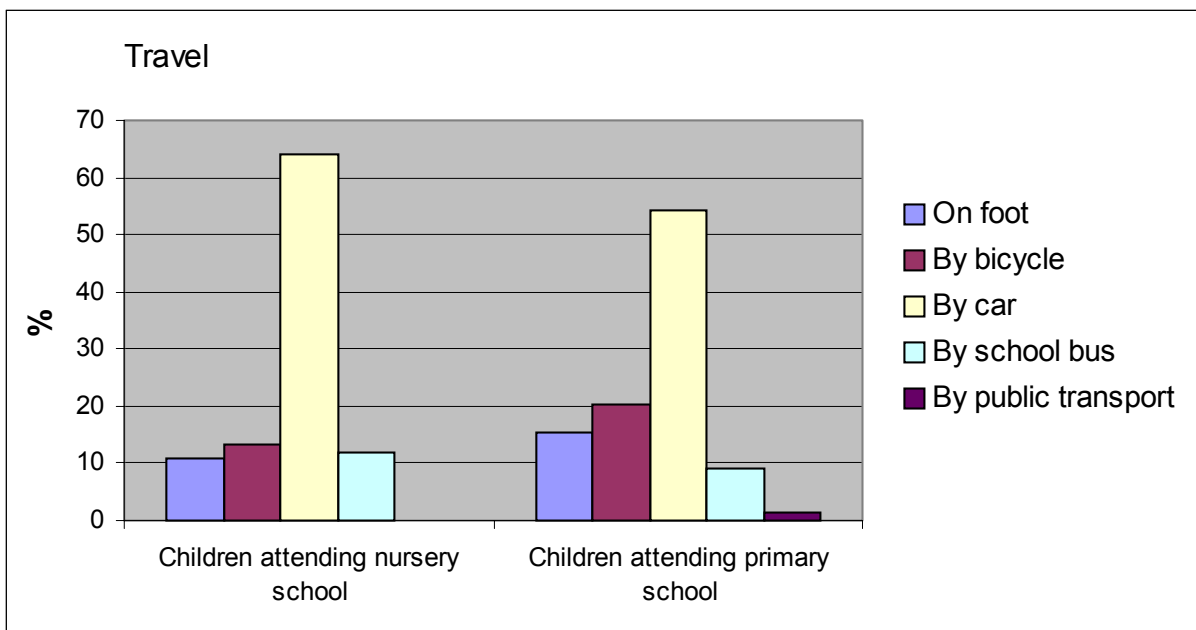
The school, and in particular the nursery school, is a very short *distance* away from the *home*. 60.6% of children attending nursery school live a maximum of 1 km from the school, and 32.3% live between 1 and 5 km away. The respective percentages for children attending primary school are 52.2% and 38.4% (see Figure 4.12). However, this short distance does not prevent 64% of nursery-schoolchildren and 54.1% of primary-schoolchildren from being taken to school by car (see Figure 4.13).



4.11 Children aged under 12: length of time spent at school (percentages)
 Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family



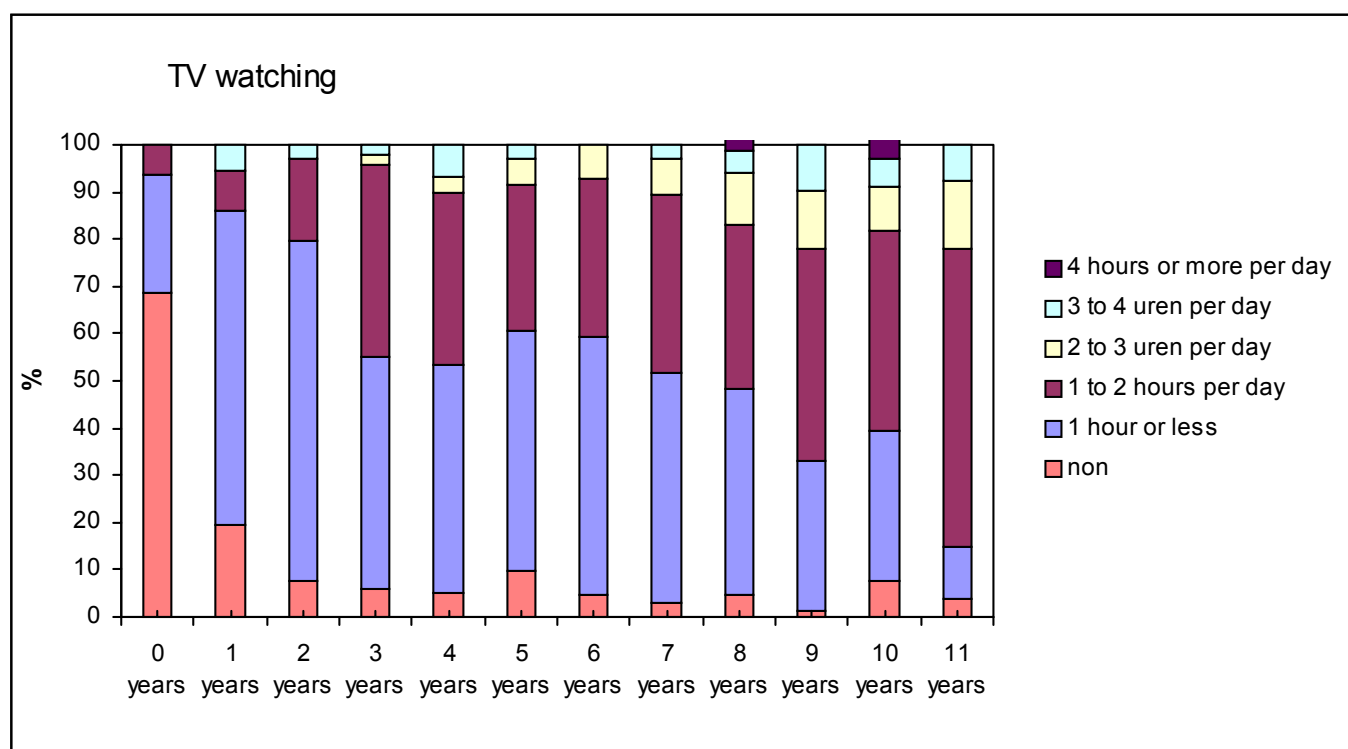
4.12 Children aged under 12: distance to school (percentages)
 Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family



4.13 Children aged under 12: means of travelling to school (percentages)
 Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

3. TV/video watching

Figure 4.14 shows how many hours per day children watch TV by age. TV watching is gradually increasing.



4.14 Children aged under 12: hours per day spent watching TV/videos by age (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

4. Annual holidays

About 85% of the children went on holiday in 1999 for at least a week. There is virtually no difference by age of the child (see Table 4.15).

	Annual holidays			
	Children aged under 3	Children aged 3-7	Children aged 7-12	Total
The family goes on holiday	82.3	85.1	85.2	84.6
The family does not go on holiday	17.7	14.9	14.8	15.4
Total	100.0	100.0	100.0	100.0

4.15 Children aged under 12 who go on holiday for at least one week a year (percentages)

Source: Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family

5. Free-time activities of school-age children

Children under the age of 7 do not engage in many traditional free-time activities, namely sport, dance, art and crafts, music and theatre and youth organisations. If they do they are usually involved in sport; 34.1% of the children under the age of 7 do some kind of sport.

Among children aged 7 to 12, 60% do sport and 31.1% take part in activities run by a youth organisation. Music and theatre attract 18.5%; dance and arts and crafts each account for about 10% (see Table 4.16).

Free-time activities

	No	Yes	Number of hours per week			
			Maximum 1 hour	1 to 2 hours	2 to 3 hours	3 or more hours
Children under the age of 7						
Sport	65.9	34.1	15.7	14.1	3.2	1.2
Dance	93.2	6.8	4.8	2.0	0.0	0.0
Art and crafts	98.4	1.6	0.8	0.8	0.0	0.0
Music, theatre	98.4	1.2	0.4	0.0	0.0	0.0
Youth organisations	94.4	5.6	0.4	0.4	4.0	0.8
Children aged 7 to 11						
Sport	39.7	60.3	14.3	19.3	16.5	10.3
Dance	90.2	10.9	7.0	2.0	0.8	0.0
Art and crafts	89.9	10.1	2.2	3.6	3.4	0.8
Music, theatre	81.5	18.5	5.9	3.9	3.4	5.3
Youth organisations	68.9	31.1	0.6	3.9	20.5	6.2

4.16 School-age children: free-time activities among children under the age of 7 and among children aged 7 to 12 (percentages)

Source: Panel Study of Belgian Households - year of observation 1999, processed on behalf of Child and Family

6. Children receiving supervision and support via special youth welfare

Supervision and support measures are in place for a number of young children via the special youth welfare committees and the juvenile courts. Child and Family subsidises the supervision and support measures via special youth welfare for some of these children.

6.1. Supervision and support via the special youth welfare service, subsidised by Child and Family

Some children and their families are given support or care in child care and family support centres or via services for placement in foster families. This is short-term care at the parents' request on account of special living, working, home, health or financial circumstances.

There were 4550 children registered in child care and family support centres in 2001, i.e. children who received support on at least one day in 2001. There were 278 children registered with the foster placement services. These figures are virtually unchanged compared with 2000 (see Table 4.17).

Supervision and support via Child and Family

	2000		2001		
	Total	-	3 yr	3-6 yr	+6 yr Total
Childcare and family support centres	4 495	2 015	1 312	1 223	4 550
Foster placement services	304	78	63	137	278
Total	4 799	2 093	1 375	1 360	4 828

4.17 Number of children registered with a special youth welfare service, subsidised by Child and Family

6.2. Supervision and support via the special youth welfare service

On 31 December 2001, a total of 1936 children under 12 were being supervised by a *special youth welfare committee*: 130 children under 3, 450 children aged 3-6 and 1356 children aged 6-12. The total number of children under the age of 12 receiving supervision and support increased by 4.5%. This can be attributed to an increase in the number of children aged over 3 receiving supervision and support. The number of children under 3 receiving supervision and support fell from 194 to 130 (-33.7%).

Data are also available on supervision measures imposed by *juvenile courts* in 2001. On 31 December 2001, 2151 children under 12 were subject to supervision measures imposed by the juvenile courts, of whom 180 were under 3, 472 were aged 3 to 6 and 1499 were aged 6 to 12 (see Table 4.18). There is a rise here too, of 4.8%, which can also be attributed to an increase in the number of children over the age of 3 who were subject to supervision measures. The number of children under 3 subject to supervision measures fell from 190 to 180 (-5.3%).

This includes placement in a foster home by a foster care service, placement in supervised hostels, day centres, family hostels, guidance or observation centres, boarding schools, hospitals, or supervision by a home supervision service, preventive social measures, and admission to facilities within Child and Family or within the Flemish Fund for the Integration of Persons with a Disability (VFIPH) (see Tables 4.19 and 4.20).

