

THE CHILD IN FLANDERS

CH 1. 2004: BABY BOOM OR REVERSAL OF THE DOWNWARD TREND?

- 1. Number of births**
- 2. Number of births to women registered as asylum seekers**
- 3. Newcomers and leavers: immigrants, emigrants, children for adoption, asylum seekers**
 - 3.1 Immigrants and emigrants
 - 3.2 Adoptions
 - 3.3 Minors as asylum seekers
- 4. Number of young children**
- 5. What will the future bring?**
 - 5.1 Forecasts of the number of births
 - 5.2 Forecasts of the number of children
- 6. Explanatory notes**
 - 6.1 Women of childbearing age
 - 6.2 Fertility rate
 - 6.3 Age on giving birth
 - 6.4 Abortion
 - 6.5 Teenage pregnancy
 - 6.6 Births and marriage
 - 6.7 Wishes as regards having children
- 7. The European context**
 - 7.1 Births
 - 7.2 Number of young children
 - 7.3 Intercountry adoption

CH 2. FAMILIES WITH YOUNG CHILDREN: INCREASING DIVERSITY

- 1. Two-parent or one-parent family?**
- 2. Type of family**
- 3. Only child?**
- 4. Children, living at home all the time or not**
- 5. Diversity of families**
- 6. Older parents?**
- 7. Young children and grandparents**
- 8. Family lifestyles in families with young children**
- 9. Explanatory notes**
 - 9.1 Marriages
 - 9.2 Relationship breakdowns

10. The European context

CH 3. PROSPERITY AND DEPRIVATION

1. Employment of parents of young children

- 1.1 Participation of parents of young children in employment
- 1.2 The extent of the employment of parents of young children
- 1.3 Arranging family-friendly working hours?

2. Participation in employment in families with young children from the perspective of the women

3. Family income level

4. Children in families living at subsistence level

5. Children in underprivileged families

6. Children for whom guaranteed child benefit is paid

7. Home circumstances

8. Consumer goods in the family

9. The European context

- 9.1 Participation in employment of families with young children
- 9.2 Poverty
- 9.3 Housing problems

CH 4. SOCIAL DEVELOPMENT

1. Use of child care

- 1.1 Children aged under 3
- 1.2 Children aged 3-12
- 1.3 Sick children

2. Wellbeing and child care

3. Going to school

4. TV/video watching

5. Annual holidays

6. Free-time activities of school children

7. Children receiving supervision and support via special youth welfare

- 7.1 Supervision and support via the special youth welfare service, subsidised by Child and Family
- 7.2 Supervision and support via the special youth welfare service

8. The European context

- 8.1 Child care
- 8.2 Going to school

CH 5. ASPECTS OF THE HEALTH AND DEVELOPMENT OF YOUNG CHILDREN

1. Data on pregnancy and childbirth

- 1.1 Antenatal care
- 1.2 Data on deliveries
- 2. Life expectancy**
- 3. Mortality**
- 3.1 Number of deaths of children aged 0-15 in the Region of Flanders
- 3.2 Causes of death in children aged under 15 years in the Region of Flanders
- 4. Morbidity**
- 4.1 Congenital abnormalities
- 4.2 Hearing loss
- 4.3 Diseases and disorders
- 4.4 Tooth decay
- 4.5 Overweight in children aged 2 to 12 years
- 4.6 Children with psychosocial and/or emotional problems
- 4.7 Hospital admissions
- 5. Accidents to children**
- 5.1 Accidents necessitating medical treatment
- 5.2 Traffic accidents
- 6. Child abuse**
- 7. The European context**
- 7.1 Life expectancy at birth
- 7.2 Caesareans
- 7.3 Birth weight
- 7.4 Congenital abnormalities
- 7.5 Mortality
- 7.6 Cot deaths
- 7.7 Deaths caused by accidents
- 7.8 Deaths as a result of child abuse
- 7.9 Smacking
- 7.10 Overweight in children aged 6 to 12 years

CH 6. A SAFE AND HEALTHY LIFE?

- 1. Feeding babies in the first year of life**
- 1.1 First food
- 1.2 Course of breast-feeding
- 1.3 Bottle-feeding: the first bottle feed and bottle-feeding at 6 and 12 months
- 1.4 Spoon feeding
- 1.5 The consumption of fat
- 1.6 Addition of vitamins to the food

- 1.7 Additional foods and snacks
- 2. Nutrition after the first year**
- 3. Safe sleeping habits**
- 4. Sleep**
- 5. Use of therapeutic drugs**
- 6. A smoke-free environment for the young child?**
 - 6.1 Smoking in the presence of babies under the age of 10 months
 - 6.2 Smoking patterns of parents of children aged up to 12 years
- 7. The European context**
 - 7.1 Breast-feeding
 - 7.2 Vaccination rates

Foreword

There is a great demand for facts and figures on young children; witness the large number of requests that Child and Family receives year in year out. The requests come from very diverse quarters: journalists, students, politicians, European and international bodies, civil servants, education, the business community, ...

One of the top questions is definitely the birth rate but a great many people also ask questions about child care, child abuse and adoption.

Our publication "The Child in Flanders" endeavours to assist people in their search for information. The 2004* edition of "The Child in Flanders" is the eight report in a row.

The terms of reference of the report are to focus explicitly on the child. In the second half of the twentieth century, champions for the rights of the child argued with ever increasing insistence that children should be seen as a separate population group with its own characteristics and its own position in society. In concrete terms this means that the child is the unit of calculation for the collection of statistics, rather than, for instance, the family, the mother or the father.

"The Child in Flanders" incorporates a broad spectrum of data: demographic data such as the birth rate, the number of young children, the number of ethnic minority children, adopted children, minors entering the country as asylum seekers; data on family situations such as the composition of the family, joint custody arrangements following divorce, ethnicity, age of the parents, grandparents, roles within the family, prosperity and deprivation in the family, parents' employment; data on child care and out-of-school care, going to school and children receiving supervision and support; data on the health and physical development of young children; and data relating to the question of whether children have a healthy lifestyle.

Child and Family works to increase the amount of data available on young children. Sometimes it is sufficient to press the competent authorities to rework their statistics from the perspective of the child. Basic application 11 with family positions in the Labour data warehouse of the Crossroads Bank for Social Security is an excellent example of this. Sometimes Child and Family makes a financial contribution to the cost of the research.

We also make efforts to seek out the most recent statistics in the various fields, so that we are able to offer you a report with the very latest information. Moreover, the report is based solely on official statistics or statistics that have been collected using sound scientific methods, as can be seen from the source references accompanying the tables and figures. We are increasingly able to provide data that refer to the whole child population rather than a sample of children, which makes the figures more accurate.

We hope that this report on the welfare of young children and the circumstances in which they are living will encourage public interest in the lives children in Flanders lead.

Happy reading!

Bea Buysse
Scientific adviser
Child and Family

* A digital copy of this report can be downloaded from the Child and Family website:
http://www.kindengezin.be/Algemeen/Over_Kind_En_Gezin/Jaarverslagen/default.jsp

CH 1.

2004: BABY BOOM OR REVERSAL OF THE DOWNWARD TREND?

There were considerably more births in 2004 than in 2003: 62 374 births or an increase of 4%. Despite a further shrinking in the number of potential mothers, the birth rate increased. To the births in the *de jure* population who live here by right – Belgians and foreign nationals – must be added the births to asylum seekers. This chapter also includes births to women registered as asylum seekers.

The population of the Region of Flanders is still *ageing*, as the low birth rate of recent years has been translated into a further decrease in the population of young children.

This chapter not only presents a number of basic population statistics, we also interpret these figures and trends and put the figures in a European context, by comparing the EU-15 countries.

1. Number of births*

There were more births in 2004 than in 2003; the number of births rose to well above 60 000

In 2004, there were 62 374 live births in the *Region of Flanders*. Compared with 2003 there were 2 410 more babies born, an increase of 4% (see Table 1.1 and Figure 1.2).

51.3% of the live births were boys; 48.7% were girls (2003; 2004 figures not yet available)(see Table 1.3).

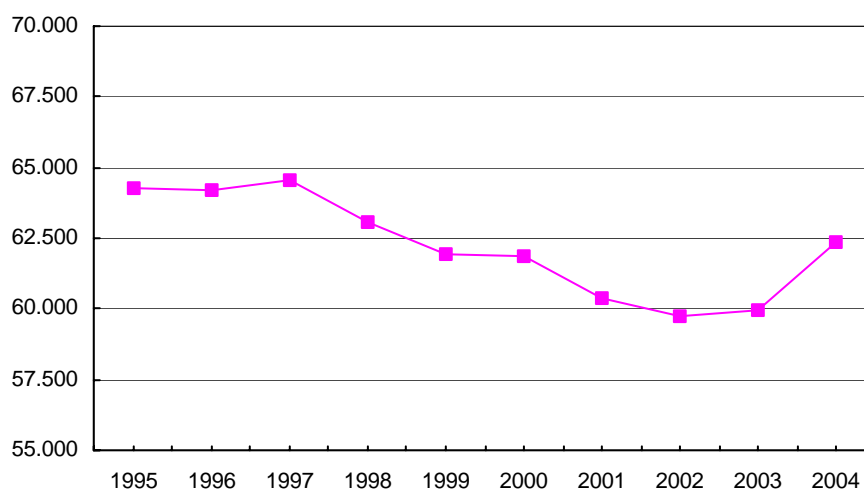
Births

2003	59 964
2004	62 374

1.1 Number of live births in the Region of Flanders

Source: NIS, *Population statistics*

Births trend



1.2 Trend in the number of live births in the Region of Flanders since 1995

Source: NIS, Population statistics

Number of births by gender

	Number	%
Boys	30 740	51.3
Girls	29 224	48.7

1.3 Number of live births in the Region of Flanders by gender – 2003

Source: NIS, Population statistics

Table 1.4 shows the number of births *per province*.

The birth rate increased in all provinces compared with 2003. The greatest increase, 6.8%, was in the province of East Flanders. There was also quite a sharp rise in the province of Limburg, at 4.4%. In the provinces of Antwerp (+3.0%), West Flanders (+2.9%) and Flemish Brabant (+2.9%) the increase was rather less marked (see also Table 1.5).

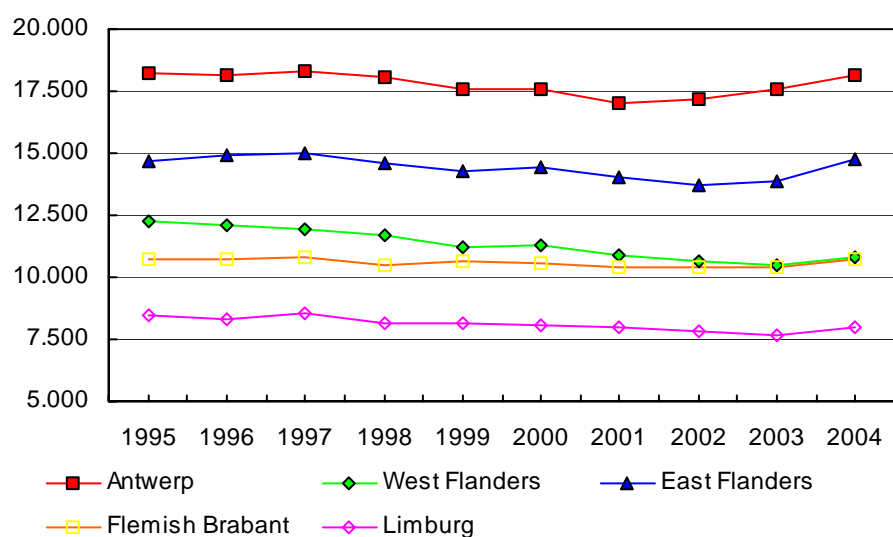
Births by province

	2003	2004
Antwerp	17 583	18 108
Flemish Brabant	10 425	10 726
West Flanders	10 470	10 776
East Flanders	13 848	14 790
Limburg	7 638	7 974

1.4 Number of live births per province

Source: NIS, Population statistics

Births trend by province



1.5 Trend in the number of live births per province since 1995

Source: NIS, Population statistics

Some children are born together with a brother or sister. About 3.8% of births come into this category (2003). The number of babies born from a multiple birth fell slightly. The number of triplets halved: there were only 12 triplets in 2003 compared with 24 in 2002 (see Table 1.6).

Number of multiple births

	2002	2003
Number of twins	1 167	1 131

Number of triplets	24	12
Number of quadruplets	0	0
<hr/>		
Percentage of children born from a multiple birth	4.0	3.7

1.6 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

* Relates to births to Belgian women and foreign women registered in the Aliens Register ('de jure' population). Since 1 February 1995, people who have applied for refugee status are no longer included in the 'de jure' population

2. Number of births to women registered as asylum seekers*

A number of babies are born every year in the Region of Flanders who are not included in the normal figure for the number of births. These are babies born to asylum seekers, both women who have applied for asylum and those whose application for asylum has been granted. In 2004, 703 births to women on the asylum seekers' register were recorded. This is a decrease of 13.1% compared with 2003. Table 1.7 breaks down this number by province.