Supervision and support via the special youth welfare service

	Special youth welfare committee		Juvenile court	
	2000	2001	2000	2001
Children aged under 3	194	130	190	180
Children aged 3-6	429	450	403	472
Children aged 6-12	1 229	1 356	1 460	1 499
Total	1 852	1 936	2 053	2 151

4.18 Numbers of children subject to supervision by a special youth welfare committee or a supervision measure imposed by a juvenile court

Source: Ministry of the Flemish Community, Special Youth Welfare Department

Types of supervision and support via special youth welfare committees

	Children aged under 3	Children aged 3-6	Children aged 6-12
Supervised hostels	11	97	318
Day centres	0	2	229
Foster care services/foster families	95	186	376
Boarding schools*	0	8	22
Family hostels	0	2	8
Shelters, guidance and observation centres	1	6	25
Preventive social measures	19	38	153
Home supervision services	0	104	200
Child and Family facilities	4	4	4
VFIPH facilities	0	2	10
Facilities outside Dutch-speaking areas	0	0	3
General hospitals	0	1	8
Free of charge	0	0	0
Not known	0	0	0
Total	130	450	1 356

4.19 Children subject to supervision by a special youth welfare committee: types

of supervision and support, 2001

Source: Ministry of the Flemish Community, Special Youth Welfare Department

* Community boarding schools and state boarding schools

Types of supervision and support imposed by juvenile courts

	Children aged under 3	Children aged 3-6	Children aged 6-12
Supervised hostels	22	90	340
Day centres	0	1	56
Foster care services/foster families	64	170	491
Boarding schools*	0	7	34
Family hostels	1	2	15
Shelters, guidance and observation centres	0	1	16
Home supervision services	20	35	81
Child and Family facilities	27	33	27
VFIPH facilities	5	19	128
Facilities outside			
Dutch-speaking areas	0	4	9
General hospitals/psychiatric hospitals	2	2	6
Free of charge	38	107	293
Not known	1	1	3
Total	180	472	1 499

4.20 Children subject to a supervision measure imposed by a juvenile court: types of supervision and support, 2001

Source: Ministry of the Flemish Community, Special Youth Welfare Department

* Community boarding schools, state boarding schools, privately run boarding schools

7. The European context

7.1. Child care

The level and use of child care varies widely from one country to another. Belgium leads the field, together with France and Sweden, in terms of the percentage of subsidised *child care places*.

In some other countries, there is virtually no state child care provision for children aged under 3 (see Table 4.21).

Only incomplete data are available on the use of child care - percentage use and types of child care (see Table 4.22).

Subsidised child care

Belgium	30
Germany (former FRG)	2
France	23
United Kingdom	2
Italy	6
The Netherlands	8
Sweden	21

4.21 Number of subsidised places per 1000 children aged under 3 in certain European countries

Source: European Commission Network on Childcare, *A Review of Services for Young Children in the European Union 1990-1995*

Use of child care

Flemish Community	0 - 3 months: almost all children are looked after by their parents.
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3 m - 2½ years: 61.6% use child care, of whom 29% use day nurseries, 38.5% child minders and 32.1% grandparents or other relatives.
2½ - 6 years: 51.1% use out-of-school care

French Community	0 - 1 years: care by parents predominates. 1 - 2½ years: 21.5% are cared for in day nurseries and 12% by child minders.
Germany	NA
United Kingdom	0 - 1 years: almost all children are looked after by their parents or informally by relatives or child minders. 1 - 3 years: most child care facilities are private. There are no data available on use of these facilities. 20% of 2-year-olds attend playgroups.
Italy	0 - 1 years: care by parents, supplemented by informal care in families. 1 - 3 years: 27% cared for at home; 48% by relatives or informal care within the family; 15% by live-in carers; 6% in child care centres; 2% by fathers and care within the family.
The Netherlands	Day nurseries are used by 17% of 0-4-year-olds. Over 50% of 2-4-year-olds go to playgroups. Out-of-school care is used by 5% of 4-12-year-olds.
Sweden	0 - 1 years: almost all children are looked after by their parents at home. 1 - 5 years: 61% of children attend pre-school child care centres full-time; 12% are cared for in families.

4.22 Use of child care by age, around 1999

Source: OECD, *Thematic review of early childhood education and care*

NA: not available

7.2. Going to school

The Region of Flanders leads Europe when it comes to the age at which children first go to school. The figure is also high in France. It is low in the Netherlands. Table 4.23 includes children under the age of 3 who go to school in the calculations, so that the percentage is above 100 for Flanders and France.

Going to school

Belgium* / **	118.2
Germany	65.8
France**	118.2
United Kingdom	77.4
Italy	98.0
The Netherlands	49.7
Sweden	66.9

4.23 Children under the age of 4 who attend school in certain European countries: percentage of all children aged 3 to 4 (1999)

Source: OECD, *Education at a Glance, 2001*

* Relates to Flanders; figures for Belgium not available.

** In Belgium and France the percentage is higher than 100. This is because children under the age of 3 who go to school were also counted.

Ch. 5.

ASPECTS OF THE HEALTH AND DEVELOPMENT OF YOUNG CHILDREN

Perinatal mortality and infant mortality are generally regarded as good indicators of the quality of a country's health system. Life expectancy is another frequently used indicator. Apart from these basic indicators, we also look at antenatal care and present some data on childbirth in this chapter.

In the context of morbidity in young children, we begin by considering congenital abnormalities and hearing loss identified in the neonatal period. We then go on to look at a number of diseases and disorders of relevance to young children.

Data on accidents and child abuse are another area of particular interest.

1. Data on pregnancy and childbirth

Antenatal care in Flanders is mainly provided by gynaecologists: 93.1% of pregnant women were under the care of a private gynaecologist during pregnancy, and another 4.4% were under the care of both a gynaecologist and their own GP. Provision of antenatal care by private gynaecologists increased slightly from 2000 to 2001.

The highest percentage of antenatal care provided by gynaecologists is found in the provinces of Flemish Brabant and Antwerp. The highest percentage of shared antenatal care is found in the province of West Flanders.

The number of pregnancies not involving medical care is very small (0.2%) (see Tables 5.1 and 5.2).

Antenatal care

	2000	2001
Private gynaecologist	92.2	93.1
Shared	4.7	4.4
GP	1.9	1.5
Child and Family antenatal clinic	0.4	0.3
Midwife	0.5	0.5
No antenatal care	0.3	0.2
Region of Flanders	100.0	100.0

5.1 Antenatal care: type of antenatal care - Region of Flanders (percentages)

Source: *Child and Family - IKAROS*

Antenatal care by province

	Antwerp	Flemish Brabant	West Flanders	East Flanders	Limburg	Region of Flanders
Private gynaecologist	94.9	96.7	89.8	91.2	92.7	93.1
Shared	2.2	1.7	8.3	6.4	3.9	4.4
GP	1.5	0.7	1.7	1.7	2.0	1.5
Other	1.1	0.8	0.2	0.7	1.1	0.8
No antenatal care	0.3	0.1	0.1	0.1	0.2	0.2
Total	100.0	100.0	100.0	100.0	100.0	100.0

5.2 Antenatal care: type of antenatal care by province - 2001 (percentages)

Source: *Child and Family - IKAROS*

The majority of live births take place in a maternity hospital. In 1996 (most recent figures available), the percentage of home births in the Region of Flanders was 0.8%. In 1998 (the most recent figures available), the average duration of stay in a maternity hospital was 6.0 days in the Region of Flanders. In the Brussels Region, the figure was 5.63 days. The average duration of stay remained virtually unchanged in comparison with 1997.

In the Region of Flanders in 2000, of 100 deliveries, 46.7 were first-born children, 34.2 were second children, 12.7 were third children, and 6.5 were fourth or later children. The relative proportion of third or later children increased from 18.9 in 1999 to 19.2 in 2000.

The percentage of young mothers, i.e. mothers aged under 20, was 2.2% (2000). 42.1% of the women who gave birth were over the age of 30 and 1.4% were over the age of 40. The average age of mothers on giving birth to their first child was 27.5 years, and it was 30.7 years for multiparae. There was a slight increase in the age of multiparae compared with 1999 (+0.1 year). The average age of the primiparae remained unchanged compared with 1999 (see also Chapter 1, section 5.3).

A number of pregnancies not to be underestimated, i.e. 3.9%, were achieved following fertility treatment: 1.7% of women had had *hormone therapy*, 1.2% had undergone *in vitro fertilisation* (IVF), 0.5% had been artificially inseminated, and 0.5% had had an intracytoplasmic sperm injection (ICSI) (2000). The number of births following fertility treatment decreased slightly compared with 1999, by 0.4%.

About 39% of multiple pregnancies came about following medically assisted fertilisation. This was the case for only 3.3% of single births.

3.7% of children came into the category of multiple births. The incidence of twins was 3.5%, and that of triplets 0.1%. 1100 twins, 17 triplets and one set of quadruplets were recorded. The number of triplets was considerably lower than in 1999, when 31 triplets were recorded.

In 2000, 7.1% of pregnant women gave birth prematurely, following a pregnancy of less than 37 weeks. There was a slight increase compared with 1999 in the number of premature births (+0.1%). The relative proportion of *babies with a low birth weight* (less than 2500 grams) was 6.8%. The birth weight of 1.1% of babies was extremely low (less than 1500 grams). The number of babies with a low or extremely low birth weight fell slightly, by 0.3% and 0.1% respectively.

In three in ten women (30.3%), the birth was *induced*, usually for reasons of convenience to either the obstetrician or the pregnant woman. Around 70.1% of children were born without *obstetric intervention*. 17.0% of babies were born by Caesarean section. Compared with 1999, there was a slight increase in the incidence of Caesareans. This is a sustained increase: since 1995, the incidence of Caesareans has risen from 13.6% to 17.0% of all deliveries. In 12.3% of deliveries, vacuum extraction* or forceps were employed. Epidural anaesthesia was used in over six in ten deliveries. There has also been a sustained increase in the incidence of epidural anaesthesia: since 1995 the incidence has increased from 48.2% to 61.7%.

After the birth, 13.2% of children were transferred to a neonatal unit and 3.9% to a neonatal intensive care unit. There was an increase of 0.3% in the number of transfers to a neonatal unit; the number of transfers to a neonatal intensive care unit remained unchanged.

Source: Study Centre for Perinatal Epidemiology (SPE)- 2000

* vacuum extraction: delivery of a baby with the aid of an instrument that is attached to the baby's head

2. Life expectancy

Life expectancy at birth and at the age of 1 year is about 75 years for men and about 81 years for women (1999, most recent figures) (see Table 5.3).

Table 5.3 also shows the trend since 1995. Life expectancy has increased each year, with the exception of 1997 to 1998. However, the decrease in this period can probably be attributed to a change in data gathering in 1998.

Life expectancy

		At birth	At 1 year
Men	1995	74.6	74.1
	1996	75.1	74.5

	1997	75.5	74.9
	1998	75.1	74.1
	1999	75.1	74.2
	2000	75.7	75.0
Women	1995	80.8	80.2
	1996	81.3	80.6
	1997	81.5	80.8
	1998	80.8	79.9
	1999	81.0	80.0
	2000	81.5	80.8

5.3 Life expectancy in the Region of Flanders, at birth and at 1 year

Source: Health indicators, Ministry of the Flemish Community, Health Care Administration

3. Mortality

3.1. Number of deaths of children under the age of 15 in the Region of Flanders

Table 5.4 shows the number of deaths by age group and gender. This shows that the majority of deaths occur before the age of 1 year and that there are more deaths among males than females.

Deaths by age group and gender

	1999	2000		
		Males	Females	Total
Number				
Under 1 year	299	159	137	296
1 - 4 years	70	37	31	68
5 - 9 years	50	21	13	34
10 - 14 years	57	25	22	47
Total	476	242	203	445
Per thousand				
Under 1 year	4.81	5.06	4.53	4.80
1 - 4 years	0.27	0.28	0.25	0.26
5 - 9 years	0.14	0.12	0.08	0.10
10 - 14 years	0.17	0.14	0.16	0.14

5.4 Number of deaths among children under the age of 15 by age group and gender - Region of Flanders

Source: Health indicators, Ministry of the Flemish Community, Health Care Administration

3.2. Number of deaths of children under the age of 12 months in the Region of Flanders

Data on infant mortality are generally presented in accordance with a number of criteria known as mortality criteria (see Table 5.5).

The first mortality criterion is *stillbirth*. This is the number of babies who are registered as "stillborn" after a pregnancy of at least 180 days. There were 247 stillbirths in 2000. The figure for stillbirths was 3.9 per thousand births. This figure was 0.4 per thousand lower than in 1999.

Early neonatal mortality is death occurring between birth and the age of seven days (7 x 24 hours). In 2000, 129 infants died in this period; the figure for early neonatal mortality was 2.1 per thousand live births, a decrease of 0.3% compared with 1999.

The *perinatal mortality figure* was 6.1 per thousand births. Perinatal mortality is the death of infants during the first seven days of their life, together with the figure for stillbirths. In 2000, there was a fall in perinatal mortality of

0.6 per thousand. This decrease can be ascribed to the decrease in both stillbirths and early neonatal mortality.

Another mortality criterion frequently employed is *neonatal mortality*. This covers death between birth and the first four weeks (28 days) after birth. In 2000, 174 infants died during the first 28 days of their life. The neonatal mortality figure was 2.8 per thousand live births, 0.2 per thousand lower than in 1999.

Late neonatal mortality was 0.7 per 1000 live births, an increase of 0.1 per thousand compared with 1999. Late neonatal mortality is defined as death after the first seven days (7 x 24 hours) up to the age of 28 days.

Finally, there is also *infant mortality*. This covers deaths between birth and the age of one year. In 2000, 290 infants died during their first year of life. The infant mortality figure was 4.7 per thousand live births, a drop of 0.1 per thousand. There are two different trends behind this decrease: a decrease in deaths in the first 28 days and an increase in deaths after this period (see Table 5.5).

31.4% of infants born alive with a *birth weight* of under 1000 grams died before reaching the age of 1 (2000) (see Table 5.6). As Table 5.7 shows, mortality is appreciably higher in *multiple births*. Twins have a 3.44 times greater risk of dying before the age of 1 year than singletons. There were no deaths among triplets or quadruplets before the age of 1 year in 2000.

Mortality figures

	1999	2000
Stillbirths per 1000 births	4.3	3.9
Early neonatal mortality per 1000 live births	2.4	2.1
Perinatal mortality per 1000 births	6.7	6.1
Late neonatal mortality per 1000 live births	0.6	0.7
Neonatal mortality per 1000 live births	3.0	2.8
Post-neonatal mortality per 1000 live births	1.8	1.9
Infant mortality per 1000 live births	4.8	4.7

5.5 Foeto-infant mortality figures in the Region of Flanders

Source: *Health indicators, Ministry of the Flemish Community, Health Care Administration*

Mortality by birth weight

	Still- births	Early neonatal mortality	Late neonatal mortality	Post- neonatal mortality	Alive	Total
500 - 999 g	63	39	7	12	127	248
1 000 - 1 499 g	38	16	4	4	321	383
1 500 - 1 999 g	27	12	5	5	765	814
2 000 - 2 499 g	31	8	2	15	2 665	2 721
2 500 g or over	70	52	27	78	57 984	58 211
Not known	18	2	0	2	167	189
Total	247	129	45	116	62 029	62 566

5.6 Outcome of pregnancy: number of deaths and live births by birth weight in the Region of Flanders - 2000

Source: *Health indicators, Ministry of the Flemish Community, Health Care Administration*

Multiple pregnancies

	Still- births	Early neonatal mortality	Late neonatal mortality	Post- neonatal mortality	Alive	Total
Single births	224	104	41	108	59 835	60 312
Twins	23	25	4	8	2 146	2 206
Triplets	0	0	0	0	45	45
Quadruplets	0	0	0	0	3	3
Total	247	129	45	116	62 029	62 566

5.7 Outcome of pregnancy: number of deaths and live births in single and multiple pregnancies in the Region of Flanders - 2000

Source: *Health indicators, Ministry of the Flemish Community, Health Care Administration*

3.3. Causes of death in children aged under 12 months in the Region of Flanders

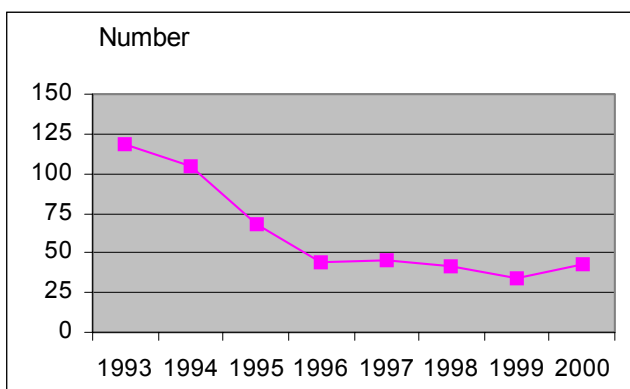
The most important causes of death in stillbirths and infant mortality are complications during pregnancy and in the perinatal period and congenital abnormalities. In 2000, 198 children died as a result of complications during pregnancy and in the perinatal period and 115 as a result of congenital abnormalities. 43 children died of cot death as against 34 in 1999. The reduced incidence of cot deaths achieved since Child and Family launched its campaign in the autumn of 1994 continues, but the further decrease achieved in 1999, when there were only 34 deaths, has not been sustained (see Table 5.8 and Figure 5.9).

Causes of death

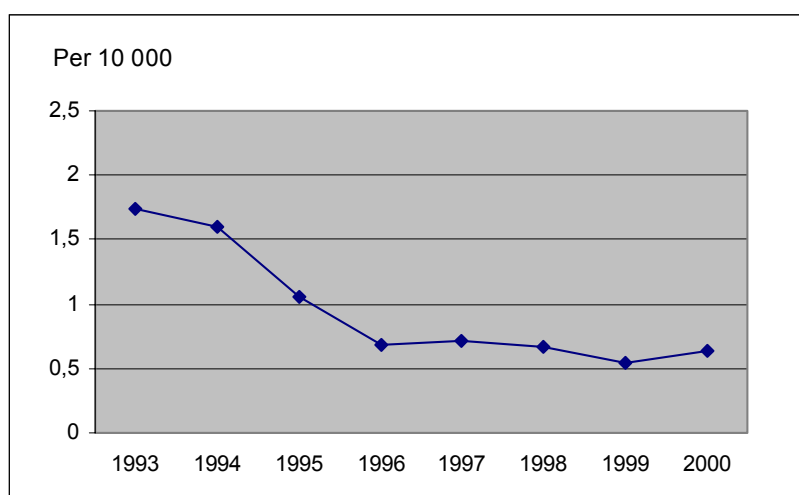
	1998	1999	2000
Congenital abnormalities	142	117	115
Complications during pregnancy and in the perinatal period	185	189	198
Prematurity and dysmaturity	20	18	17
RDS (Respiratory Distress Syndrome)	62	55	34
SIDS (cot death)	42	34	43
Other	46	52	84
Poorly defined	79	111	46
Total	576	576	537

5.8 Causes of death in children aged under 12 months in the Region of Flanders (stillbirths and infant mortality)

Source: *Health indicators, Ministry of the Flemish Community, Health Care Administration*



Cot deaths



5.9 Cot deaths in the Region of Flanders: number of deaths and number of deaths per 10 000 live births

Source: Health indicators, Ministry of the Flemish Community, Health Care Administration

4. Morbidity

In addition to mortality figures, figures for the incidence of diseases are an important indicator of the health of the population. In this section we present figures on a number of illnesses and abnormalities that are relevant to children.

4.1. Congenital abnormalities

Data on all children in Flanders are available only from obstetric records (SPE). In 2000, congenital abnormalities were identified in the perinatal period in 1.4% of all births. This percentage is 0.1% lower than in 1999. Table 5.10 gives a detailed picture of the incidence of congenital abnormalities.

Congenital abnormalities*

	Number	Per 100 births
Specific abnormalities		
Spina bifida	22	0.03

Anencephaly	1	<0.01
Hydrocephalus	21	0.03
Cleft lip/palate	69	0.11
Imperforate anus	12	0.02
Missing limbs	14	0.02
Diaphragmatic hernia	12	0.02
Umbilical hernia/gastroschisis	10	0.02

Abnormality of		
nervous and sensory system	31	0.05
gastro-intestinal tract	63	0.10
urogenital tract	137	0.22
heart and lungs	183	0.29
muscles and skeleton	134	0.22
craniofacial complex	44	0.07
multiple congenital abnormalities	50	0.08
Chromosomal abnormalities	79	0.13
Other	202	0.33

5.10 Congenital abnormalities recorded (perinatal period) in Flanders - 2000

Source: Study Centre for Perinatal Epidemiology (SPE)

* Congenital abnormalities identified in births in maternity hospitals (< 500 g)

In a number of children, the abnormality is only identified later. The Eurocat register records congenital abnormalities up to the age of 1 year. The Eurocat records cover the entire province of Antwerp (see Table 5.11).

Congenital abnormalities up to the age of 1 year*

System affected	per 10 000 births	
	1999	2000
Cardiovascular system	45.7	43.46
Limbs	41.2	42.33
Nervous system	18.1	25.40
of which		
neural tube	6.2	11.29
hydrocephalus	3.4	8.47
Digestive system, excluding pyloric stenosis	18.1	18.63
Pyloric stenosis	42.3	33.87
Internal urogenital system	23.1	19.76
External urogenital system	5.6	9.03
Cleft lip	5.6	7.34
Cleft palate	5.6	4.52
Umbilical hernia	1.7	2.82
Gastroschisis	1.7	1.13
Metabolic diseases	5.1	3.95
Chromosomal abnormalities	22.0	23.14
of which, Down's syndrome	12.4	11.85

5.11 Congenital abnormalities recorded up to the age of 1 year in the province of Antwerp.

Source: Eurocat, Provincial Institute of Hygiene, Antwerp

* Eurocat records all congenital abnormalities in neonates, whether born alive or stillborn, in children aged up to 1 year, in foetuses born after 20 weeks of pregnancy, and in abortions induced owing to an abnormality

4.2. Hearing loss*

Since the introduction of Algo hearing screening at Child and Family, reliable figures have been available on the incidence of hearing impairments in Flanders. A total of 54 850 children were tested, compared with 55 999 in 2000. 96 of the children tested who were born in 2001 were found to have a hearing impairment, that is 1.75 per 1000 children tested. The incidence in 2000 was 1.71 per 1000 children tested (see Table 5.12).

* Excluding children who were admitted to an NICU

Hearing loss

	2000		2001*	
	Unilateral	Bilateral	Unilateral	Bilateral
21-40 dB	11	5	6	4
41-70 dB	23	25	18	21
71-90 dB	5	7	3	9
91 dB or more	4	16	4	13
Hearing loss not yet precisely determined	0	0	11	7
Total	43	53	42	54

5.12 Young children in whom hearing loss was identified, expressed in decibels (dB); hearing loss in accordance with the scale of the Bureau International d'Audiophonologie

Source: *Child and Family*

* Provisional figures

4.3. Diseases and disorders

Information is now also available on diseases and disorders in children living in the Region of Flanders, thanks to the 1997 Health Survey, the first health survey carried out in Belgium.

The Health Survey enquired about diseases and disorders in a 12-month period. A number of diseases and disorders of relevance to children will be discussed in more detail below, namely asthma, chronic bronchitis, chronic non-specific respiratory disease and allergies.

9% of the children under 12 surveyed had suffered from one or more diseases or disorders in a 12-month period. The figure was lowest for children under 1 (<5%) (see Table 5.13).

Long-term diseases, disorders, disabilities

0 years	4.4
1 - 3 years	7.3
3 - 6 years	10.4
6 - 12 years	9.8
Total	8.9

5.13 Percentages of children aged under 12 in the Region of Flanders suffering from one or more long-term diseases, disorders or disabilities in a 12-month period

Source: *Health Survey 1997, Louis Pasteur Scientific Institute of Public Health - processing by Child and Family*

Asthma, chronic bronchitis and chronic non-specific respiratory disease

The 1997 Health Survey shows that in the Region of Flanders, in a 12-month period almost 4% of children under 12 had had asthma, chronic bronchitis or chronic non-specific respiratory disease. Respiratory tract disorders were most common in children aged under 12 months (9.4%) (see Table 5.14).