Births to women on the asylum seekers' register

	2002	2003	2004
Antwerp	351	335	284
Flemish Brabant	98	83	70
West Flanders	133	141	130
East Flanders	193	173	159
Limburg	89	77	60
<hr/>			
Region of Flanders	864	809	703

1.7 Number of births to women registered as asylum seekers per province

Source: National register

* This register lists asylum seekers from the date of their initial application, so it includes both asylum seekers in the application phase and those whose application has been granted. The duty to register people who have applied for refugee status in a separate asylum seekers' register came into effect on 1 February 1995

3. Newcomers and leavers: immigrants, emigrants, children for 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. Some children leave to live in another region or move abroad.

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.

3.1. Immigrants and emigrants

In 2003, 5 731 children aged under 12 migrated to the Region of Flanders *from other countries*. This figure is 1.8% higher than in 2002. In addition, 4 192 children migrated from the *Region of Brussels* and the *Walloon Region*. The number of migrations from other regions was also higher than in 2002 (+5.5%) (see Table 1.8). 3 935 children (+5.3%) migrated abroad and a further 2 493 children (-6.5%) migrated to another region (see Table 1.9).

Immigration

		From another region		From outside Belgium	
		2002	2003	2002	2003
Children under 3		1 232	1 239	1 394	1 382
Children aged 3-6		1 118	1 235	1 578	1 720
Children aged 6-12		1 624	1 718	2 656	2 629
Total		3 974	4 192	5 628	5 731

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

Source: NIS – Population statistics

Emigration

		To another region		To another country	
		2002	2003	2002	2003

Children under 3	787	775	961	951
Children aged 3- 6	772	719	1 054	1 118
Children aged 6-12	1 106	999	1 722	1 866
Total	2 665	2 493	3 737	3 935

1.9 Number of children aged under 12 emigrating to another region or another country.

Source: NIS - Population statistics

3.2. Adoptions

Very small number of adoptions through the authorised adoption services. Most children for adoption come from abroad

In the course of 2004, the adoption services authorised* by Child and Family placed a total of 168 children for adoption. This was 18 fewer than in 2003. The majority of placements were of children who came from outside Belgium (85.1%) (see Table 1.10 and Figure 1.11).

The children from outside Belgium came mainly from China, Ethiopia, the Philippines, India, Russia and South Africa (see Table 1.10).

At the time of placement in a family, 39.9% of the children were under 1 year old and 35.7% were between 1 and 2 years old. Over 24% of the children were 2 years old or more (see Table 1.12).

The average age was 1.1 years; which has not changed since 2003.

In over 55% of the adoptions, the child was placed in a childless family, in a small number of cases together with another child for adoption. In the cases of placement in a family with children, the child being placed for adoption was, with the exception of one child, always younger than the children of the family (see Table 1.13).

Most of the adoptive parents were aged between 30 and 49. The average age of the adoptive father was 38.4 and of the adoptive mother 36.9. The average age of the adoptive mother was younger than in 2003, when it was 37.2 years. The average age of the adoptive father was near enough the same. 8 children were adopted by single fathers and 3 children by single mothers.

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

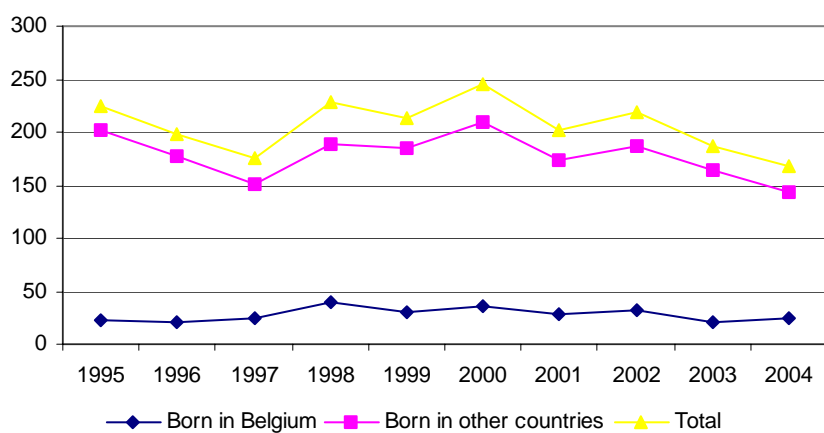
Adopted children

	2003		2004	
	Number	%	Number	%
Born in Belgium	21	11.3	25	14.9
China	49	26.3	64	38.1
Ethiopia	29	15.6	17	10.1
The Philippines	9	4.8	17	10.1
India	12	6.5	13	7.7
Russia	13	7.0	10	6.0
South Africa	7	3.8	10	6.0
Thailand	5	2.7	6	3.6
Sri Lanka	7	3.8	3	1.8
Ecuador	2	1.1	2	1.2
Colombia	3	1.6	1	0.6
Cambodia	20	10.8	0	0.0
Haiti	5	2.7	0	0.0
Vietnam	4	2.2	0	0.0
Total figure for children from other countries	165	88.7	143	85.1
Total	186	100.0	168	100.0

1.10 Children placed for adoption: numbers by countries of origin

Source: *Child and Family - Adoption statistics*

Adoption trends



1.11 Trend in the number of children placed for adoption since 1995

Source: *Child and Family - Adoption statistics*

Age on adoption

	2003		2004	
	Number	%	Number	%
Under 1 year	79	42.5	67	39.9
1 to 2 years	59	31.7	60	35.7
2 to 3 years	24	12.9	23	13.7
3 to 4 years	8	4.3	4	2.4
4 to 5 years	5	2.7	9	5.4
5 to 10 years	9	4.8	4	2.4
10 to 15 years	2	1.1	1	0.6
Total	186	100.0	168	100.0

1.12 Age of children on placement for adoption

Source: *Child and Family - Adoption statistics*

Position in the family

	Number	%
Childless family, placement of 1 child	83	49.4

Childless family, placement of more than 1 child	8	4.8
Family with children, placement of 1 child as the oldest child	1	0.6
Family with children, placement of 1 child as the youngest child	76	45.2
Total	168	100.0

1.13 Children placed for adoption by number of children placed and position in the adoptive family – 2004

Source: *Child and Family - Adoption statistics*

3.3. Minors as asylum seekers

Some young asylum seekers come into *Belgium* with their parents but some enter the country unaccompanied. In 2004, 679 minors submitted asylum applications in their own right, of whom 599 were classified as minors following a bone scan. These are minors with their own individual case file, or in other words, minors who have arrived before or after their parents, and not minors who are included in the annex to their parents' asylum application. Males clearly outnumbered females, making up 64.9% of underage asylum seekers. 47% of the applications were made in Dutch.

The number of minors who applied for asylum was virtually the same as in 2003, when 588 minors applied for asylum (see Table 1.14).

Minors as asylum seekers (1)

2003	588
2004	599

1.14 Number of minors seeking asylum in Belgium by age

Source: *National Commissioner for Refugees and Stateless Persons, Office for Unaccompanied Minors*
 (1) *These figures relate to the number of minors with an individual dossier. These are minors who have arrived before or after their parents and not minors who are included in the annex to their parents' asylum application. They were classified as minors following a bone scan.*

4. Number of young children

Slight fall in the number of young children

As a result of the falling birth rate of recent years, the population of young children in Flanders has continued to

fall.

On 1 January 2004 in the *Region of Flanders*, there were 181 574 children aged under 3, 190 875 children aged 3-6 and 409 596 children aged 6-12. In comparison with 2003, the number of children aged under 3 in the Region of Flanders fell by 1 529 (-0.8%); the number of children aged 3-6 fell by 1 957 (-1.0%) and the number of children aged 6-12 fell by 5 287 (-1.3%) (see Table 1.15 and Figure 1.16).

The proportion of children aged under 3 in the population is 3.02% and the proportion of children aged under 12 is 13.0%. This proportion represents a slight fall compared with 2003 (see Table 1.15).

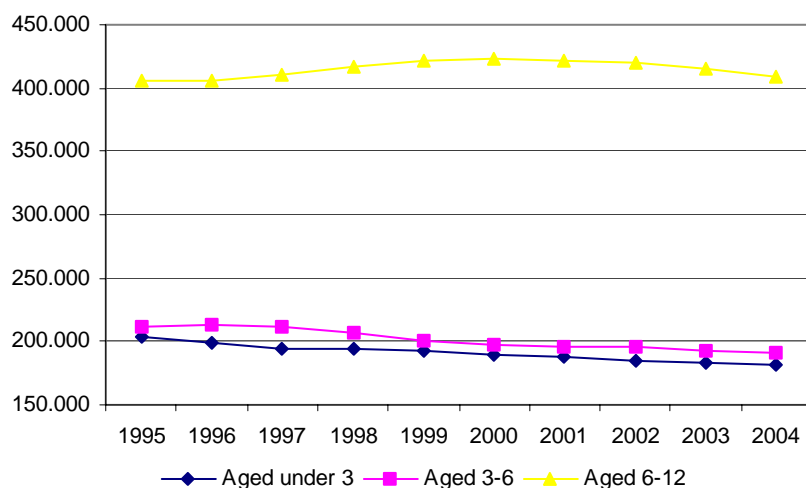
Young children

	Number		Proportion in population	
	2003	2004	2003	2004
Aged under 3	183 103	181 574	3.05	3.02
Aged 3-6	192 832	190 875	3.22	3.17
Aged 6-12	414 883	409 596	6.92	6.81
Total aged under 12:	790 818	782 045	13.19	13.00

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

Source: NIS - Population statistics

Trend in the number of children



1.16 Trend in the number of children aged under 12 in the Region of Flanders since 1995 (on 1 January)

Source: NIS - Population statistics

Only a very small number of children aged under 12 in the Region of Flanders do not have *Belgian nationality*: 4.4%. The percentage of such children rose by 0.2% compared with 2003. In this respect, it should be noted that, because of increased opportunities to acquire Belgian nationality, the nationality criterion is not very suitable for identifying people of foreign origin.

A better criterion is the origin of the child's mother. 17.9% of the children born in 2004 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. This percentage is slightly higher than in 2003 (+0.5%) (see Table 1.17).

Ethnic minority children

	2003	2004
Antwerp	23.5	25.1
Flemish Brabant	14.8	15.1
West Flanders	7.9	8.1
East Flanders	14.1	14.5
Limburg	25.7	25.0
Region of Flanders	17.4	17.9

1.17 Percentage of live births where the mother is not of Belgian origin (i.e. she did not have Belgian nationality when she was born) by province and by year of birth - Region of Flanders

Source: *Child and Family - IKAROS*

There are major differences from province to province. Antwerp and Limburg have the highest percentages of children of non-Belgian origin, at 25.1% and 25.0% respectively. In Flemish Brabant there are 15.1% and there are 14.5% in East Flanders. West Flanders has the lowest percentage of children of non-Belgian origin, i.e. 8.1% (see Table 1.17). The number of children of non-Belgian origin increased in all provinces except Limburg.

The most important *countries of origin* are Morocco, Turkey and the Netherlands. 4.1% of the children born in 2004 are of Moroccan origin, 3% of Turkish origin, and 1.6% of Dutch origin. The top ten also include: Russian origin (0.5%), Italian (0.4%), Congolese (0.4%), Polish (0.4%), French (0.4%), former Yugoslavian (0.4%) and British (0.3%).

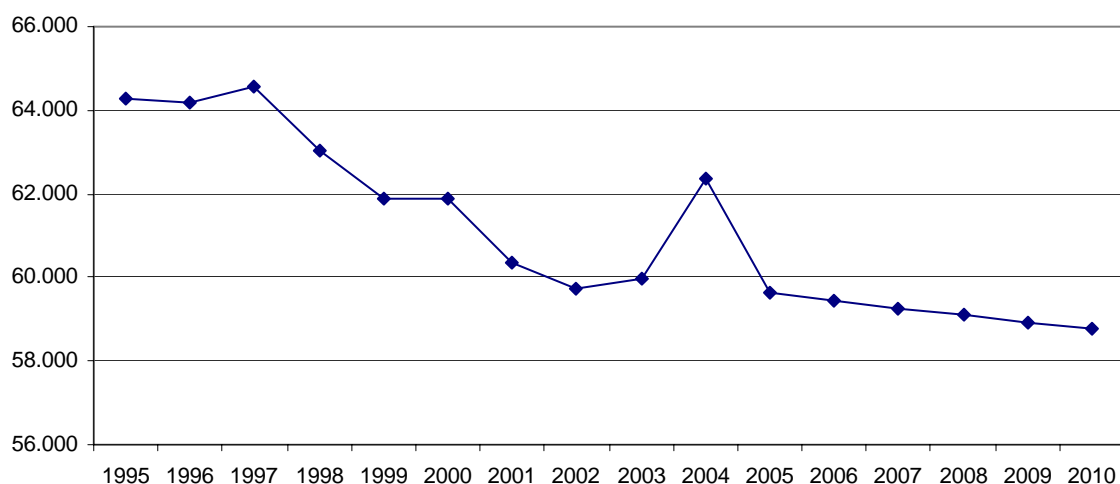
5. What will the future bring?

5.1. Forecasts of the number of births

A slight decrease in the birth rate in the near future or a stabilisation?

At the end of 2001 the National Statistical Institute published population forecasts for the *period 2000-2050*. These forecasts predict births in the region of 59 000 in the years from 2005 to 2010. This is a decrease of over 5% compared with the birth rate for 2004 (see Figure 1.18). Table 1.19 shows the forecast number of births for the Region of Flanders and the provinces as well as the birth figures for 2004.

Births and forecasts



1.18 Trend in the number of births since 1995 and forecasts until 2010 - Region of Flanders

Sources: NIS – Population statistics

NIS - Population forecasts 2000-2050

Births and forecasts by province and for the Region of Flanders

	Births in 2004	Forecasts for 2010
Antwerp	18 108	16 757
Flemish Brabant	10 726	10 108
West Flanders	10 776	10 906
East Flanders	14 790	12 962
Limburg	7 974	8 046

Region of Flanders	62 374	58 779
--------------------	---------------	--------

1.19 Number of births in 2004 and forecasts for 2010 by province and for the Region of Flanders

Sources: NIS – Population statistics

NIS - Population forecasts 2000-2050

5.2. Forecasts of the number of children

In 2010 there will probably be considerably fewer children than there are today. The population forecasts for 2000-2050 estimate that there will be only 178 454 children under the age of 3 in 2010 compared with 181 574 on 1 January 2004 (-1.7%). For children aged 3 to 6, a decrease from 190 875 to 182 864 (-4.2%) is expected and for children aged 6 to 12, a decrease from 409 596 to 379 879 (-7.3%) (see Table 1.20 and Figure 1.21).

Forecasts of number of children

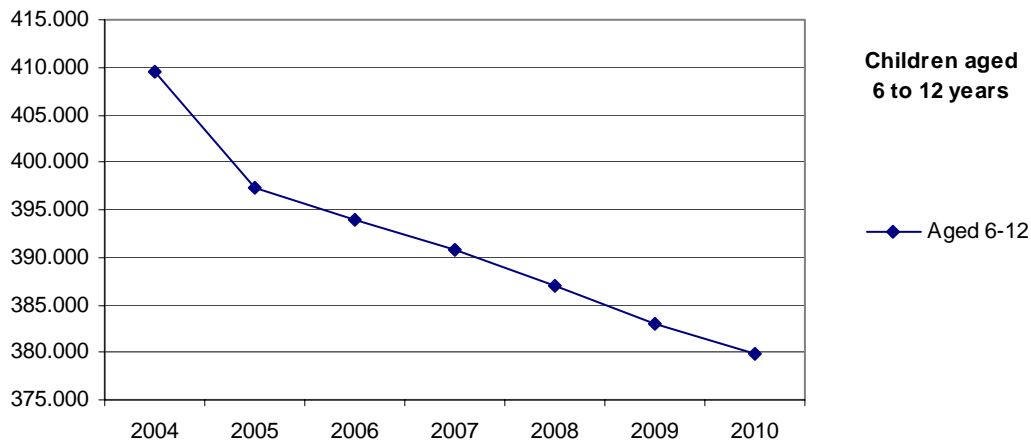
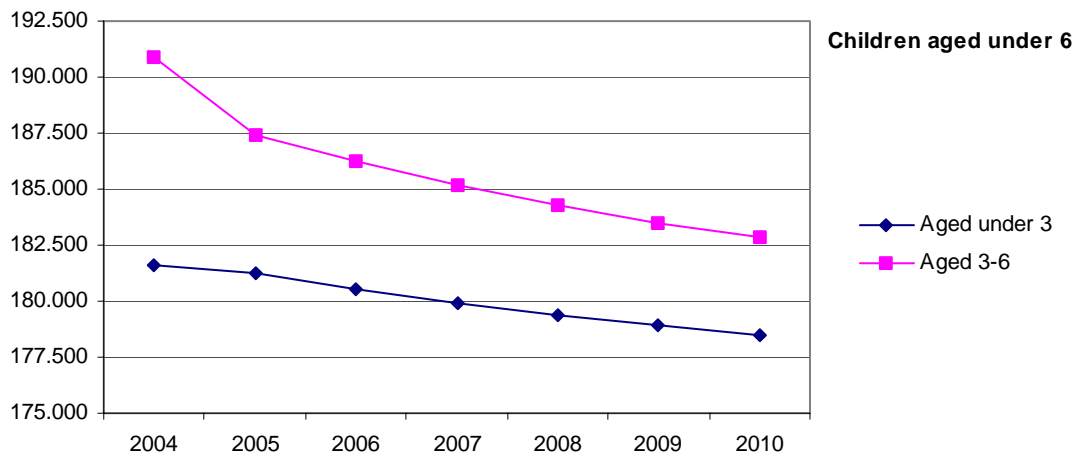
Number of children on 1 January 2004	Forecasts for 31 December 2010	
Aged under 3	181 574	178 454
Aged 3-6	190 875	182 864
Aged 6-12	409 596	379 879

1.20 Forecasts of the number of children in the Region of Flanders in 2010 by age and number of children on 1 January 2004

Sources: NIS – Population statistics

NIS - Population forecasts 2000-2050

Forecasts of the number of children up to 2010



1.21 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 2004

Sources: NIS – Population statistics

NIS - Population forecasts 2000-2050

6. Explanatory notes

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

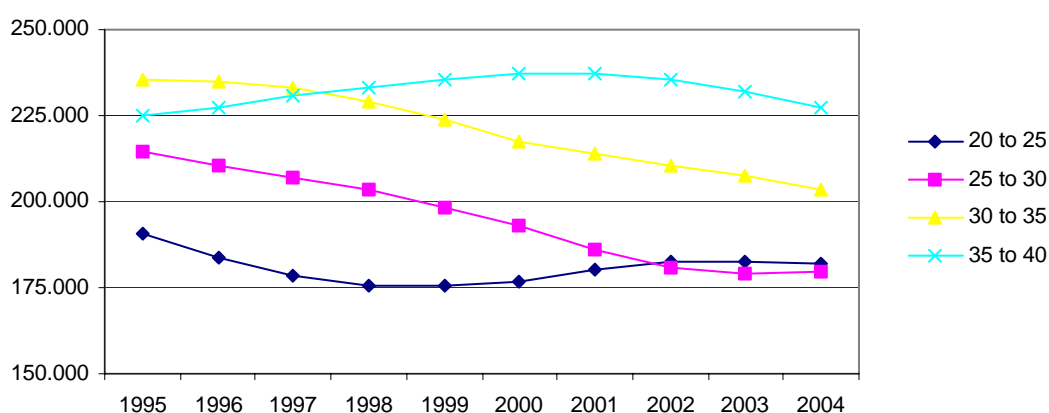
6.1. Women of childbearing age

The number of potential mothers continues to fall; the decrease is located in the 25 to 35 age group

An important critical factor in the trend in the number of births is *the trend in the number of women aged 20-40,*

the age group to which over 96% of women giving birth belong. The number of women aged 20 to 40 is continuing to fall. At the beginning of 2004 there were 1.1% fewer women aged 20 to 40 than in 2003. Looking at this group of women in more detail, a varied trend is apparent. The number of women aged 30 to 35 has fallen continuously since 1995 and the number of women aged 25 to 30 has also fallen continuously, except in 2004. The number of women aged 20 to 25 fell until 1999, increased slightly from 2000 and then went down again slightly in 2004. The number of women aged 35 to 40 rose until 2001 and then fell slightly (see Figure 1.22).

Women of childbearing age



1.22 Trend in the number of women aged 20-40 in the Region of Flanders since 1995 (on 1 January)

Source: NIS – Population statistics

6.2. Fertility rate

In 1997 (most recent figures available), the average number of children per woman in the Region of Flanders was 1.5418 (see Table 1.23). 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 rate

1995	1.5020
1996	1.5183
1997	1.5418

1.23 Total fertility rate - Region of Flanders

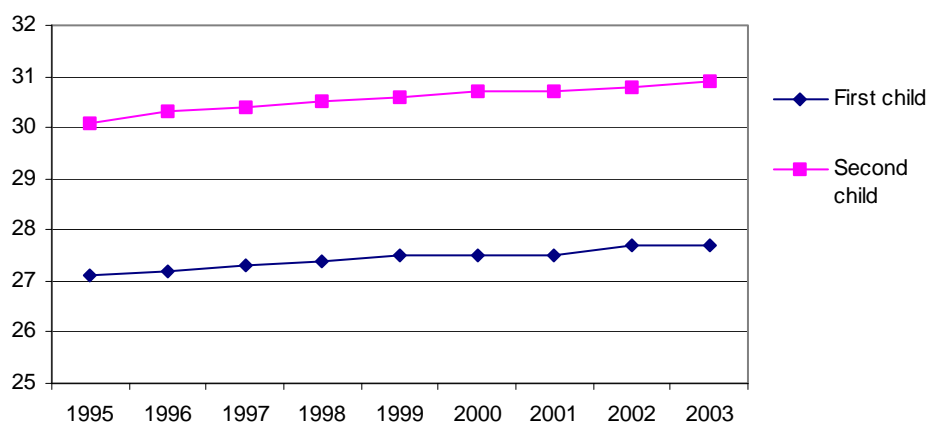
Source: NIS, Population statistics

6.3. Age on giving birth

End of the trend to continue to postpone having children?

In 2003 the average age of women on the birth of their first child was 27.7 years and 30.9 on the birth of a second child. Figure 1.24 shows the trend since 1995. The average age of women on giving birth can be said to have gradually reached a status quo (see Figure 1.24).

Age on giving birth



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

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

6.4. Abortion

A small but rising number of pregnancies are terminated at the request of the woman

A number of pregnancies are not continued to full term but terminated at the request of the woman. Pregnant women in Flanders can go to abortion clinics or hospitals to have an abortion. The number of legal abortions in these clinics and hospitals was 6 732 in 2003.

This number is 27.4% higher than in 1996, the first year for which the National Evaluation Commission has figures. Compared with 2002 there was an increase of 4.7% (Table 1.25 and Figure 1.26; see also section 6.5). In 2003 there were 112 abortions per 1 000 births, compared with 108 in 2002 (see Table 1.25).

Figure 1.27 shows the number of abortions by age of the woman.

Abortions

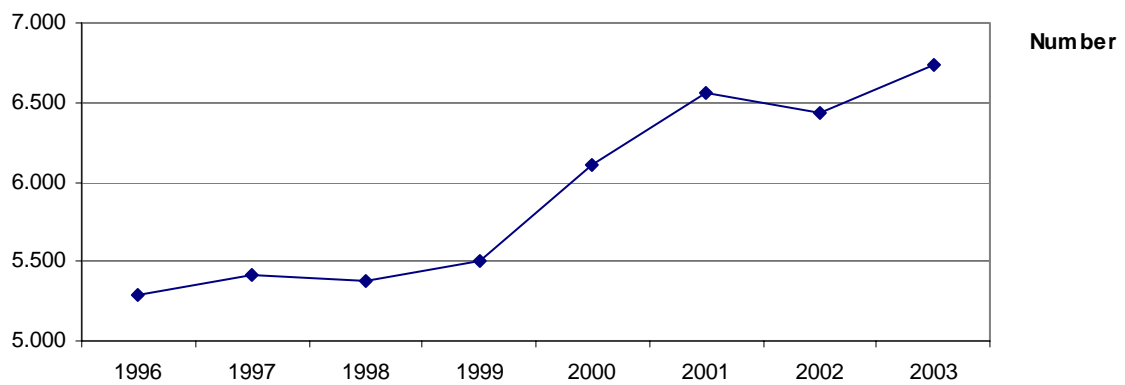
	2002	2003
Number of abortions	6 432	6 732
Number of abortions per 1 000 births	108	112

1.25 Abortions in women living in the Region of Flanders, number and number per 1 000 births

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

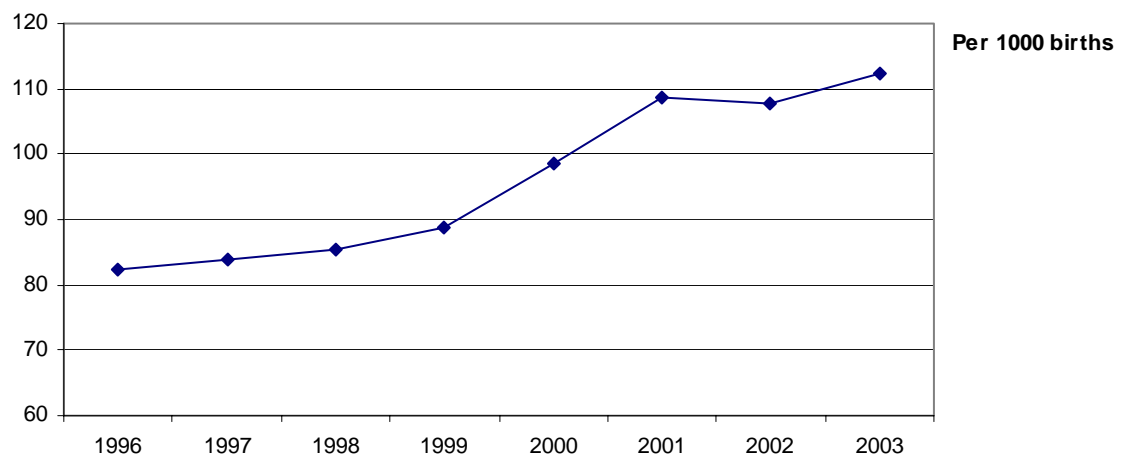
Abortions

Number



1.26 Trend in the number of abortions per 1 000 births in women living in the Region of Flanders

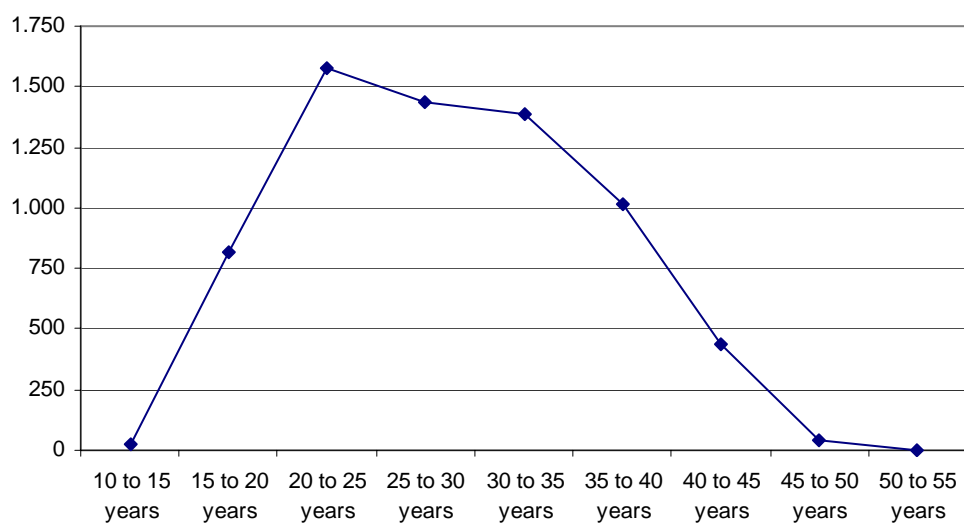
Per 1 000 births (=sub-title)