Asthma, chronic bronchitis, chronic non-specific respiratory disease

0 years	9.4
1 - 3 years	4.5
3 - 6 years	3.5
6 - 12 years	2.2

Total	3.6
-------	-----

5.14 Percentages of children aged under 12 with asthma, chronic bronchitis or chronic non-specific respiratory disease in the Region of Flanders in a 12-month period

Source: Health Survey 1997, Louis Pasteur Scientific Institute of Public Health - processing by Child and Family

Allergies

About 13% of children under 12 years of age suffered from an allergy in a 12-month period. There were virtually no cases of allergies in children under the age of 12 months (see Table 5.15).

Allergies

0 years	0.0
1 - 3 years	13.2
3 - 6 years	14.3
6 - 12 years	13.6

Total	12.6
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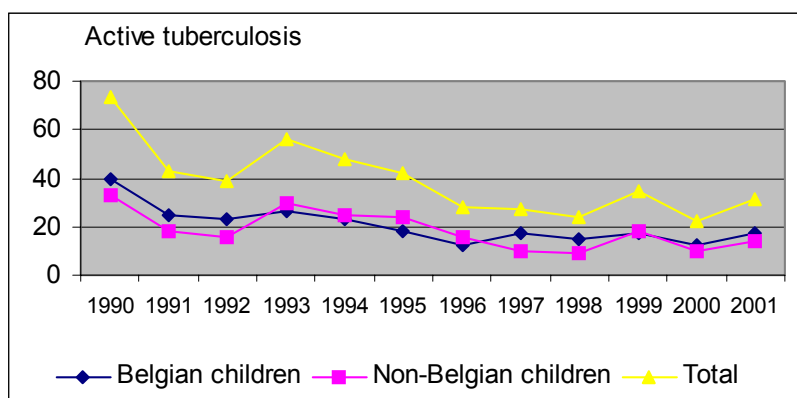
5.15 Percentages of children aged under 12 with allergies in the Region of Flanders in a 12-month period

Source: Health Survey 1997, Louis Pasteur Scientific Institute of Public Health - processing by Child and Family

Active tuberculosis

Active tuberculosis is not found only in developing countries. Children also suffer from tuberculosis in the industrialised countries of the West. In 2001, 31 new cases of tuberculosis were recorded in children under 15 in Flanders, 17 of them in Belgian children and 14 in non-Belgian children.

The number of new cases of active tuberculosis was noticeably higher than in 2000, when there were 22 new cases. Figure 5.16 shows the trend since 1990.



5.16 Number of new cases of tuberculosis in children aged under 15 in the Region of Flanders

Source: Flemish Association for Respiratory Health Care and Combating Tuberculosis (VRGT)

4.4. Hospital admissions

In a 12-month period, 13% of children aged under 12 were admitted to hospital, in most cases only once. For children aged 1-3, almost 1 child in 5 (Region of Flanders) was admitted to hospital in a 12-month period (see Table 5.17).

Hospital admissions

0 years	16.6
1 - 3 years	18.9
3 - 6 years	10.8
6 - 12 years	10.9

Total	13.0
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5.17 Percentages of children admitted to hospital once or more in the course of one year in the Region of Flanders

Source: Health Survey 1997, Louis Pasteur Scientific Institute of Public Health - processing by Child and Family

5. Accidents to children

Accident prevention is an important task for anybody involved in caring for young children.

As a starting point for preventive measures, data on the actual situation are indispensable.

We shall present a number of data on accidents to young children: the results of a large-scale survey of the parents of young children in Flanders carried out by Child and Family's district nurses; data on admissions to accident and emergency departments as the result of accidents in everyday life; and data on traffic accidents.

5.1. Accidents necessitating medical treatment

Data on accidents resulting in admission to hospital or death are systematically compiled via record systems, but this represents only the tip of the iceberg. A different method is required to chart less serious accidents.

A much fuller picture of accidents can be obtained with a *population survey*. In 1984-1985, a population survey of very young children was organised in Flanders for the first time by the then NWK [national child welfare service]. In 1999-2000, Child and Family conducted another population survey of accidents to young children.

In the survey, parents of children under 3 were asked on a monthly basis whether their child had had an accident in the past month. An accident is regarded as being any unintended, unforeseen event in which the sudden impact of an outside force inflicts a physical injury, for which a doctor is consulted, from this point on referred to as an accident necessitating medical treatment.

The survey shows how frequent accidents are among young children, what exactly is happening, in what circumstances, and the consequences.

In the case of children aged between 3 months and 3 years, in the course of a year over two children in ten were the victims of an accident for which a doctor was consulted. The *accident rate* was a little higher in boys than in girls, and varied according to age. Notably, the accident rate has remained virtually unchanged in comparison with 15 years ago, except in the 3-month to 1-year age group, in which the incidence rose from 0.09 to 0.17 (see Table 5.18).

Accident rate

	1984-1985	1999-2000
Boys (1)	0.27	0.25
Girls (1)	0.21	0.20
Total	0.24	0.22

3 months to 1 year	0.09	0.17
1-2 years	0.26	0.25
2-3 years	0.27	0.26
Total	0.24	0.22

5.18 Incidence of accidents necessitating medical treatment in children aged between 3 months and 3 years

Source: *Child and Family - Accident study*

(1) In 1984-1985, children aged 3-4 were also included

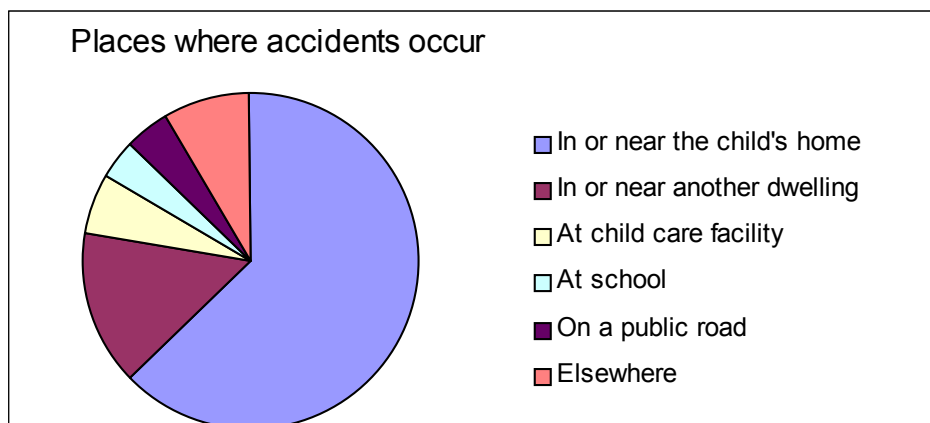
Most accidents happen in or near the child's own home or in or near another dwelling. In comparison with 1984-1985, there has been an increase in the percentage of accidents at child care facilities, which tallies with the increased use of formal child care (see Table 5.19 and Figure 5.20).

Places where accidents occur

	1984-1985	1999-2000
In or near the child's home	64.7	62.3
In or near another dwelling	16.0	15.0
At child care facility	1.8	5.7
At school	5.7	3.9
On a public road	6.6	4.4
Elsewhere	5.1	8.3
Not known	0.1	0.3
Total	100.0	100.0

5.19 Accidents necessitating medical treatment, to children aged between 3 months and 3 years, by the place where the accident occurred

Source: *Child and Family - Accident study*



5.20 Accidents necessitating medical treatment, to children aged between 3 months and 3 years, by the place where the accident occurred - 1999

Source: *Child and Family - Accident study*

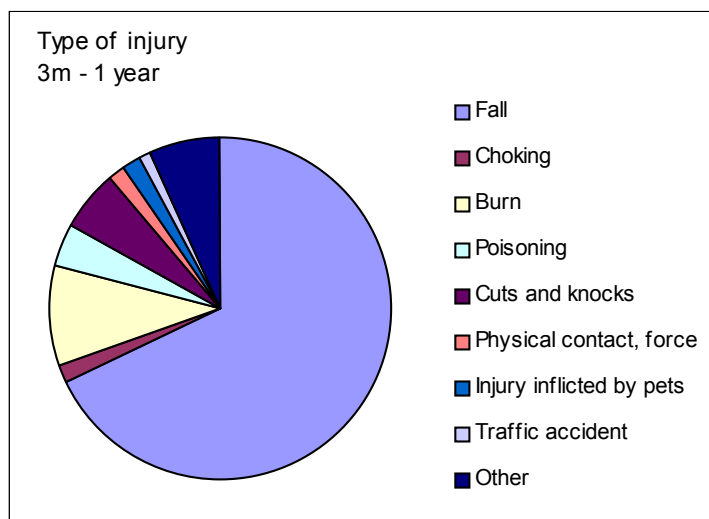
Falls are a common cause of accidents to young children (64.1%). Slightly more of the children aged under 12 months fall from a height; slightly more of the children aged 1-3 fall on the level. Cuts and knocks come in second place (8.7%) and trapping or jamming of a limb in third place (7.9%). These types of accidents increase as children get older. Burns and poisoning account for 5.8% and 3.7% of accidents respectively.

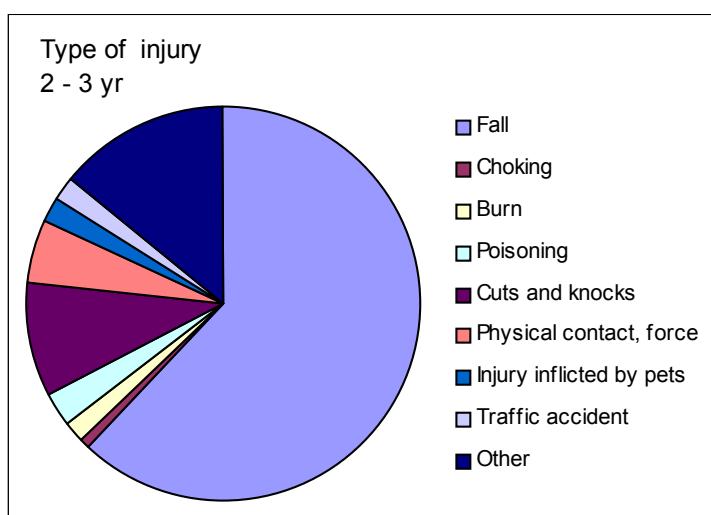
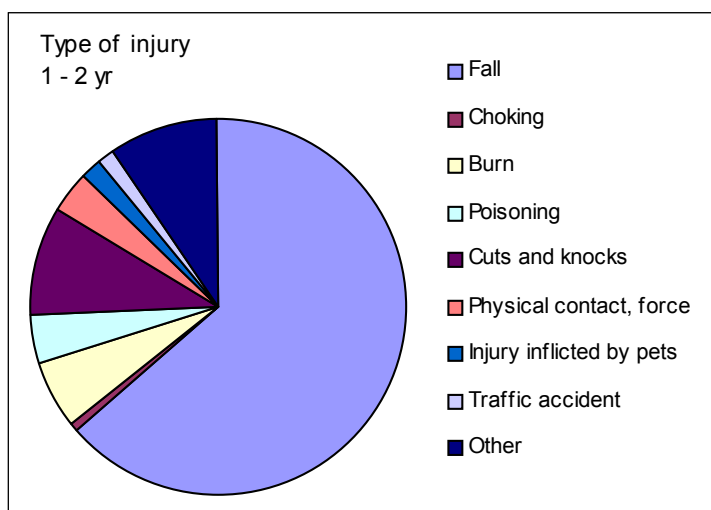
The incidence of these types of accidents, especially burns, decreases as children get older. Among children under the age of 12 months, burns account for almost 10% of accidents (see Table 5.21 and Figure 5.22).