1.26 Trend in the number of abortions per 1 000 births in women living in the Region of Flanders

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

Abortions by age



1.27 Number of abortions among women living in the Region of Flanders by age – 2003

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

6.5. Teenage pregnancy

Teenage motherhood tends to be the exception; a significant number of teenage pregnancies are terminated

There is a link between teenage motherhood 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 2003 only 1 368 or 2.3% of women giving birth were aged under 20. This figure was slightly higher than the figure for 2002, when 1 313 women under the age of 20 gave birth. Half of the teenage mothers were 19 and almost 28% were 18 (see Table 1.28 and Figure 1.29).

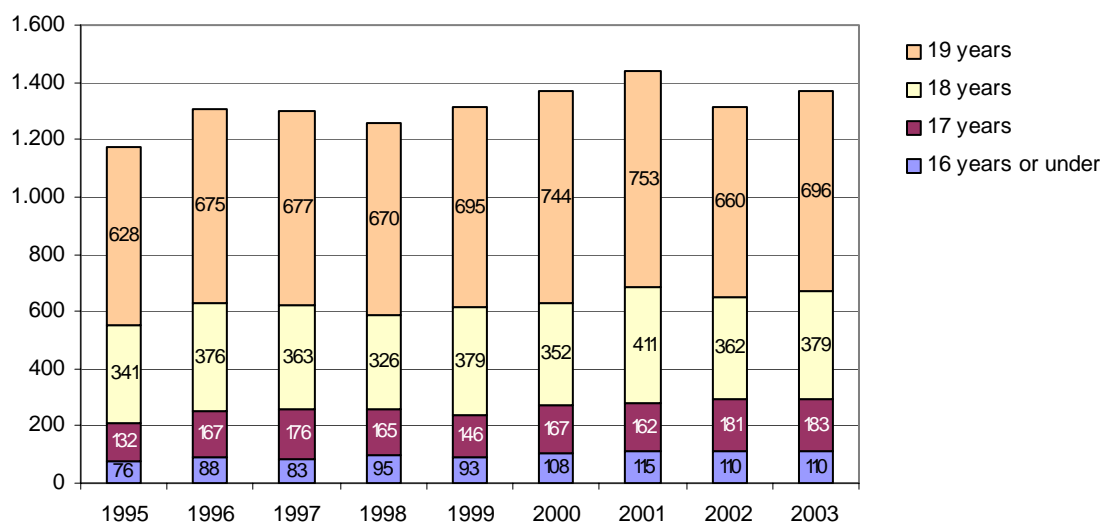
Teenage mothers

	2002	2003
14 years or under	10	14
15 years	29	28
16 years	71	68

17 years	181	183
18 years	362	379
19 years	660	696
<hr/>		
Total under 20 years	1 313	1 368

1.28 Number of teenage mothers in Flanders (Region of Flanders and Flemish maternity hospitals in Brussels)
 Source: Study Centre for Perinatal Epidemiology

Trend in teenage mothers



1.29 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 2003 (most recent figures available), the number of teenage pregnancies - births and abortions together - was 2 205, made up of 1 368 births and 837 abortions. Out of every 100 pregnant teenagers, 61 became mothers and 39 had an abortion.

These were however mainly women in the 15 to 19 age group. Below the age of 15 there were only 23 abortions and 14 births in 2003. Pregnant girls under the age of 15 are more likely to have an abortion than those aged 15 to 19 (see Table 1.30 and Figure 1.31 – see also section 6.4).

Abortions among teenagers

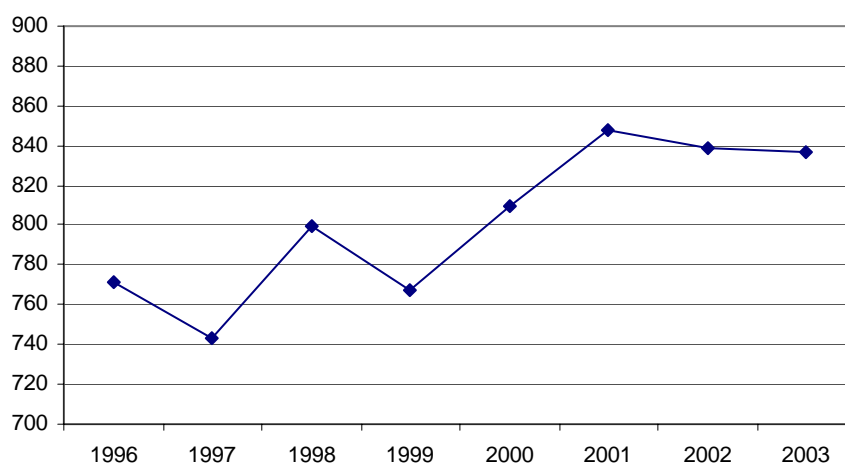
	2002	2003
Number of abortions		
in girls aged 10 to 15 years	25	23
in girls and young women aged 15 to 20 years	814	814
Total girls and young women aged 10 to 20 years	839	837
Per 100 births		
in girls and young women aged 10 to 20 years	63.9	61.2

1.30 Number of abortions and number of abortions per 100 births among women and girls under the age of 20

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

Study Centre for Perinatal Epidemiology

Abortions among teenagers



1.31 Number of abortions and number of abortions per 100 births among women and girls under the age of 20

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

Study Centre for Perinatal Epidemiology

6.6. Births and marriage

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

In 1997 (most recent figures available), 84.9% of children were born within marriage. The number of children born outside marriage shows a small but consistent increase: from 7% in 1990 to 15.1% in 1997.

6.7. Wishes as regards having children

Two children” are given most often as the ideal number, but a significant number of men and women prefer to have fewer children at the moment than the number they consider to be ideal

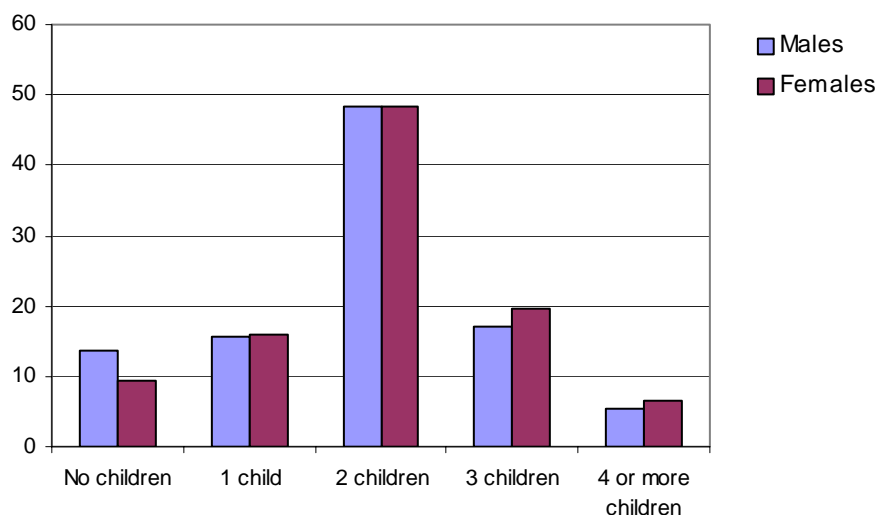
A postal survey “Population and Policy in Flanders” conducted in the autumn of 2003 by the CBGS (Centre for Population and Family Research) asked a number of questions about having children.

This survey was conducted among a representative sample of men and women aged 20 to 55 in the Region of Flanders.

In response to the question about the *ideal number of children* in a family, two children emerged as the clear winner: 63% of the respondents gave 2 children as the ideal family size. For 23.8%, 3 children is the ideal number. Remaining childless was rarely seen as ideal (1.2%). Women gave 2, 3 or 4 children as the ideal slightly more frequently than men. Rather more men gave 0 or especially 1 child (see Figure 1.32). Figure 1.33 shows the ideal family size by age of those questioned.

The average figure for the ideal number of children was 2.27. Among male respondents, the average was 2.23 and among female respondents the average was 2.31. The fact that this figure is over two is not insignificant.

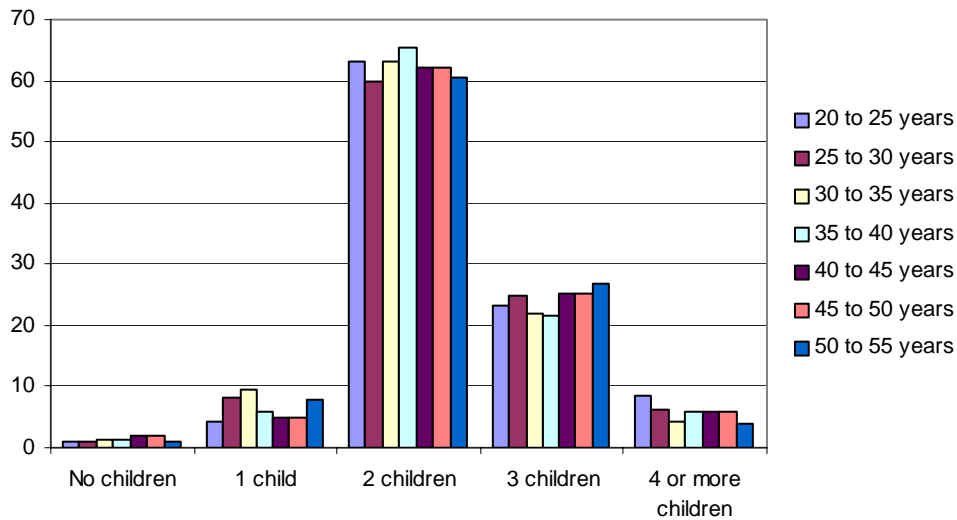
Ideal family size



1.32 The ideal number of children in a family according to men and women aged 20 to 55 years – Region of Flanders – 2003 (percentages)

Source: CBGS (Centre for Population and Family Research), “Population and Policy in Flanders” survey

Ideal family size by age



1.33 The ideal number of children in a family according to men and women by age – Region of Flanders – 2003 (percentages)

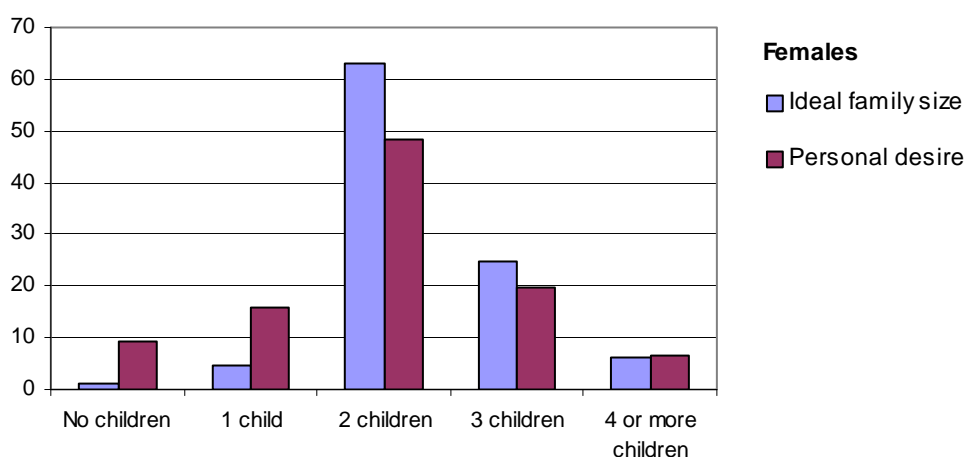
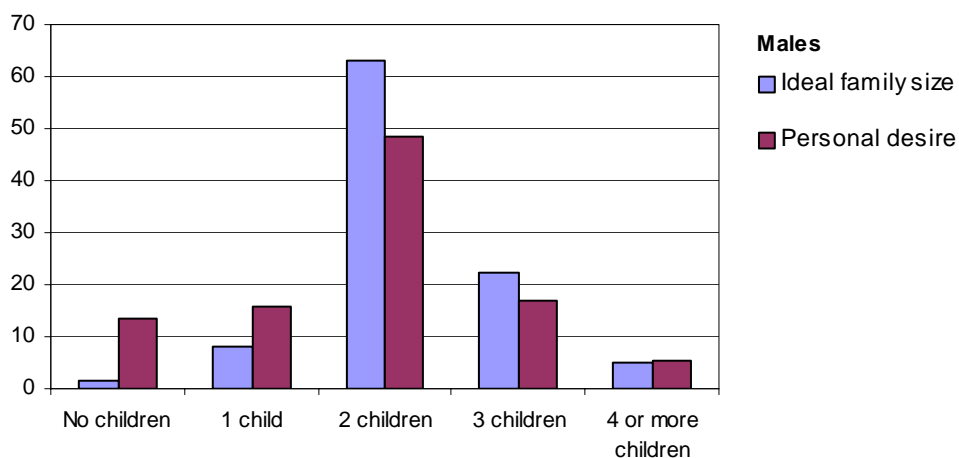
Source: CBGS (Centre for Population and Family Research), “Population and Policy in Flanders” survey

In addition to ideal family size, the survey also asked about the *number of children that people wanted for themselves right now*. Figure 1.34 shows that the number of children that men and women wanted for themselves at the time of the survey was less than their ideal number.

On average they wanted 1.94 children: men wanted 1.87 children on average and women exactly 2 children.

Fewer men and women wanted 2 or 3 children for themselves at the time of questioning than the number who gave 2 or 3 children as the ideal family size. Only about 48% of the men and women wanted 2 children at the time of the survey, while about 63% of them gave 2 children as their ideal number. 17% of the men and almost 20% of the women said that they would like 3 children now, while 22.5% of men and 24.8% of women put 3 children first when asked about their ideal family size. A significant number of both men and women said that they did not want any children at the time of questioning (13.6% and 9.4% respectively), while hardly any men or women gave this as their ideal. This is likely to be explained in part as people postponing having children.

Ideal family size and personal desire for children



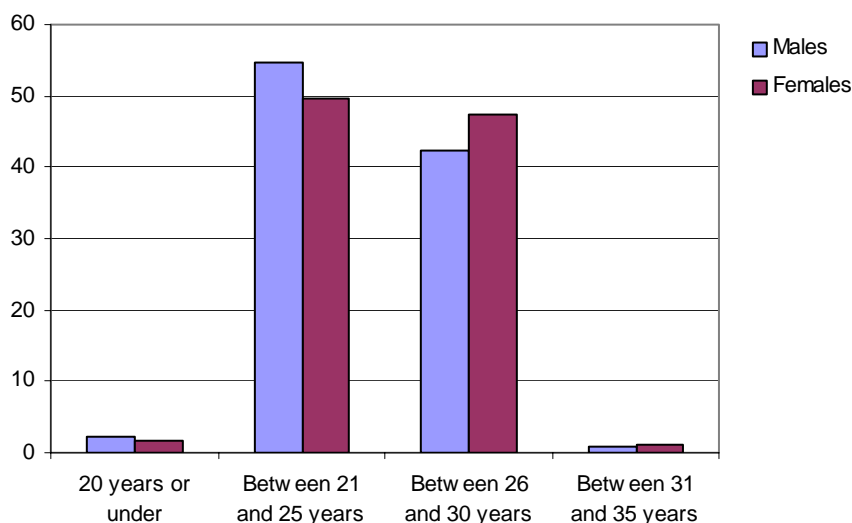
1.34 The ideal number of children in a family according to men and women aged 20 to 55 years and the number of children they desire to have now – Region of Flanders – 2003 (percentages)

Source: CBGS (Centre for Population and Family Research), "Population and Policy in Flanders" survey

The survey also asked about the best age for a woman to have her first baby.

Slightly more than half of those questioned (52%) answered that 21 to 25 is the best age to have a first baby. 45% said 26 to 30. It is noteworthy that women are slightly more inclined to give 26 to 30 as the best age than men (47.4% against 42.2%) (see Figure 1.35).

Best age for first baby



1.35 Best age for a woman to have her first baby, according to men and women aged 20 to 50 years – Region of Flanders - 2003

Source: CBGS (Centre for Population and Family Research), “Population and Policy in Flanders” survey

7. The European context

How do the figures for and trends in births in Flanders fit into the European context? Are other European countries also experiencing a fall in the number of young children? The figures for Flanders were compared with the figures for the EU-15 countries and, where possible, the total figure for the EU-15.

7.1. Births

A number of figures for births from 1995 are reproduced in Tables 1.36, 1.37 and 1.38: the number of births, the percentage trend in the birth rate, and the number of births per 1 000 inhabitants. The 2004 figures for the EU-15 countries are not yet available.

The birth rate in the EU-15 countries has remained virtually unchanged since 1995, but the different countries show different trends. The birth rate fell in a number of countries: by more than 10% in Austria and Finland; by 5 to 10% in Germany, Denmark and Sweden; and by less than 5% in Belgium, Luxembourg, Greece and the United Kingdom. In some countries the birth rate went up: by more than 10% in Spain and Ireland, by 5 to 10% in the Netherlands and Portugal and by less than 5% in France and Italy.

In 2004 Belgium reached a birth rate comparable to what it had had in 1995. In the Region of Flanders the number of births in 2004 was still 3% below the 1995 rate (see Table 1.37).

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 1.39). Germany, Austria and the Mediterranean countries score even lower than the Region of Flanders and Belgium as a whole. France is closest to replacement level. Table 1.40 shows

the trend in the *final number of offspring* at the end of the years of fertility, at age 49. With 1.9 offspring to women born in 1960, Belgium finds itself in the middle group. The generations of women born in 1965 and 1967 had fewer children than the generations of women born in 1955 and 1960 in almost all of the EU-15 countries. Only in Luxembourg and Denmark is the final number of children higher for the 1967 generation of women.

The age at which women have children has in recent years remained virtually constant or risen slightly. According to the most recent figures available, the *average age at which women give birth* is over 28 in all the countries investigated. In the Netherlands, the Nordic countries, Italy, Spain and Ireland, the average age even comes out over 30 years. The average age for having a first child is over 27 in most of the EU-15 countries, apart from Denmark, Portugal, Austria and the United Kingdom (see Tables 1.41 and 1.42).

The *teenage fertility rate* (births per 1 000 women aged under 20) is low in Belgium, just as it is in France. In Denmark, Sweden, Italy and the Netherlands, however, it is even lower. The United Kingdom, and also Portugal and Ireland have a high birth rate among women under the age of 20. The United Kingdom and Portugal also have a high number of births among 15- to 17-year-olds (see Tables 1.43 and 1.44).

There are no recent figures available on procreation among Belgians who are cohabiting but not married. In 1995 Belgium was certainly not leading the field. France, the Nordic countries and the United Kingdom have a high percentage of births outside marriage. In Sweden 56% of all children are born outside marriage. In Italy and Greece, only a small percentage of births occur outside marriage (see Table 1.45).

Table 1.46 shows an overview of the number of *abortions* per 1 000 births. The Region of Flanders, Belgium, the Netherlands and especially Austria have a low number of abortions. Sweden has a much higher number of abortions per 1 000 births.

Births

	1995	2000	2001	2002	2003	2004
Region of Flanders	64 300	61 877	60 364	59 725	59 964	62 374
Belgium	114 226	114 883	113 484	111 225	112 149	115 618
<i>Neighbouring countries</i>						
Germany	765 221	766 969	730 046	719 250	706 721	
France	729 609	774 782	770 945	761 630	760 300	
Luxembourg	5 421	5 723	5 459	5 345	5 303	
The Netherlands	190 513	206 619	202 603	202 083	200 297	
<i>Nordic countries</i>						
Finland	63 067	56 742	56 189	55 555	56 630	

Denmark	69 771	67 084	65 458	64 149	64 682
Sweden	103 422	90 441	91 466	95 815	99 157
<i>Mediterranean countries</i>					
Greece	101 495	103 267	102 282	103 569	99 000*
Italy	525 609	543 039	531 800	535 538	539 503
Portugal	107 184	120 008	112 774	114 383	112 515
Spain	363 469	397 632	406 380	418 846	439 863
Austria	88 669	78 268	75 458	78 399	76 944
The United Kingdom	732 049	679 029	669 123	668 777	695 549
Ireland	48 787	54 789	57 854	60 521	57 000*
EU-15	4 008 512	4 059 275	3 988 828	3 986 683	4 025 613*

1.36 Number of live births in the EU-15 countries since 1995

Sources: NIS, Population statistics

Council of Europe, Recent demographic developments in Europe 2004

<http://www.unicef.org/infobycountry>

* Provisional figures

Births trend

	1995	2000	2001	2002	2003	2004
Region of Flanders	100.0	96.2	93.9	92.9	93.2	97.0
Belgium	100.0	100.6	99.4	97.4	98.2	100.8
<i>Neighbouring countries</i>						
Germany	100.0	100.2	95.4	100.0	92.4	
France	100.0	106.2	105.7	104.4	104.2	
Luxembourg	100.0	105.6	100.7	98.6	97.8	
The Netherlands	100.0	108.5	106.4	106.1	105.1	
<i>Nordic countries</i>						
Finland	100.0	90.0	89.1	89.1	89.8	
Denmark	100.0	96.2	93.8	91.9	92.7	
Sweden	100.0	87.5	88.4	92.6	95.9	
<i>Mediterranean countries</i>						
Greece	100.0	101.8	100.8	101.0	97.5*	
Italy	100.0	103.3	101.2	101.9	102.6	
Portugal	100.0	112.0	105.2	106.7	105.0	

Spain	100.0	109.4	111.1	113.2	121.0
Austria	100.0	88.3	85.1	88.4	86.8
The United Kingdom	100.0	92.8	91.4	91.4	95.0
Ireland	100.0	112.3	118.6	124.1	116.8*
EU-15	100.0	101.3	99.5	99.5	100.4

1.37 Trends in the number of live births from 1995 onwards in the EU-15 countries

Sources: NIS, Population statistics

Council of Europe, Recent demographic developments in Europe 2004

<http://www.unicef.org/infobycountry>

(own calculations)

* Provisional figures

Births per 1 000

	1995	2000	2001	2002	2003	2004
Region of Flanders	11.0	10.4	10.1	10.0	10.0	10.4
Belgium	11.3	11.2	11.0	10.8	10.8	11.1
<i>Neighbouring countries</i>						
Germany	9.4	9.3	8.9	8.7	8.6	
France	12.6	13.2	13.1	12.8	12.8	
Luxembourg	13.3	13.1	12.4	12.0	11.8	
The Netherlands	12.4	13.0	12.7	12.5	12.4	
<i>Nordic countries</i>						
Finland	12.4	11.0	10.8	10.7	10.9	
Denmark	13.4	12.6	12.2	11.9	12.0	
Sweden	11.7	10.2	10.3	10.8	11.1	
<i>Mediterranean countries</i>						
Greece	9.7	9.8	9.7	9.4	9.0*	
Italy	9.2	9.4	9.2	9.5	9.4	
Portugal	10.8	11.7	10.9	11.0	10.8	
Spain	9.3	10.1	10.1	10.2	10.8	
Austria	11.0	9.7	9.4	9.8	9.5	
The United Kingdom	12.5	11.4	11.2	11.3	11.7	
Ireland	13.6	14.5	15.1	15.6	14.4*	

EU-15	10.8	10.8	10.6	10.6	10.6*
-------	------	------	------	------	-------

1.38 Birth rate: number of births per 1 000 inhabitants from 1995 onwards in the EU-15 countries

Sources: NIS, Population statistics

Council of Europe, Recent demographic developments in Europe 2004

<http://www.unicef.org/infobycountry>

(own calculations)

* Provisional figures

Fertility rate

	1995	2000	2001	2002	2003
Region of Flanders	1.50				
Belgium	1.56	1.66	1.64	1.62	
<i>Neighbouring countries</i>					
Germany	1.25	1.38	1.35	1.31	
France	1.71	1.88	1.89	1.89	1.89
Luxembourg	1.69	1.76	1.66	1.63	1.63
The Netherlands	1.53	1.72	1.71	1.73	1.75
<i>Nordic countries</i>					
Finland	1.81	1.73	1.73	1.72	1.76
Denmark	1.80	1.77	1.74	1.72	1.76
Sweden	1.73	1.54	1.57	1.65	1.71
<i>Mediterranean countries</i>					
Greece	1.32	1.29	1.25	1.30	
Italy	1.20	1.24	1.23	1.20	1.29
Portugal	1.41	1.55	1.45	1.47	1.44
Spain	1.18	1.24	1.26	1.25	1.30
Austria	1.42	1.36	1.33	1.39	1.38
The United Kingdom	1.71	1.64	1.63	1.64	1.71
Ireland	1.84	1.90	1.96	2.00	1.98

1.39 Overall fertility rate per woman from 1995 onwards in the EU-15 countries

Sources: Council of Europe, Recent demographic developments in Europe 2004

NIS, Population statistics

Final number of offspring (1)