Type of injury

	3 m - 1 yr	1-2 yr	2-3 yr	Total
Fall	67.9	63.4	61.9	64.1
On the level, tripping	27.0	29.3	33.2	29.7
On the stairs	6.9	8.8	6.7	7.8
From a higher to a lower floor	0.0	0.0	0.4	0.1
Fall from a height, other	34.0	25.3	21.6	26.5
Choking	1.6	0.6	0.7	0.9
Burn	9.6	5.8	1.8	5.8
Hot liquid or steam	4.6	2.3	0.7	2.5
Contact with hot/burning object	4.6	3.3	1.1	3.1
Corrosive substance	0.4	0.2	0.0	0.2
Poisoning	3.9	4.2	2.6	3.7
Cut, knock	6.1	9.5	9.6	8.7
Contact with sharp object	1.2	1.5	3.0	1.8
Contact with static object	1.5	3.6	3.7	3.1
Contact with falling/thrown object	1.9	2.7	2.2	2.4
Contact with moving object	1.5	1.7	0.7	1.4
Physical contact, force	1.6	3.6	5.2	3.6
Blow, knock or kick	0.8	0.2	0.7	0.5
Other physical contact	0.8	3.4	4.5	3.1
Injury inflicted by an animal	1.6	2.1	1.9	1.9
Traffic accident	1.2	1.3	1.9	1.4
Other	6.6	9.4	14.2	9.9
Trapping, jamming of a limb	5.4	7.5	11.2	7.9
Something in eye, ear, nose	1.2	1.1	3.0	1.6
Drowning, falling into water	0.0	0.8	0.0	0.4

5.21 Accidents necessitating medical treatment, to children aged between 3 months and 3 years, in 1999-2000, by type of injury and age
 Source: Child and Family - Accident study





5.22 Accidents necessitating medical treatment, to children aged between 3 months and 3 years, by type of injury and age - 1999
 Source: Child and Family - Accident study

The most common injuries sustained by young children in accidents are *open wounds* and *bruises* (see Table 5.23). In over half of the accidents the *GP* was consulted. The high percentage of children who were taken to an *accident and emergency department* is worthy of note: over four in ten children. 4.5% of accidents necessitated admission to hospital (see Table 5.24).

Injuries

Open wound (flesh wound)	40.8
Contusions (bruises, etc.)	27.2
Grazes	6.2
Broken bone	6.1
Burns	6.0
Sprain	3.7
Head injury (incl. concussion)	3.4
Dislocation	3.2
Internal injury (incl. poisoning, internal bleeding)	2.4
Other injury	2.3
Something in eye, ear, nose	1.5
Splinters in the skin	0.5

5.23 Accidents necessitating medical treatment among young children by injuries sustained - percentages (more than one answer possible)

Source: *Child and Family - Accident study*

Medical intervention

GP	54.2
Accident and emergency department	42.5
Other specialists	11.4
Paediatrician	10.4
Admission to hospital	4.5
Dentist	3.9
Poisons unit	2.1
First aid post	1.4

5.24 Accidents necessitating medical treatment among young children by type of medical intervention - percentages (more than one answer possible)

Source: *Child and Family - Accident study*

5.2. Accidents resulting in admission to an accident and emergency department

Belgium participates in the EHLASS records, records of accidents excluding traffic and industrial accidents. In 1999, the accident and emergency departments of two Flemish hospitals and one Brussels hospital took part in this. These records do not enable the incidence of accidents resulting in admission to an accident and emergency department to be determined.

The types of accident occurring most frequently are: fall from a height, fall on the level, blow or knock, and trapping. Over half the children aged under 1 who are admitted to an accident and emergency department have suffered a fall from a height. Children aged over 4 often suffer both falls on the level and falls from a height; blows and knocks are also quite frequent occurrences (see Table 5.25).

Types of accident

	under 1 year	1 to 4 years	5 to 14 years
Fall on the level	14.4	29.8	30.9
Fall from a height	56.0	21.7	15.3
Fall, not specified	0.0	4.1	2.7
Physical stress	2.4	1.4	4.1
Cut, penetrating object	1.6	3.9	4.3
Blow, knock	7.2	14.9	27.6
Trapping	2.4	8.6	6.2
Other mechanical cause	0.0	2.3	1.4
Foreign body	4.0	3.7	1.4
Poisoning	2.4	1.4	0.5
Hot liquid, steam	4.0	2.2	1.0
Hot object	1.6	1.1	0.1

5.25 Accidents resulting in admission to an accident and emergency department by the most important types of accident (Kingdom of Belgium - percentages) -1999

Source: *EHLASS, Annual Report, Belgium, 1999*

5.3. Traffic accidents

In 2000, 101 children under 5 were killed or seriously injured in a traffic accident in Belgium. This represents a fall of 17.2% compared with 1999. The number of children killed rose from 12 to 14; the number seriously injured fell from 110 to 87. The number of seriously injured pedestrians fell the most.

In the case of children aged 5-9 and 10-14, there was also a fall in the number of children killed and seriously injured, of 9.4% and 19.9% respectively. 211

children aged 5 to 9 were killed or seriously injured in accidents in 2000. 15 of the seriously injured children died. 301 children aged 10 to 14 were killed or seriously injured, of whom 23 were killed (see Table 5.26).

Traffic accident victims

Age	Pedestrian	Cyclist, moped driver, motorcyclist, car driver	Car passenger	Other	Total
0 - 4 years					
1999	44	2	64	12	122
2000	24	1	63	13	101
<i>of whom, died within 30 days</i>	4	0	7	3	14
5 - 9 years					
1999	66	42	116	9	233
2000	71	42	82	16	211
<i>of whom, died within 30 days</i>	6	1	5	3	15
10 - 14 years					
1999	71	164	103	38	376
2000	40	148	88	25	301
<i>of whom, died within 30 days</i>	3	8	8	4	23

5.26 Victims of traffic accidents - number of deaths within 30 days and serious injuries (= admission to hospital for more than 24 hours required) by ages under 15 and types of road user (Kingdom of Belgium)

Source: Belgian Road Safety Institute - NIS data

6. Child abuse

In 2001, the six confidential child abuse centres recorded a total of 5151 notifications of specific cases of abuse or neglect of minors. A total of 7112 minors were involved (see Table 5.27).

The number of notifications rose by 4.7% compared with 2000. Figure 5.28 shows the trend in notifications since 1995. This shows that the number of notifications in 2001 was still considerably lower than in 1999, a peak year.

In 2001, the number of children notified per 10 000 children was 56.2 (for the Region of Flanders). Figure 5.29 shows the trend per 10 000 children since 1995. This figure confirms the slight increase in the number of children notified since 1995.

The relative number of children notified per 10 000 children in 2001 varies from province to province. It is highest in the province of Antwerp (63.0 per 10 000) and lowest in the province of West Flanders (47.0 per 10 000) (see Table 5.30). The differences between provinces have narrowed since 2000.

In the urban centres in Antwerp, Flemish Brabant and Limburg, there was an increase in the number of notifications compared with 2000. In the urban centres in West and East Flanders there was a decrease.

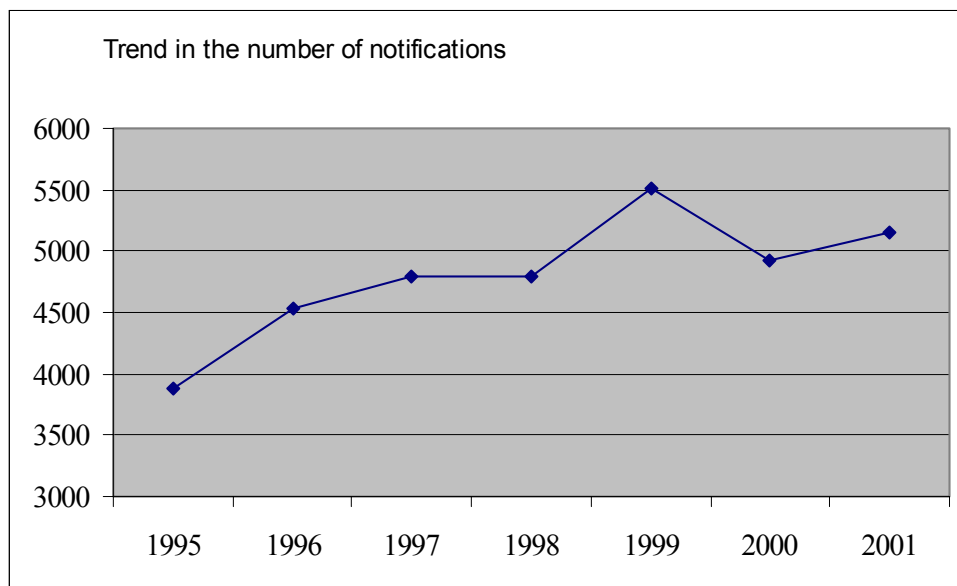
Notifications

	2000	2001*
Number of notifications	4 918	5 151
Number of children affected	6 917	7 112

5.27 Numbers of notifications of child abuse or neglect

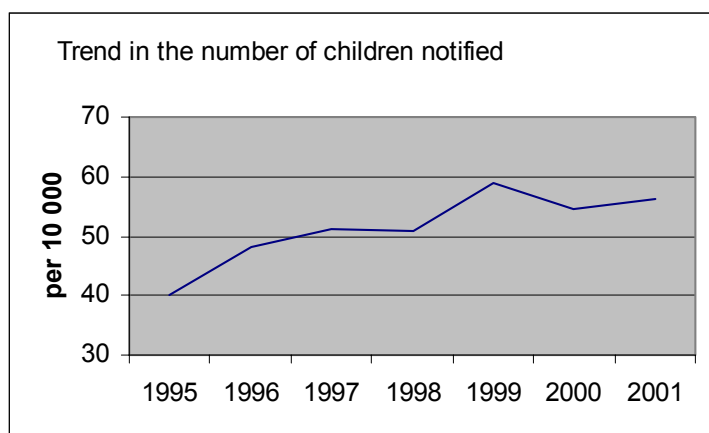
Source: *Child and Family - Records of the confidential child abuse centres*

* Provisional figures



5.28 Trend in the number of notifications of child abuse or neglect from 1995 onwards

Source: *Child and Family - Records of the confidential child abuse centres*



5.29 Child abuse: trend in the number of children notified per 10 000 children under the age of 18

Source: *Child and Family - Records of the confidential child abuse centres*

Number of children notified per 10 000 children

	2000	2001*
Antwerp	59.7	63.0
Flemish Brabant	52.6	53.4
West Flanders	49.8	47.0
East Flanders	63.1	60.9
Limburg	37.9	50.7
Region of Flanders	54.4	56.2

5.30 Child abuse: number of children notified per 10 000 children under the age of 18 in the Region of Flanders and by province

Source: *Child and Family - Records of the confidential child abuse centres*

* Provisional figures

In the case of 1987 children, or 27.9% of children notified, those notifying the abuse reported *physical abuse or neglect*. This represents an increase compared with 2000 in the number of children in respect of whom physical abuse or neglect was reported.

The number of children notified because of *sexual abuse* rose slightly: 1764 children compared with 1734 in 2000. For two out of three of these (allegedly) sexually abused children, the person reporting the case stated right away that the abuser was a member of the family (incest); one third involved abuse by someone outside the family or the relationship between the abuser and the victim was not known.

1228 children or 17.3% were reported on account of *emotional abuse or neglect*. Compared with the previous year, the number of children reported for emotional abuse or neglect fell by almost 7.6% (see Table 5.31).

45.4% of notifications came from the child's immediate family or close social circle. They included, in particular, notifications by: the mother figure (16.7% of the total number of notifications), other members of the immediate family or relatives (10.3%), neighbours or acquaintances (9.8%), the father figure (7.0%), and the victims themselves (1.3%).