	1955	1960	1965	1967
Belgium	1.83	1.86		
<i>Neighbouring countries</i>				
Germany	1.82	1.60	1.48	1.46
France	2.13	2.11	2.02	1.99
Luxembourg	1.69	1.76	1.82	1.82
The Netherlands	1.87	1.85	1.77	1.75
<i>Nordic countries</i>				
Finland	1.90	1.96	1.91	1.87
Denmark	1.84	1.90	1.92	1.92
Sweden	2.03	2.04	1.98	1.94
<i>Mediterranean countries</i>				
Greece	2.01	1.93	1.75	1.72
Italy	1.80	1.67	1.49	
Portugal	2.04	1.89	1.82	1.78
Spain	1.90	1.76	1.59	1.56
Austria	1.77	1.70	1.64	1.60
The United Kingdom	2.03	1.98	1.90	1.88
Ireland	2.67	2.41	2.18	

1.40 Average number of children per woman at the end of her fertile years (age 49) for the generations born 1955, 1960, 1965 and 1967

Source: Council of Europe, *Recent demographic developments in Europe 2004*

(1) Where a cohort has not yet reached the age of 49, the final number of offspring is estimated based on the observed fertility rates of the earlier generations

Age on giving birth

	1995	2000	2001	2002	2003
Region of Flanders	28.7	29.2	29.2	29.3	29.4
Belgium	28.4				
<i>Neighbouring countries</i>					
Germany	28.3	28.7	28.8		

France	29.0	29.4	29.4	29.5	29.5
Luxembourg	29.0	29.3	29.3	29.5	29.6
The Netherlands	30.0	30.3	30.3	30.4	
<i>Nordic countries</i>					
Finland	29.3	29.6	29.7	29.7	30.0
Denmark	29.2	29.7	29.7	29.9	30.1
Sweden	29.2	29.9	30.0	30.1	30.3
<i>Mediterranean countries</i>					
Greece	28.2	29.1	NA	29.4	
Italy	29.7	30.3	30.3		
Portugal	28.0	28.6	28.7	28.8	
Spain	30.0	30.7	NA	30.8	
Austria	27.7	28.2	28.4	28.6	28.8
The United Kingdom	28.2	28.3	NA	28.7	28.8
Ireland	30.2	30.6	30.7	30.6	

1.41 Average age of women giving birth from 1995 onwards in the EU-15 countries

Sources: Council of Europe, *Recent demographic developments in Europe 2004*
 Study Centre for Perinatal Epidemiology (SPE)

NA: not available

Age on giving birth to the first child

	1995	2000	2001	2002	2003
Region of Flanders	27.1	27.5	27.5	27.7	27.7
Belgium	27.3				
<i>Neighbouring countries</i>					
Germany	27.5	28.2	28.4		
France	28.1	27.9	28.0		
Luxembourg	27.4	28.4	28.3	28.8	28.7
The Netherlands	28.4	28.6	28.6	28.7	
<i>Nordic countries</i>					
Finland	27.2	27.4	27.5	27.6	27.9
Denmark	27.5	27.7			
Sweden	27.2	27.9	28.2	28.3	28.5
<i>Mediterranean countries</i>					
Greece	26.6	27.5	NA	27.9	

Italy	28.0				
Portugal	25.7	26.5	26.6	26.8	
Spain	28.4	29.1	NA	29.2	
Austria	25.7	26.4	NA	26.8	26.9
The United Kingdom	26.1	26.5	NA	26.7	26.9
Ireland	27.3	27.8	28.0	27.8	28.2

1.42 Average age of women giving birth to the first child from 1995 onwards in the EU-15 countries

Sources: Council of Europe, *Recent demographic developments in Europe 2004*

Study Centre for Perinatal Epidemiology (SPE)

NA: not available

Teenage fertility rates

	1995	2000	2001	2002	2003
Belgium	50				
<i>Neighbouring countries</i>					
Germany	64	66	66		
France	48	54	57	55	
Luxembourg	51	62	60	63	56
The Netherlands	29	36	39	38	
<i>Nordic countries</i>					
Finland	49	51	53	54	50
Denmark	41	39	38	33	31
Sweden	42	35	33	35	30
<i>Mediterranean countries</i>					
Greece	65	53	54	53	
Italy	32	35	34		
Portugal	99	107	100	102	
Spain	38	43	47	48	
Austria	86	68	67	68	65
The United Kingdom	144	147	141	137	134
Ireland	79	96	97	97	

1.43 Number of births per 1 000 women under the age of 20

Source: Council of Europe, *Recent demographic developments in Europe 2004*

Teenage births

	15- to 17-year-olds	18- to 19-year-olds
Belgium	3.4	19.6
<i>Neighbouring countries</i>		
Germany	5.3	25.2
France	3.4	18.6
Luxembourg	3.0	19.7
The Netherlands	2.2	12.0
<i>Nordic countries</i>		
Finland	2.6	19.4
Denmark	2.5	15.6
Sweden	2.2	13.0
<i>Mediterranean countries</i>		
Greece	5.3	20.4
Italy	2.9	11.6
Portugal	11.8	33.5
Spain	4.2	12.8
Austria	5.1	28.2
The United Kingdom	16.6	51.8
Ireland	8.2	34.4

1.44 Number of births per 1 000 women aged 15 to 17 and aged 18 to 19 in 1998

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

Births outside marriage per 100 births

	1995	2000	2001	2002	2003
Region of Flanders	11.7				
Belgium	17.3				
<i>Neighbouring countries</i>					
Germany	16.1	23.4	23.6	26.1	27.0
France	37.6	42.6	43.7	44.3	
Luxembourg	13.1	21.9	22.3	23.2	25.0
The Netherlands	15.5	24.9	27.2	29.0	30.7

Nordic countries

Finland	33.1	39.2	39.6	39.9	40.0
Denmark	46.5	44.6	44.6	44.6	44.9
Sweden	53.0	55.3	55.5	56.0	56.0

Mediterranean countries

Greece	3.0	4.0	4.3	4.4	
Italy	8.1	9.7	NA	12.2	13.6
Portugal	18.7	22.2	23.8	25.5	26.9
Spain	11.1	17.7	19.7	21.8	

Austria	27.4	31.3	33.1	33.8	35.3
The United Kingdom	33.6	39.5	NA	40.6	41.5
Ireland	22.3	31.5	31.2	31.1	31.4

EU-15	35.6				
-------	------	--	--	--	--

1.45 Number of births outside marriage in the EU-15 countries from 1995 onwards

Sources: NIS, Population statistics

Council of Europe, Recent demographic developments in Europe, 2004

NA: not available

Number of abortions per 100 births

	1995	2000	2001	2002	2003
Region of Flanders	NA	9.9	10.9	10.8	11.2
Belgium	NA	12.0	13.0	13.3	13.9
<i>Neighbouring countries</i>					
Germany	12.8	17.6	18.4	18.1	
France	24.6	NA	25.8	27.0	
Luxembourg	NA				
The Netherlands	11.0				
<i>Nordic countries</i>					
Finland	15.7	19.3	19.0	19.6	18.9
Denmark	25.4	23.4	23.4	23.4	23.4
Sweden	30.4	34.3	34.7	34.8	34.8
<i>Mediterranean countries</i>					
Greece	NA				
Italy	26.0	25.5	24.7	24.5	

Portugal	NA		
Spain	13.6	16.0	
Austria	2.8	3.0	3.1
The United Kingdom	NA		
Ireland	NA		

1.46 Number of abortions per 100 births from 1995 onwards in the EU-15 countries

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

Council of Europe, Recent demographic developments in Europe, 2004

NA: not available

7.2. Number of young children

The Region of Flanders is a *small region* within Europe. With 307 914 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 2004, there were a total of approximately 20.2 million children under 5 in the European Union (estimated figure).

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.

Over the years the *number* of young children has decreased in most of the EU-15 countries. There were 11.2% fewer children under 5 in the Region of Flanders in 2004 than in 1995. The Region of Flanders is one of the areas where the numbers are falling most steeply. The decrease is most marked in Sweden (-20.3%). In France, Luxembourg, the Netherlands and Spain, the number of young children was higher in 2004 than in 1995.

Table 1.47 shows the number of children under 5 from 1995. Table 1.48 shows the percentage change using 1995 as the base year. Table 1.49 presents the trend in the number of young children in the total population.

The *number of young children as a percentage of the total population* has fallen since 1995 in all the EU-15 countries except France and Spain, where the percentage was slightly higher in 2004. Sweden has had the biggest fall, from 6.9 to 5.4 (see Table 1.49).

Number of children aged under 5

	1995	2000	2001	2002	2003	2004
Region of Flanders	346 902	320 682	317 748	314 061	310 073	307 914

Belgium	615 100	577 217	577 249	575 795	572 656	571.374
<i>Neighbouring countries</i>						
Germany	4 190 500	3 947 634	3 943 844	3 892 984	3 804 521	3 724 320
France	3 623 500	3 598 700	3 657 400	3 705 200	3 751 000	3 786 648
Luxembourg	27 230	28 598	28 320	28 214	27 936	27 880
The Netherlands	988 700	983 500	1 001 100	1 014 600	1 022 600	1 021 216
<i>Nordic countries</i>						
Finland	327 700	297 522	291 275	286 792	283 195	283 137
Denmark	335 100	340 593	337 437	335 358	332 056	330 377
Sweden	605 700	468 716	457 850	455 767	462 499	472 886
<i>Mediterranean countries</i>						
Greece	518 900	502 636	NA	506 210	504 864	
Italy	2 769 500	2 658 974	2 683 051	2 616 503	2 644 633	2 701 151
Portugal	557 300	556 690	534 286	541 541	551 086	557 395
Spain	1 935 200	1 926 936	1 879 425	1 926 290	2 008 390	2 088 216
Austria	472 700	422 562	414 486	401 200	397 972	395 329
The United Kingdom	3 858 800	3 607 588	3 589 588			
Ireland	259 200	263 643	269 379	276 539	283 075	
EU-15	21 085 130	20 181 572				

1.47 Number of children under 5 years old in the EU-15 countries since 1995

Sources: Council of Europe, *Recent demographic developments in Europe, 2004*

NIS, *Population statistics*

NA: not available

Trend in the number of children aged under 5

	1995	2000	2001	2002	2003	2004
Region of Flanders	100	92.4	91.6	90.5	89.4	88.8
Belgium	100	93.8	93.8	93.6	93.1	92.9
<i>Neighbouring countries</i>						
Germany	100	94.2	94.1	92.9	90.8	88.9
France	100	99.3	100.9	102.3	103.5	104.5
Luxembourg	100	105.0	104.0	103.6	102.6	102.4
The Netherlands	100	99.5	101.3	102.6	103.4	103.3

Nordic countries

Finland	100	90.8	88.9	87.5	86.4	86.4
Denmark	100	101.6	100.7	100.1	99.1	98.6
Sweden	100	77.4	75.6	75.2	76.4	79.7

Mediterranean countries

Greece	100	96.9	NA	97.6	97.3	
Italy	100	96.0	96.9	94.5	95.5	97.5
Portugal	100	99.9	95.9	97.2	98.9	
Spain	100	99.6	97.1	99.5	103.8	107.9

Austria	100	89.4	87.7	84.9	84.2	83.6
The United Kingdom	100	93.5	93.0			
Ireland	100	101.7	103.9	106.6	109.2	
EU-15	100	95.7				

1.48 Trend in the number of children aged under 5 from 1995 onwards in the EU-15 countries (1995 = 100)

Sources: Council of Europe, *Recent demographic developments in Europe, 2004* (own calculations)

NIS, *Population statistics*

NA: not available

Percentages of young children

	1995	2000	2001	2002	2003	2004
Region of Flanders	5.9	5.4	5.3	5.3	5.2	5.1
Belgium	6.1	5.6	5.6	5.6	5.5	5.5
<i>Neighbouring countries</i>						
Germany	5.1	4.8	4.8	4.7	4.6	4.5
France	6.2	6.1	6.2	6.2	6.3	6.3
Luxembourg	6.7	6.6	6.4	6.4	6.2	6.2
The Netherlands	6.4	6.2	6.3	6.3	6.3	6.3
<i>Nordic countries</i>						
Finland	6.4	5.8	5.6	5.5	5.4	5.4
Denmark	6.4	6.4	6.3	6.2	6.2	6.1
Sweden	6.9	5.3	5.2	5.1	5.2	5.4
<i>Mediterranean countries</i>						
Greece	5.2	4.8	NA	4.6	4.6	
Italy	4.8	4.6	4.6	4.6	4.6	4.7

Portugal	5.6	5.4	5.2	5.2	5.3	5.3
Spain	4.9	4.9	4.7	4.8	4.9	5.1
Austria	5.9	5.2	5.2	5.0	4.9	4.9
The United Kingdom	6.6	6.1	6.0			
Ireland	7.2	7.0	7.0	7.1	7.1	
EU-15	5.7	5.4				

1.49 Age structure: percentages of children aged under 5 in the overall population from 1995 onwards in the EU-15 countries

Sources: Council of Europe, *Recent demographic developments in Europe, 2004*

NIS, *Population statistics*

NA: not available

7.3. Intercountry adoption

Of all the EU-15 countries, the lowest figure for the relative number of *intercountry* adoptions is the UK, with 0.48 per 100 000 inhabitants. Germany, Flanders and the French Community also have very small numbers of intercountry adoptions: 2.08 per 100 000 inhabitants in Germany, 2.38 in Flanders and 3.15 in the French Community. Spain, Denmark, Luxembourg and Sweden have a much higher rate of intercountry adoptions than Flanders (see Tables 1.50 and 1.51).