51.8% of notifications came from professionals (16.8% from health-care workers, 8.8% from welfare organisations, and 19.2% from schools or pre-school facilities). 1.3% of notifications came from the perpetrator. In 1.5% of the cases notified, it is not known who reported them.

Problems notified

	2000		2001*	
	Number	%	Number	%
Physical abuse	1 105	16.0	1 194	16.8
Physical neglect	761	11.0	793	11.2
<i>Total physical abuse and neglect</i>	1 866	27.0	1 987	27.9
Emotional abuse	733	10.6	665	9.4
Emotional neglect	596	8.6	563	7.9
<i>Total emotional abuse and neglect</i>	1 329	19.2	1 228	17.3
Munchhausen's syndrome by proxy	21	0.3	27	0.4
Sexual abuse: incest	1 151	16.6	1 164	16.4
Sexual abuse: not incest, or not known whether incest is involved	583	8.4	600	8.4
<i>Total sexual abuse</i>	1 734	25.0	1 764	24.8
Child at risk of abuse/neglect	1 012	14.6	1 142	16.1
Problem unclear, person reporting not sure	536	7.7	525	7.4
Problems to do with working through earlier abuse/neglect	113	1.6	101	1.4
No abuse, other problem	306	4.4	338	4.8
Total	6 917	100.0	7 112	100.0

5.31 Child abuse: cases of child abuse notified by the most important problem notified

Source: *Child and Family - Records of the confidential child abuse centres*

* Provisional figures

7. The European context

7.1. Life expectancy at birth

With a life expectancy at birth of 75.7 years for men and 81.5 years for women, the Region of Flanders scores very highly. Only Sweden has a higher male life expectancy, and only Sweden and France have a higher female life expectancy (see Table 5.32).

Life expectancy at birth

	1990	1995	1997	1998	1999	2000
Males						
Region of Flanders	NA	74.6	75.5	75.1	75.1	75.7
Belgium	72.7	73.4	74.3	74.4		
Germany	72.0	73.3	74.0	74.1		
France	72.7	73.9	74.6	74.6		
United Kingdom	72.9	74.0	74.7	74.6		
Italy	73.6	74.9	74.9			
The Netherlands	73.8	74.6	75.2	75.1		
Sweden	74.8	76.2	76.7	76.7		
Females						
Region of Flanders	NA	80.8	81.5	80.5	81.0	81.5
Belgium	79.4	80.2	80.6	80.5		
Germany	78.4	79.7	80.3	80.4		
France	80.9	81.9	82.2	82.2		
United Kingdom	78.5	79.2	79.5	79.6		
Italy	80.1	81.3	81.3			
The Netherlands	80.9	80.4	80.5	80.5		
Sweden	80.4	81.4	81.8	81.9		

5.32 Male and female life expectancy at birth from 1990 onwards in certain European countries

Sources: Eurostat, Key data on health 2000

Eurostat, Demographic statistics, Data 1960-99

Health indicators, Ministry of the Flemish Community, Health Care Administration

NA: not available

7.2. Caesareans

With around 169 Caesareans per 1000 live births, Flanders is in the middle of the range. The Netherlands and Sweden have a much lower proportion of Caesareans. Germany, France and the United Kingdom have similar figures to Flanders. In Italy, the proportion of Caesareans is much higher at 264 per 1000 live births (see Table 5.33).

Caesareans

	1990	1995	1996	1997	1998	1999	2000
Flanders*	97.8	142.9	146.9	153.0	157.2	162.5	169.6
Belgium	104.5						
Germany	157.0	172.4	176.1	181.4			
France	126.9	158.0					
United Kingdom	112.8**	NA	141.5				
Italy	207.9	NA	NA	264.1			
The Netherlands	74.1	96.5	100.6	103.9			
Sweden	107.9	120.0	117.3				

5.33 Number of Caesareans per 1000 live births in certain European countries

Sources: Study Centre for Perinatal Epidemiology

Eurostat, Key data on health 2000

* Figures for the Region of Flanders and a Dutch-speaking maternity hospital in Brussels

** 1991 figures

NA: not available

7.3. Mortality

Infant mortality in the Region of Flanders has fallen considerably since 1990. The Region of Flanders now has a good score for infant mortality, on a par with other European countries. Only Sweden does noticeably better (see Table 5.34). The Region of Flanders is also on a par with countries with good results in

respect of *perinatal mortality figures*, or infant deaths within the first seven days of life in combination with stillbirth figures (see Table 5.35).

Infant mortality

	1990	1995	1997	1998	1999	2000
Region of Flanders	8.6	5.9	4.9	5.1	4.8	4.7
Belgium	6.6	5.8	5.4	5.2	5.3	
Germany	7.1	5.3	4.9	4.6		
France	7.4	4.9	4.7	5.2	4.8	
United Kingdom	8.0	6.2	5.9	5.7	5.8	
Italy	8.2	6.2	5.6	5.5	5.2	
The Netherlands	7.1	5.4	5.0	5.2	5.2	
Sweden	6.0	4.1	3.6	3.5	3.4	

5.34 Infant mortality: number of deaths of children aged under 12 months per 1000 live births from 1990 onwards in certain European countries

Sources: Council of Europe, *Recent demographic developments in Europe 2000*
Health indicators, Ministry of the Flemish Community, Health Care Administration
Ministry of the Flemish Community, *Births, perinatal mortality and infant mortality, 1990-1992*

Perinatal mortality*

	1990	1995	1996	1997	1998	1999	2000
Region of Flanders	8.4	7.7	7.0	7.2	6.3	6.7	6.1
Belgium	8.9	7.2					
Germany	6.3	6.8	6.8	6.5			
France	8.3	7.4	7.4				
United Kingdom	8.1	NA	8.7				
Italy	10.5	7.1					
The Netherlands	9.6	8.0	8.4	7.9			
Sweden	6.5	5.5	NA	5.4			

5.35 Perinatal mortality figures per 1000 live births from 1990 onwards in certain European countries

Sources: Eurostat, *Key data on health 2000*

NIS, *Population statistics*

Health indicators, Ministry of the Flemish Community, Health Care Administration
* per 1000 live births

NA: not available

7.4. Cot deaths

The most recent survey available dates from 1996 (see Table 5.36).

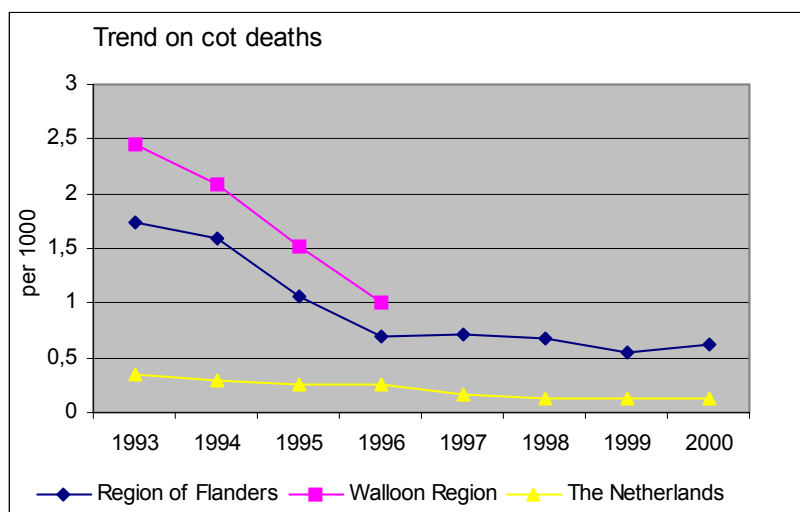
The number of cases of cot death has fallen considerably since 1993 in both the Region of Flanders and the Walloon Region. However, the number of cases is still considerably higher than in the Netherlands (see Figure 5.37).

Cot deaths

Region of Flanders	0.69
Germany	0.87
France	0.61
United Kingdom	0.61
Italy	0.10
The Netherlands	0.17
Sweden	0.35

5.36 Number of cases of cot death per 1000 live births in certain European countries in 1996

Source: Eurostat, *Key data on health 2000*



5.37 Number of cases of cot death per 1000 live births from 1993 onwards

Sources: Ministry of the Flemish Community, Health indicators

Ministère de la Communauté Française

Central Bureau of Statistics, the Netherlands

7.5. Congenital abnormalities

A number of countries keep Eurocat records of congenital abnormalities up to 1 year.

Table 5.38 compares the data from the Antwerp register with the data from all Eurocat registers that operate fully in accordance with Eurocat guidelines. There are 16 registers.

Differences are found for disorders of the digestive system and chromosomal abnormalities. There is a significantly higher incidence of pyloric stenosis in Antwerp than in the other regions that keep records. There are also slightly more abnormalities of the nervous system and of the limbs and slightly fewer abnormalities of the external genitalia.

Congenital abnormalities up to the age of 1 year

	Antwerp 2000	Eurocat average for 1990-96
Cardiovascular system	43.46	55.0
Limbs	42.33	40.3
Nervous system	25.40	19.1
of which		
neural tube	11.29	8.5
hydrocephalus	8.47	4.7
Digestive system, excluding pyloric stenosis	18.63	12.3
Pyloric stenosis	33.87	4.9*
Internal urogenital system	19.76	27.3
External urogenital system	9.03	12.4
Cleft lip	7.34	8.6
Cleft palate	4.52	5.6
Umbilical hernia	2.82	2.1
Gastroschisis	1.13	1.2
Metabolic disorders	3.95	**
Chromosomal abnormalities	23.14	26.6
of which, Down's syndrome	11.85	15.7

5.38 Congenital abnormalities recorded up to the age of 1 year in the Eurocat registers

Source: Eurocat, Provincial Institute of Hygiene, Antwerp

* *Pyloric stenosis is not recorded in all Eurocat registers*

** *Antwerp is the only Eurocat register that records metabolic disorders*

7.6. Deaths caused by accidents

Both the number of deaths caused by accidents and the number of deaths caused by traffic accidents are on the high side in Belgium. Only Germany and France have even higher figures for deaths among 1- to 4-year-olds caused by accidents (see Tables 5.39 and 5.40).

Deaths caused by accidents

	1- to 4-year-olds	5- to 9-year-olds	10- to 14-year-olds
Belgium	9.8	8.1	9.6
Germany	11.1	7.1	7.3
France	12.0	7.3	8.4
United Kingdom	7.3	4.6	6.4
Italy	5.9	4.7	7.6
The Netherlands	8.4	5.0	6.6
Sweden	5.6	4.5	5.5

5.39 Number of deaths caused by accidents per 100 000 children in certain European countries in the period 1991-1995, by age

Source: *UNICEF, Child deaths by injury in rich nations, INNOCENTI Report Card, 2001*

Deaths caused by traffic accidents

Belgium	4.3
Germany	3.6
France	3.8
United Kingdom	2.9
Italy	3.3
The Netherlands	3.4
Sweden	2.5

5.40 Number of deaths caused by traffic accidents per 100 000 children aged 1 to 14 in certain European countries in the period 1991-1995

Source: *UNICEF, Child deaths by injury in rich nations, INNOCENTI Report Card, 2001*

Ch. 6.

A SAFE AND HEALTHY LIFE?

The way in which people live plays a large part in determining how healthy they are, and this applies from a very early age. Examples of this for the young child are breast-feeding, nutrition, vaccination, use of therapeutic drugs, passive smoking and safe sleeping habits.

1. Breast-feeding and bottle-feeding in the first months of life

Breast-feeding is, without a doubt, the healthiest and most natural way of feeding a baby. The benefits for the health of mother and child are abundantly clear. In addition to the fact that breast-feeding has greater biological value and breast milk is more easily digested, breast-feeding also protects children against infections, offers protection against childhood illnesses for longer, and helps to prevent allergies.

In our society, mothers do not breast-feed as a matter of course. There are practical drawbacks, etc.

In Flanders, 65.5% of newborn babies are breast-fed as their *first food*. This represents an increase of 2.5% compared with 2000.