Adoptions

Receiving country	1995	2000	2001	2002	2003	2004
Flemish Community (1)	202	210	173	187	165	143
French Community (1)	228	290	246	257	366	
<i>Neighbouring countries</i>						
Germany	1 643	1 891	1 789	1 919	1 720	
France	3 034	2 971	3 094	3 551	3 995	3 769
Luxembourg (1)	74	59	61	49	53	61
The Netherlands	661	1 193	1 122	1 130	1 154	1 307
<i>Nordic countries</i>						
Finland	102	198	218	246	238	289
Denmark	541	716	631	609	522	527

Sweden	895	981	1 044	1 107	1 046	1 109
<i>Mediterranean countries</i>						
Greece	NA					
Italy	NA	NA	1 797	2 225	2 772	3 398
Portugal	NA					
Spain	NA	3 062	3 428	3 625	3 951	
Austria	NA					
The United Kingdom	NA	312	326	329	286	
Ireland	NA					

1.50 Trend in the numbers of intercountry adoptions in the EU-15 countries from 1995 onwards

Source: Information provided by the central authorities

(1) adoptions arranged through an authorised adoption service only

NA: not available

Receiving country	Adoptions per 100 000					
	1995	2000	2001	2002	2003	2004
Flemish Community (1) (2)	3.44	3.54	2.91	3.13	2.75	2.38
French						
Community (2)(3)	2.25	2.83	2.39	2.50	2.56	3.15
<i>Neighbouring countries</i>						
Germany	2.02	2.30	2.17	2.33	2.08	
France	5.23	5.06	5.24	5.98	6.70	6.29
Luxembourg (2)	18.20	13.54	13.88	11.03	11.82	11.53
The Netherlands	4.31	7.52	7.02	7.02	7.13	8.04
<i>Nordic countries</i>						
Finland	2.00	3.83	4.21	4.74	4.57	5.54
Denmark	10.37	13.43	11.80	11.34	9.70	9.76
Sweden	10.15	11.07	11.75	12.43	10.70	12.36
<i>Mediterranean countries</i>						
Greece	NA					
Italy	NA	NA	3.11	3.95	4.84	5.91
Portugal	NA					
Spain	NA	7.76	8.54	8.97	9.71	
Austria	NA					

The United Kingdom	NA	0.52	0.54	0.56	0.48
Ireland	NA				

1.51 Trend in the numbers of intercountry adoptions per 100 000 inhabitants in the EU-15 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

CH2.

FAMILIES WITH YOUNG CHILDREN: INCREASING DIVERSITY

In this section, we discuss the family context of young children in Flanders. We 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, diversity among the families, older parents and grandparents. The gender roles within families in which children are growing up are described.

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

Finally, some of the figures for Flanders are set in a European context, by comparing them with the EU-15 countries.

Some of the data is no longer gathered from surveys but comes from the National Register and so relates to the whole population. This information was released by the Centre for Population and Family Research.

1. Two-parent or one-parent family?

Young children in one-parent families are still the exception

Most young children live in a *two-parent family*. The number of children aged under 3 living in a *one-parent family* amounts to 7.3%; the figure is 10.4% for children aged 3 to 6, and 13.5% for children of primary school age (see Table 2.1 and Figure 2.2). The number of children under 12 living in a one-parent family has been increasing, by 0.4% between 2003 and 2004. The increase was slightly greater for children aged 6 to 12 (+0.6%) than for younger children (see Table 2.1).

Two-parent or one-parent family

	2003*	2004*
Children under 3		
One-parent family	7.1	7.3
Two-parent family	87.4	87.1
Other/not known	5.5	5.6
Total	100.0	100.0
Children aged 3-6		
One-parent family	10.0	10.4
Two-parent family	86.3	85.8

Other/not known	3.6	3.7
Total	100.0	100.0
Children aged 6-12		
One-parent family	12.9	13.5
Two-parent family	84.5	83.8
Other/not known	2.5	2.6
Total	100.0	100.0
Total number of children under 12		
One-parent family	10.9	11.3
Two-parent family	85.6	85.1
Other/not known	3.5	3.6
<hr/>		
Total	100.0	100.0

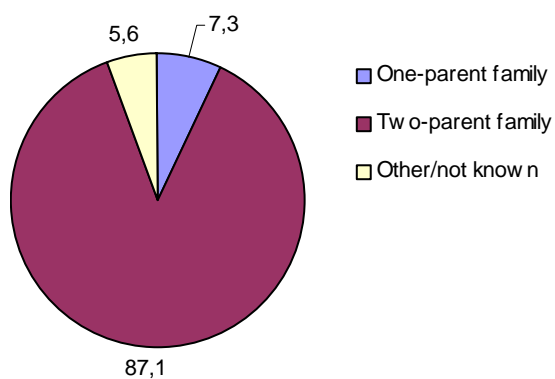
2.1 Children under 12 years according to whether they live in a two-parent or one-parent family – Region of Flanders (percentages)

Source: data from the National Register – edited by E. Lodewijckx, Centre for Population and Family Research (CBGS)

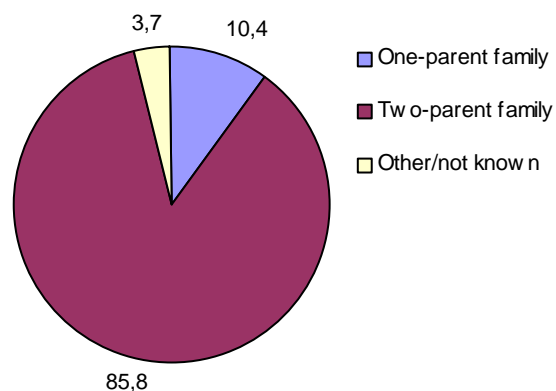
* Situation on 1/1

Two-parent or one-parent family

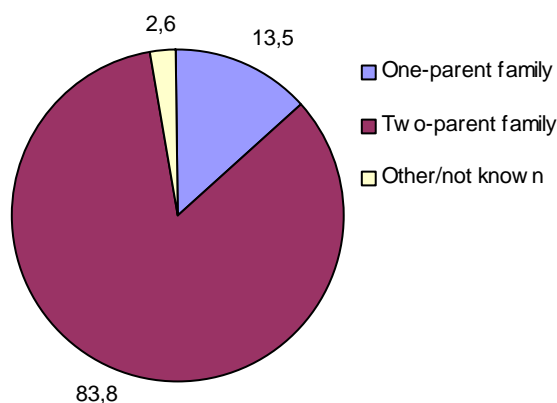
Children under 3



Children aged 3-6



Children aged 6-12



2.2 Children under 12 years according to whether they live in a two-parent or one-parent family – Region of Flanders – 2004

Source: data from the National Register – edited by E. Lodewijckx, Centre for Population and Family Research (CBGS)

2. Type of family

The classic nuclear family is in decline; almost 20% of very young children are being brought up by a cohabiting couple. A small number of children live with a step-parent

The decline of the classic nuclear family is regularly in the news, but data on the families in which young children live show that for them the traditional nuclear family is still usually the norm. Over 71% of children aged under 12 live with their *natural father and mother*, who are also a *married couple* (see Table 2.3). A difference is to be found, however, between the very young and the somewhat older children.

19.3% of children under the age of 3 live with an unmarried couple. For children aged 3 to 6, this is 11.5% and for children aged 6 to 12, 7.1%. Since 2003 there has been an increase in the number of children under the age

of 12 who are being brought up by a cohabiting couple, from 9.7% to 11%.

Most children who live with one parent live with their mother: 10.1% of children under 12 live with a single mother and only 1.2% live with a single father. The number of children living with a single mother increased slightly from 2003 to 2004 (+0.4%); the number of children living with a single father remained virtually unchanged (see Table 2.3).

3.4% of children under 12 live with one parent and a step-parent (see Table 2.3).

Type of family

	2003*		2004*		Total
	Total	Children under 3	Children aged 3-6	Children aged 6-12	
Child with married couple	75.9	67.9	74.3	76.7	74.1
<i>With both natural parents</i>	73.2	67.5	71.9	72.5	71.2
<i>With one parent and a step-parent</i>	1.0	0.1	0.5	1.6	1.0
<i>With one parent and a ?step-parent? (1)</i>	1.8	0.3	1.9	2.5	1.9
Child with unmarried couple	9.7	19.3	11.5	7.1	11.0
<i>With both natural parents</i>	0.0	0.0	0.0	0.0	0.0
<i>With one parent and a step-parent</i>	2.3	0.9	1.8	3.3	2.4
<i>With one parent and a ?step-parent? (1)</i>	7.4	18.4	9.7	3.8	8.6
Child with single mother	9.7	6.5	9.4	12.0	10.1
Child with single father	1.2	0.7	1.0	1.6	1.2
Child classed as non-family or other relation(2)	2.9	4.7	3.1	2.1	2.9
Child not classified	0.6	0.9	0.6	0.5	0.6
Child in collective household	<0.1	<0.1	<0.1	<0.1	<0.1
Total	100.0	100.0	100.0	100.0	100.0

2.3 Type of family in which children under 12 are living – Region of Flanders (percentages)

Source: data from the National Register – edited by E. Lodewijckx, Centre for Population and Family Research (CBGS)

* Situation on 1/1

(1) ?step-parent?: indicates that this may be the stepmother/stepfather of the child, but it could also be the natural mother/father

(2) Children who live in a nuclear family that is not their parents (e.g. with grandparents)

3. Only child?

The majority of young children do not grow up as the only child in the family

Almost 70% of children under 12 have 1 or 2 brothers or sisters. 21.5% of the children are only children and 9.2% have 3 or more brothers or sisters. Table 2.4 shows this by age group.

Brothers and sisters (1) (2)

Children in the household	2003*			2004*	
	Children Total	Children under 3	Children aged 3-6	aged 6-12	
Only child	21.4	38.4	18.8	15.4	21.5
One other child	47.8	41.1	51.8	48.9	47.8
Two other children	21.6	14.3	20.9	24.9	21.6
Three other children	6.4	4.2	5.9	7.6	6.4
Four or more other children	2.8	2.0	2.5	3.2	2.8
Total	100.0	100.0	100.0	100.0	100.0

2.4 Number of other children with whom children under 12 are living – Region of Flanders (percentages)

Source: data from the National Register – edited by E. Lodewijckx, Centre for Population and Family Research (CBGS)

(1) These are the children who live with a married or unmarried couple or with a single parent

(2) Brothers and sisters: other children in the family under the age of 18

* Situation on 1/1

4. Children, living at home all the time or not

Joint custody arrangements on a very small scale

A number of children do not live with their family day in and day out. The first provisional findings have recently become available from research conducted by the Herman Deleeck Centre for Social Policy into the care of young children in Flanders that looked into this issue. Surveys were conducted between December 2004 and February 2005. This research found that a total of 3.4% of children under 16 do not live at home all the time. Over half of these children live with the ex-spouse or ex-partner of one of their parents part of the time (57%). Over two out of ten of these children go to boarding school and over one in ten live at home some of the time and in another family some of the time under joint custody arrangements.

Children living at home all the time or not

Living at home

All the time	96.6
Not all the time	3.4
Total	100.0
Situations of children who do not live at home all the time	
Live with a parent's ex-spouse or ex-partner	57.0
At boarding school	22.3
Joint custody arrangements	12.3
Other situation	8.4
<hr/>	
Total	100.0

2.5 Children under 16 by whether they do or do not live at home all the time – spring 2005 (provisional figures)

Source: Antwerp University, Herman Deleeck Centre for Social Policy

5. Diversity of families

Diversity or multiculturalism can be mapped in a number of different ways. It can be based on the parents' *nationality*. Another possibility is to look at the *parents' origins*. The Ikaros applicator used by Child and Family records the origin of the mother (= nationality of the mother at the time of her birth). Another option available to Child and Family is to look at the *language* in which the mother talks to her child. This has been recorded in Ikaros since April 2003.

We discuss all three markers in order to give an outline of diversity in family life.

A small number of young children are growing up in a family in which one or both parents do not have *Belgian nationality* (see Table 2.6).

7.3% of children born in 2004 were born into a family where both parents did not have Belgian nationality and 10.2% had one parent who did not have Belgian nationality.

Diversity measured by parents' nationality

	2003	2004
Both parents are Belgian	82.7	82.5
Mother is Belgian and father is not	5.0	5.1
Mother is not Belgian and father is Belgian	5.1	5.1
Neither parent is Belgian	7.2	7.3

Total	100.0	100.0
-------	-------	--------------

2.6 Live births by nationality of the parents – Region of Flanders (percentages)

Source: *Child and Family - IKAROS*

If we use the *mothers' origin* as the criterion for diversity rather than her present nationality, it turns out that over 81% of the children born in 2004 were born to mothers of Belgian origin and almost 18% had mothers who were not of Belgian origin (see Table 2.7).