The percentage of babies who are breast-fed varies according to *province*. The percentage is highest in Flemish Brabant: 7 out of 10 babies are breast-fed from birth. In the province of West Flanders, the percentage is quite a lot lower, at only 55.3%. It is also lower in the province of East Flanders (63.5%). In the provinces of Antwerp and Limburg, 69.1% and 68.7% of newborn babies are breast-fed. There has been an increase in all provinces (see Table 6.1).

More babies of *non-Belgian origin* than babies of Belgian origin are breast-fed: 84.7% compared with 61.8%.

The percentage of babies who are initially breast-fed is higher for *first-borns* than for subsequent babies. 69.1% of first-borns are breast-fed; for subsequent babies the figure is 62.6% (see Table 6.2).

Breast-feeding

	2000	2001
	%	%
Antwerp	66.8	69.1
Flemish Brabant	68.4	70.3
West Flanders	52.4	55.3
East Flanders	61.4	63.5
Limburg	65.4	68.7
Region of Flanders	63.0	65.5

6.1 Percentages of babies initially breast-fed by province
Source: *Child and Family - IKAROS*

Breast-feeding by subgroups

Babies of Belgian origin	61.8
Babies of non-Belgian origin*	84.7
First-borns	69.1
Second or later babies	62.6
Total	65.5

6.2 Percentage of babies initially breast-fed, by origin and position in the family - Region of Flanders - 2001

Source: *Child and Family - IKAROS*

* Babies whose mother did not have Belgian nationality when she was born.

Optimising the feeding of infants is an important consideration for Child and Family. Research into feeding practices is essential if programmes to optimise infant feeding are to succeed. Child and Family launched a scientific study at the end of 2001. Until this has been completed, the only information available is from some limited studies.

A study* conducted in Hasselt in 1997 found that of all *bottle-feeding* from birth to the age of 2 months, partially hydrolysed milks accounted for about 16%, soya-based feeds for 9.5% and extensively hydrolysed milks for 4.5%.

It emerged that many mothers change their baby's food: at the age of 2 months only 34% were still getting the same food as at birth; 33% had changed once, 19% twice and 13% at least three times. 11% of all the changes involved switching from one whey-based formula to another.

* Source: M. Raes, *Dienst Kinder- en Jeugdgeneeskunde, Virga Jesseziekenhuis* [Paediatric Health Department, Virga Jesse Hospital], Hasselt

2. Healthy nutrition after the first year of life?

What are the eating habits of young children? Healthy eating habits are measured on the basis of the incidence of breakfasting and eating hot meals, and on the basis of consumption of food products such as meat, fish, vegetables, fresh fruit, milk, brown bread and fat, and the non-consumption of snacks and sugary drinks.

In the case of almost 1 child in 10 from the age of 3 upwards, *breakfast every day* is not the norm. From the age of 6 especially, a substantial number of children never or very rarely eat breakfast (see Table 6.3).

Breakfast

	1 - 3 years	3 - 6 years	6 - 12 years
Less than once or twice a week	1.5	0.0	5.6
1 - 2 times a week	0.5	1.8	5.0
3 - 5 times a week	0.5	8.5	3.3
6 - 7 times a week	97.5	89.7	86.1
Total	100.0	100.0	100.0

6.3 Children aged between 1 and 12 by the number of times a week they eat breakfast

Source: Health Survey 1997, Louis Pasteur Scientific Institute of Public Health - processing by Child and Family

Over 9 out of 10 children aged 1-3 and 6-12 eat a *hot meal* with vegetables every day or nearly every day. This percentage is lower (80%) for children aged 3-6 (see Table 6.4).

Hot meal

	1 - 3 years	3 - 6 years	6 - 12 years
Less than once or twice a week	1.5	1.5	0.3
1 - 2 times a week	0.6	0.5	0.4
3 - 5 times a week	5.4	17.3	7.0
6 - 7 times a week	92.6	80.7	92.3
Total	100.0	100.0	100.0

6.4 Children aged between 1 and 12 by the number of hot meals with vegetables eaten each week

Source: Health Survey 1997, Louis Pasteur Scientific Institute of Public Health - processing by Child and Family

Table 6.5 shows the consumption of a number of food products.

The consumption of *vegetables and fresh fruit* could certainly be improved. Many children aged 3-6 and 6-12 do not eat fresh fruit every day (25% and 31% respectively). Many children aged over 3 eat fewer than 2 portions of vegetables or fresh fruit a day (almost 50%).

There are different guidelines on *milk* consumption according to whether the children are very young or rather older: full-cream milk is recommended for children under 5, and semi-skimmed milk for children over 5. Daily consumption by 52% of children aged 1-3 of milk with a reduced fat content is unhealthy; nor does the consumption by 30% of children aged 6-12 of full-cream milk accord with the guidelines on healthy nutrition.

The consumption of *brown bread* should certainly be increased. Around half the children still usually eat white bread.

Fat should not be restricted in the diets of children under 5. Sandwiches should be spread with margarine (not butter) and meals should be prepared with margarine or oil. Table 6.5 shows that from this point of view, the nutrition of many children aged 1-3 can be described as unhealthy: no fat is used in sandwiches (55.1%), or butter is used (14.7%). With regard to cooking, it appears that only in the case of a limited number of children is no fat added

(5.5%), but in the case of a rather larger number of children (11.5%), butter is used.

There is very heavy consumption of *snacks and sugary drinks*: 60% of children aged 1-3 consume these every day, and the figure is actually around 90% for older children.

Nutrition

	1 - 3 years	3 - 6 years	6 - 12 years
Consumption of meat or poultry			
Less than once a week	1.4	0.0	0.0
At least once a week	20.3	23.7	9.9
(Almost) every day	78.3	76.3	90.1
Consumption of fish			
Less than once a week	47.9	20.5	29.8
At least once a week	52.1	79.5	69.9
(Almost) every day	0.0	0.0	0.3
Consumption of fresh fruit			
Less than once a week	4.7	7.1	7.0
At least once a week	11.7	18.1	24.1
(Almost) every day	83.6	74.8	68.9
Consumption of vegetables or fresh fruit			
Fewer than 2 portions a day	27.5	48.8	49.9
2 portions or more a day	72.5	51.2	50.1
Consumption of dairy products with a reduced fat content			
Less than once a week	40.0	36.7	32.7
At least once a week	8.2	7.6	11.2
(Almost) every day	51.9	55.7	56.0
Consumption of full-cream dairy products			
Less than once a week	63.7	57.5	60.7
At least once a week	4.3	3.0	9.7
(Almost) every day	32.0	39.5	29.6
Consumption of bread			
Usually white bread	44.8	51.6	42.6
Usually brown bread	55.2	48.4	57.5
Use of fat on bread			
None	55.1	24.3	30.7
Butter	14.7	20.9	21.9
Margarine	21.7	33.5	24.8
Diet margarine	8.5	18.0	21.4
Other	0.0	3.2	1.3
Use of fat in cooking			
None	5.5	0.0	0.8
Butter	11.5	17.4	12.4
Margarine	57.4	52.5	57.9
Oil	18.7	20.3	14.5
Other	0.0	0.0	0.6
Butter and margarine	4.3	4.7	2.1
Margarine and oil	2.6	3.9	6.7
Diet product	0.0	1.2	5.0
Consumption of snacks or sugary drinks			
Less than once a week	22.6	2.8	1.5
At least once a week	17.8	6.6	10.0
(Almost) every day	59.6	90.7	88.5

6.5 Children aged between 1 and 12 by the consumption of a number of food products

Source: Health Survey 1997, Louis Pasteur Scientific Institute of Public Health - processing by Child and Family

3. Safe sleeping habits

The risk of cot death (see also Chapter 5, section 3.2) can be greatly reduced by taking a few very simple precautions. The first point is the baby's sleeping position. It is recommended that babies should always be put down to sleep on

their backs. Temperature is another important point to consider, with recommendations on the ideal temperature for the room in which the baby sleeps and on clothing and bedding (parents are advised against using duvets and pillows). Parents are also advised to have the baby sleep where they can keep an eye on him. Smoking is another important consideration (see also section 7). These recommendations are already being observed to quite a large extent in Flanders and there has been a considerable improvement since 1994, the year when Child and Family started to give systematic advice about "safe sleeping habits".

By the autumn of 2000, 61% of babies under the age of 10 months always slept on their backs. However, sleeping on the side is still quite common for babies under 3 months. Almost 78% of mothers with a baby under the age of 10 months follow the advice not to use duvets. The temperature of the room in which the baby sleeps is still not good, with over half of the babies still sleeping in a room that is too warm. The advice to put babies down to sleep in the living room in the daytime is followed by over 55%. At night parents still prefer to put the baby in his own bedroom, whereas the recommendation is that they should sleep in the parents' bedroom (see Table 6.6).

Sleeping situation

	1994	1995	2000
Sleeping position			
Always on back	29.6	45.1	61.2
Always on side	26.8	23.7	10.0
Always on tummy	20.7	9.0	4.3
Other	22.9	22.1	24.5
Use of duvet at night			
Never use a duvet	30.8	45.0	77.9
Use of pillow			
Never use a pillow	87.6	90.5	91.6
Temperature of room baby sleeps in during the day			
Below ideal temperature	8.6	7.6	3.2
Ideal temperature	40.8	44.5	45.4
Above ideal temperature	50.6	47.9	51.4
Place where baby sleeps during the day			
Living room	48.6	52.0	55.9
Own bedroom	38.0	36.8	33.5
Place where baby sleeps at night			
Own bedroom	59.7	59.7	64.6
Parents' bedroom	28.2	28.4	29.8
Other	12.2	11.9	5.7
Supervision			
Parent always checks if baby cries hard	69.5	73.8	73.3
Smoking			
Someone in the house smokes	NA	NA	14.6
Someone in the house smokes in the child's presence	NA	NA	7.5

6.6 Sleeping situation of babies under 10 months (first-borns only)

Source: Child and Family - surveys of the sleeping situation of babies, 1994, 1995 and 2000

NA: not available

4. Do children get enough sleep?

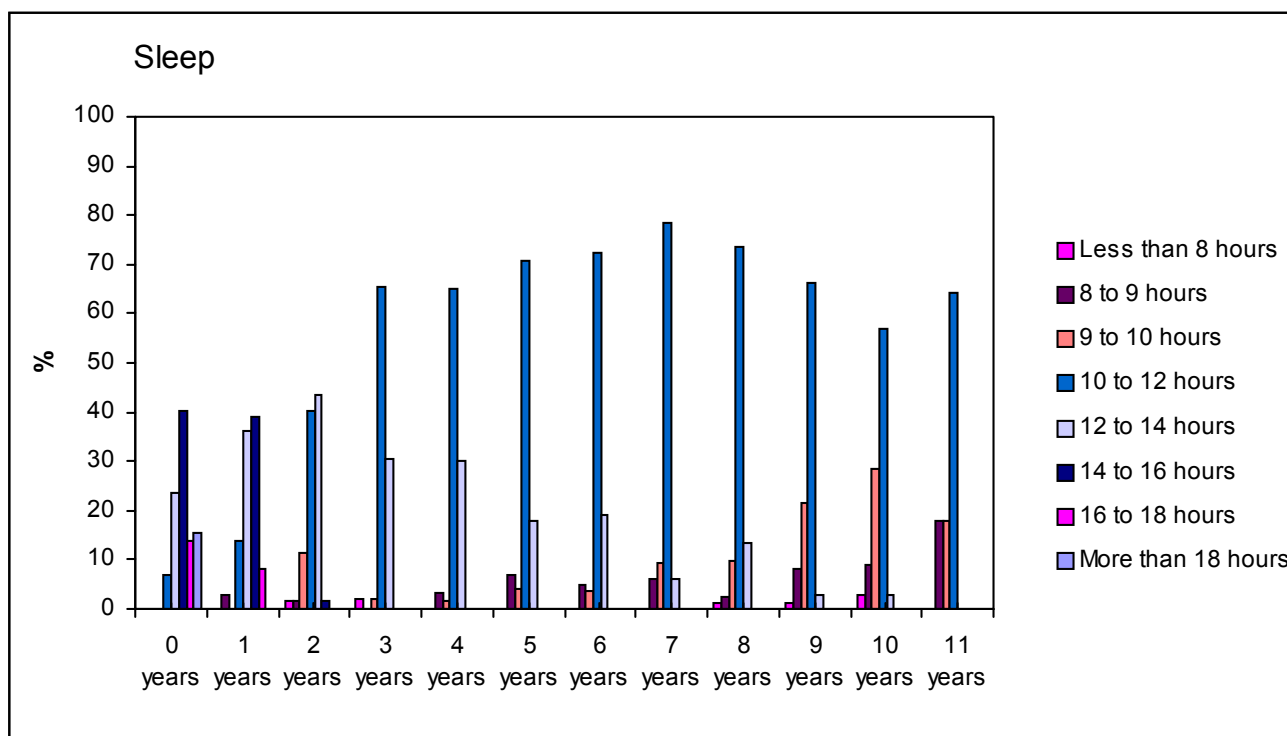
As children grow up, they sleep for fewer hours. In the first year of life most babies sleep for 14 to 16 hours.

In the second year of life most children sleep for 12 to 16 hours. From the age of 3, the majority of children sleep for between 10 and 12 hours (see Figure 6.7).

Children under the age of 12 months need more than 14 hours' sleep*. Almost 31% of children under the age of 1 are sleeping for less than 14 hours. Children aged between 1 and 2 need 13 hours' sleep or more. Almost 17% of children of this age group are sleeping for less than 12 hours. Children aged between 3 and 9 years need between 12 (at 3 years) and 10 (at 9 years) hours' sleep. The

number of children in this age group getting less than 10 hours' sleep is 4% of the three-year-olds, increasing to 13.3% of the eight-year-olds and 31.1% of the nine-year-olds. At the age of 10 to 12, children need about 9½ to 9¾ hours.

* *Sleep requirements in childhood. Nelson Textbook of Pediatrics, 15th edition*



6.7 Children aged under 12: number of hours' sleep per child per day, by age (percentages)

Source: *Panel Study of Belgian Households - year of observation 1999. Processed on behalf of Child and Family*

5. Vaccination rates

Vaccination is one of the most important and successful instruments of protection against childhood diseases.

The generally available programme of vaccination for young children in Flanders includes vaccination against poliomyelitis, diphtheria/tetanus/whooping cough (DTP), Haemophilus influenzae type B, hepatitis B, and measles/mumps/rubella.

In Flanders, the vaccination policy is implemented by various bodies, but as yet there are no full central records of the vaccines administered.

However, in 1999 the vaccination rate was established using a survey based on a random sample. A sample study has revealed the vaccination rate among children aged 18 to 24 months in Flanders.

The rate of vaccination against polio is good, as is that against DTP, except for the repeat vaccination (DTP4). The rates are too low in the case of vaccination against HiB, hepatitis B and measles/mumps/rubella (see Table 6.8).

If we are to contribute effectively to eradicating infectious diseases, the following vaccination rates must be achieved in the population: 80-86% for polio, 80-85% for diphtheria, 92-95% for whooping cough, 95% for Haemophilus influenzae type B, 92-95% for measles, 90-92% for mumps and 85-87% for rubella (WHO).

Vaccination rates*

Poliomyelitis	
Polio 1	99.2
Polio 2	98.9

Polio 3 96.2

Diphtheria/tetanus/whooping cough	
DTP 1	95.7
DTP 2	95.4
DTP 3	94.5
DTP 4	89.2

Haemophilus influenzae type B	
HiB 1	85.5
HiB 2	84.4
HiB 3	82.6
HiB 4	73.9

Hepatitis B	
Hep 1	74.2
Hep 2	73.4
Hep 3	68.4
Hep 4	15.1

Measles/mumps/rubella	
MMR	83.4

6.8 Vaccination rates in children aged 18 to 24 months in Flanders - 1999

Source: Vaccination rates in Flanders, VUB - UIA

* per 100 children

6. Use of therapeutic drugs

Generally speaking, the use of therapeutic drugs has increased steadily in Belgium since 1980.

Considerable use is also made of therapeutic drugs for young children. Around 23% of children (Region of Flanders) took *prescribed medication* in the 2-week period surveyed. This percentage falls as the child grows up, from 32% of children under 12 months to 18% of children aged 6-12 (see Table 6.9).

Use of therapeutic drugs

0 years	32.3
1 - 3 years	27.3
3 - 6 years	23.1
6 - 12 years	18.4

Total	22.6
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6.9 Percentages of children taking prescribed medication in a 2-week period - Region of Flanders

Source: Health Survey 1997, Louis Pasteur Scientific Institute of Public Health - processing by Child and Family

7. A smoke-free environment for the young child?

The detrimental consequences of active smoking for public health are well known. Various surveys have also shown the risks of passive exposure to tobacco smoke. These are an increased risk of lung cancer, irritation of the mucous membranes of the eyes and the bronchial tubes, with coughing and asthma as symptoms, and, although this is less clear, an influence on cardiovascular disorders. For young children, there is also an increased risk of cot death and more obvious effects on respiration.

7.1. Smoking in the presence of babies under the age of 10 months

A random sample of 2000 families with a first-born child under the age of 10 months was surveyed in December 2000. The survey found that 7.5% of the children were exposed to smoke in their own homes. In 5.6% of the cases the parents

smoked; in 1.9% only visitors smoked. 12.3% of the babies aged under 10 months were exposed to smoke outside the home (see Table 6.10).

Fathers smoke in the presence of their child rather more often than mothers (see Table 6.11).

Children with a "young" mother - younger than 25 - are more likely to be exposed to smoke. There is also a trend towards more frequent passive smoking among very young children if the mother followed a course of technical or vocational education.

It certainly cannot be assumed from this that only a very limited number of fathers and mothers of very young children are active smokers.

The same questionnaire also asked whether anyone in the home smokes and who. Around 7.7% of mothers and 10.3% of fathers smoke in the home (see Tables 6.12 and 6.13).

Passive smoking

Yes, through parents who smoke, whether or not combined with visitors who smoke and other smokers outside the home	5.6
Yes, only through visitors who smoke, whether or not combined with other smokers outside the home	1.9
Yes, only exposed to others smoking outside the home	12.3
No	80.3
<hr/>	
Total	100.0

6.10 Percentage of children under the age of 10 months exposed to passive smoking (only first-borns) in the Region of Flanders - 2000

Source: *Child and Family, The sleeping situation of babies in Flanders, 2000*

Passive smoking: who smokes?

Only mother	0.4
Only father	1.3
Mother and father	1.3
Mother and someone else	0.5
Father and someone else	0.8
Mother, father and someone else	1.1
<hr/>	
Total smoking mothers	3.3
Total smoking fathers	4.5
<hr/>	
Only other residents in the home	0.4
Only visitors and other residents in the home	1.9
Only visitors or other persons in the home	1.9
Only others outside the home	12.3

6.11 Who smokes in the presence of the very young child? - percentage of the total group of children (first-born babies under the age of 10 months) - 2000

Source: *Child and Family, The sleeping situation of babies in Flanders, 2000*

Smoking in the home

Yes	14.6
No	85.4
<hr/>	
Total	100.0

6.12 Percentage of babies under the age of 10 months who live in a home where someone smokes (only first-borns) - 2000

Source: *Child and Family, The sleeping situation of babies in Flanders, 2000*

Smoking in the home: who smokes?

Only mother	1.6
Only father	4.4
Mother and father	4.3
Mother and someone else	0.6
Father and someone else	0.4
Mother, father and someone else	1.2

Total smoking mothers	7.7
Total smoking fathers	10.3

Only other residents in the home	0.4
Visitors or other persons in the home	1.8

6.13 Percentage of babies under the age of 10 months who live in a home where someone smokes (only first-borns) - 2000

Source: *Child and Family, The sleeping situation of babies in Flanders, 2000*

7.2. Smoking patterns of parents of children aged up to 12 years

Data from the Panel Study of Belgian Households show that the situation is worse for children aged up to 12 years than it is for babies under the age of 10 months. Over 20% of children under the age of 12 have a mother who smokes every day and over 1 in 3 have a father who smokes every day. Table 6.14 shows that about 15% of mothers and about 18% of father have stopped smoking.

Smoking patterns of parents

	Children aged under 3	Children aged 3-6	Children aged 7-12	Total
Mother				
Smokes every day	16.3	19.6	25.3	21.7
Smokes occasionally	6.7	11.7	7.4	8.7
Does not smoke but used to smoke	16.3	15.0	14.9	15.2
Does not smoke and has never smoked	60.7	53.8	52.4	54.4
Total	100.0	100.0	100.0	100.0
Father				
Smokes every day	36.2	33.6	37.5	36.0
Smokes occasionally	5.5	5.4	3.5	4.5
Does not smoke but used to smoke	15.0	22.0	17.4	18.4
Does not smoke and has never smoked	43.3	39.0	41.6	41.1
Total	100.0	100.0	100.0	100.0

6.14 Children under the age of 12: smoking patterns of mother and father

Source: *Panel Study of Belgian Households - year of observation 1999, processed on behalf of Child and Family*

8. The European context

8.1. Breast-feeding

Although breast-feeding has increased, Flanders is certainly not leading the field. The percentage of babies who are breast-fed as their first food is higher in the French Community and in the Netherlands. It is lower in the UK (England and Wales) (see Table 6.15). For the Netherlands, data are also available on the duration of breast-feeding. 57.3% of babies are still being breast-fed at 6 weeks, 45.4% at 3 months and 24.0% at 6 months (period 1998-2000).

According to a WHO report, the incidence of breast-feeding is much higher in the Scandinavian countries. In Sweden, 90% of babies are still being breast-fed at the age of 3 months; and at the age of 6 months it is still over 60%.

Breast-feeding

	1990	1995	1999	2000	2001
Region of Flanders	NA	NA	62.0	63.0	65.5
French Community	63.8*	68.5	71.6	73.0	
The Netherlands	70.3	69.1	69.4	69.4	
England and Wales		62.0			
Scotland		41.0			

6.15 Percentage of babies who are initially breast-fed in certain European countries

Sources: *Child and Family - IKAROS*

ONE, Banque de Données Médico-Sociales, report 2000

Central Bureau of Statistics, Statline, the Netherlands

BMJ Bookshop.com (United Kingdom)

* 1991 figures

NA: not available

8.2. Vaccination rates

Rates of vaccination against polio and DTP are good in most European countries. In the Region of Flanders and in Germany, vaccination rates for HiB are lower than for DTP. There are quite wide variations with respect to measles. The Region of Flanders, Germany, the United Kingdom and especially Italy score low. In France, the Netherlands and Sweden, the rates of vaccination against measles are the same as for polio and DTP (see Table 6.16).

Vaccination rates

	Polio 3	DTP 3	HiB 3	Measles
Region of Flanders (1999)	96.3	94.5	82.6	83.4
Germany (2000)	95	97	79	89
France (1999)	97	96	NA	97
United Kingdom (2000)	92	92	92	88
Italy (1999)	97	95	NA	70
The Netherlands (1999)	97	97	96	96
Sweden (2000)	99	99	98	98

6.16 Percentages of children who have had polio 3, DTP3, HiB 3 or measles vaccines

Sources: *Vaccination rates in Flanders, VUB - UIA*

UNICEF, Country Statistics, 1999

WHO, Vaccines and Biologicals, Global 2001 Summary Country Profile

NA: not available