Diversity measured by mother's origin (1)

	2003	2004
Mother of Belgian origin	81.7	81.3
Mother not of Belgian origin	17.4	17.9
Not known	0.9	0.8
Total	100.0	100.0

2.7 Live births by origin of the mother – Region of Flanders (percentages)

Source: *Child and Family – Ikaros*

(1) *Nationality of the mother at the time of her birth*

This diversity in families with young children is also apparent when we look at the *language* in which the *mother* talks to her *child*. This was not Dutch in the case of almost 18% of the children born in 2004. French is the next most common language (4.3%), followed by Turkish and Arabic in second and third place (see Table 2.8).

Diversity measured by language of communication between mother and child

	2003 (*)	2004
Dutch	82.7	82.3
French	4.2	4.3
Turkish	2.7	2.9
Arabic	2.3	2.5
Berber	1.4	1.5

English	1.0	1.0
Russian	0.7	0.6
Spanish	0.4	0.4
Polish	0.3	0.3
Albanian	0.3	0.3
Other languages	4.0	3.9

2.8 Live births by the language in which the mother communicates with her child – Region of Flanders – percentages

Source: *Child and Family - IKAROS*

(*) These are children born between 1/4/2003 and 31/12/2003. This information was not recorded before that.

6. Older parents?

Increasing number of older fathers: almost 12% of very young children live with a father who is 40-plus

From the data in the National Register we now know the age of the mothers and fathers of young children.

40% of children aged 0 to 3 years have a mother aged between 30 and 35 and over 30% have a mother aged between 25 and 30. Fathers are older. The age groups 35 to 40 and 40-plus together account for almost 37% of fathers.

With the children aged 3 to 6, the largest group of mothers (42.7%) are in the 30 to 35 age group. Over 58% of the fathers of these children are 35 or older.

A comparison of the age distribution of the parents of all the children under 12 with 2003, reveals an increase in the 40-plus age group for both mothers and fathers (see Table 2.9).

Older parents (1)

		2003*		2004*	
	Total	Children Under 3	Children aged 3-6	Children aged 6-12	Total
Present age of mother					
Under 20	0.1	0.4	0.0	0.0	0.1
20 to 25 years	2.7	8.7	2.5	0.2	2.7

25 to 30 years	13.2	30.9	16.2	3.9	13.1
30 to 35 years	32.5	40.3	42.7	23.0	31.8
35 to 40 years	34.1	16.2	29.4	43.5	33.8
40 years or over	17.5	3.4	9.1	29.4	18.5
Total	100.0	100.0	100.0	100.0	100.0
Present age of father					
Under 20	0.0	0.1	0.0	0.0	0.0
20 to 25 years	3.9	2.8	0.6	0.1	0.9
25 to 30 years	6.8	19.2	7.0	1.4	7.0
30 to 35 years	24.6	41.3	34.2	12.3	24.5
35 to 40 years	35.9	25.0	37.3	39.3	35.4
40 years or over	31.8	11.6	20.9	46.9	32.2
Total	100.0	100.0	100.0	100.0	100.0

2.9 Children aged under 12: present age of mother and father – Region of Flanders (percentages)

Source: data from the National Register – edited by E. Lodewijckx, Centre for Population and Family Research (CBGS)

(1) These are the adults with whom the child lives, the parent(s) or step-parent(s)

* Situation on 1/1

7. Young children and grandparents

Almost 40% of children under 12 still have four grandparents; a small number (4.8%) even have more than 4 grandparents. The percentage of children with 4 grandparents is higher for children under the age of 3 years (see Table 2.10).

Table 2.11 shows the distance from the child's home to the grandparents' home. About 40% live less than 5 km from their maternal grandmother. The figure for paternal grandmothers is almost the same.

Grandparents

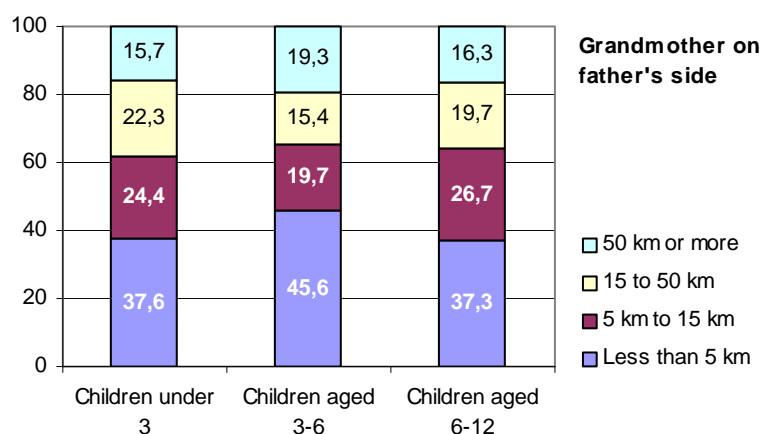
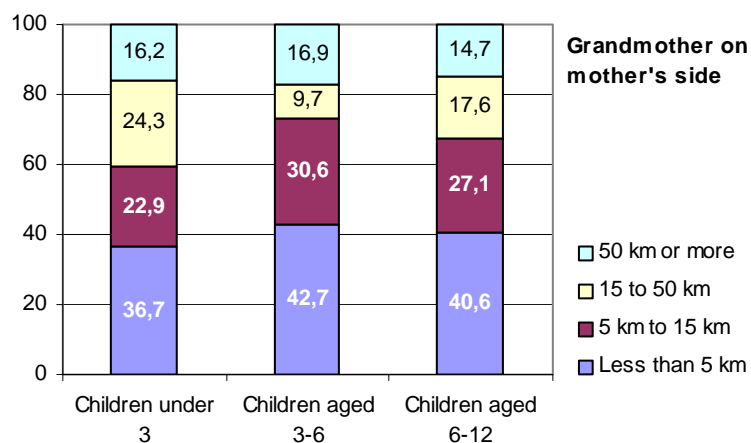
	Children Under 3	Children aged 3-6	Children aged 6-12	Total
More than 4 grandparents	4.6	7.3	3.5	4.8
4 grandparents	49.0	35.1	36.6	39.0
3 grandparents	28.0	34.4	28.1	29.8
2 grandparents	12.1	13.5	17.0	14.9

1 grandparent	5.4	8.7	12.1	9.6
No grandparents	0.8	1.0	2.7	1.8
Total	100.0	100.0	100.0	100.0

2.10 Children aged under 12: number of grandparents still living in spring 2005 (percentages – provisional figures)

Source: Antwerp University, Herman Deleeck Centre for Social Policy

Distance to grandparents



2.11. Children aged under 12: distance to the home of the maternal and paternal grandmothers - spring 2005 (percentages – provisional figures)

Source: Antwerp University, Herman Deleeck Centre for Social Policy

8. Family lifestyles in families with young children

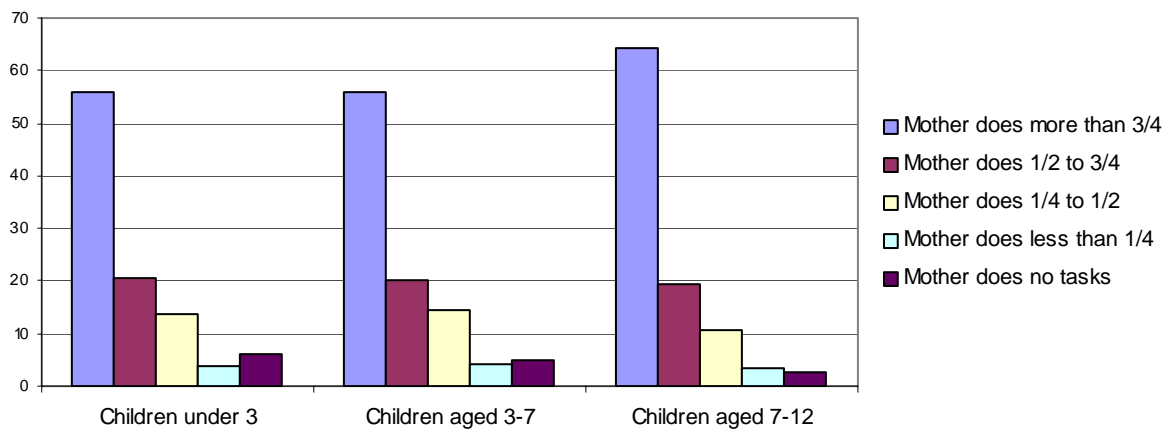
To give an idea of the family lifestyles of families with young children, we are using the division of

household tasks, the division of decision-making and the openness of families. In connection with family lifestyles, we also look at the help that families with young children receive with household tasks.

The majority of children under the age of 12 live in a family in which the mother says that she is responsible for more than half of *household tasks*. 60% of children aged under 12 live in a family in which the mother is responsible for more than three-quarters of household tasks. 20% of children aged under 12 live in a family in which the mother is responsible for between half and three-quarters of these tasks. In families with children under 3, the division of household tasks appears to be a bit more balanced: "only" 55.9% have a mother who says that she does more than three-quarters of household tasks. However, the division of tasks is less balanced than in 2001: the number of children under 3 whose mother does more than three-quarters of household tasks has increased from 51.5% to 55.9% (see Figure 2.12).

A significant number of children live in a family that *delegates household tasks to others*. This is most common for cleaning (20%), which is usually paid for. Much smaller numbers get help with ironing; this is not usually paid help (see Table 2.13).

Household tasks



2.12 Children aged under 12 by the proportion of household tasks that the mother says she does herself (children in two-parent families only - percentages)

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

Domestic help

	Children under 3	Children aged 3-7	Children aged 7-12	Total
--	------------------	-------------------	--------------------	-------

Cleaning

Paid help	24.4	20.0	18.8	20.0
Unpaid help	4.7	1.8	1.0	1.8
No help	70.9	78.2	80.3	78.2
Total	100.0	100.0	100.0	100.0
Ironing				
Paid help	8.1	1.2	3.3	3.4
Unpaid help	3.5	5.9	4.3	4.7
No help	88.4	92.9	92.4	92.0
Total	100.0	100.0	100.0	100.0

2.13 Children aged under 12: frequency of help with cleaning and ironing in their families (percentage)

Source: Panel Study of Belgian Households - year of observation 2002. 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 taken jointly by both parents. 16% 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 2.14).

Decision-making

	Children under 3	Children aged 3-7	Children aged 7-12	Total
More than half the decisions are taken jointly	59.8	54.9	59.5	58.2
More than half of the decisions are taken by the father alone	17.7	21.3	12.8	16.2
The partners do not agree on who takes half of the decisions	15.7	12.2	14.5	14.1
Other situation	6.8	11.6	13.2	11.5
Total	100.0	100.0	100.0	100.0

2.14 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 2002. 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 2.15). 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 under 3	Children aged 3-7	Children aged 7-12	Total
Closed, not very open family	11.8	7.9	12.2	10.9
Fairly open family	24.5	25.6	21.6	23.3
Very open family	63.7	66.5	66.2	65.8
Total	100.0	100.0	100.0	100.0

2.15 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 2002. Processed on behalf of Child and Family

9. Explanatory notes

9.1. Marriages

There were 24 172 *marriages* in the *Region of Flanders* in 2004; this is an increase of 881 (+3.8%) compared with 2003. The gross marriage rate is 4.02 per 1 000 inhabitants (provisional figures) (see Table 2.16 and Figure 2.17).

The *average age* upon marriage (2003; 2004 figures are not yet available) in the *Region of Flanders* is 33 years and 10 months for men and 31 years and 0 months for women. The median age is about 3 years younger: 30 years and 8 months for men and 28 years and 2 months for women (2003). Compared with 2002, both the average age and the median age went up by about six months. There is a conspicuous difference between the average age on marrying for the first time and the second time. The average age of men and women who have not been married before is 29 years and 11 months and 27 years and 8 months respectively. The average age on marrying for the first time was a little older than in 2002 for both men and women (6 and 7 months respectively). Where divorced men marry divorced women, the average age is 44

years and 1 month and 40 years and 5 months respectively (2003). The average age of marriages between divorced men and women only rose for the men (by 3 months) compared with 2002.

Marriages at a young age are fairly unusual: 2.3% of women and 0.3% of men who got married in the Region of Flanders in 2003 were under the age of 20. These figures are virtually unchanged in comparison with 2002.

Marriages

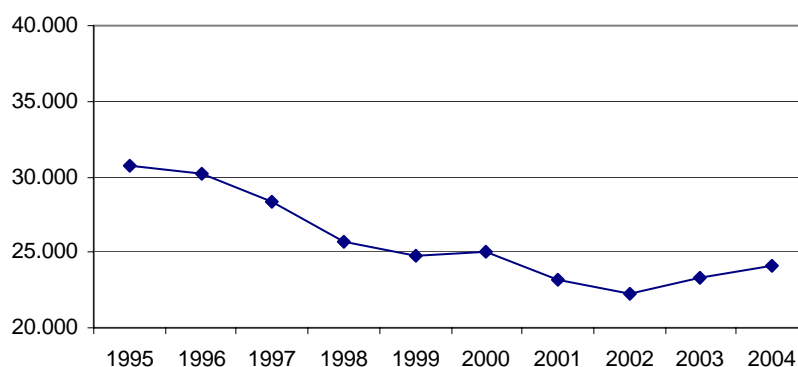
	Number	Per 1 000 inhabitants
2003	23 291	3.88
2004	24 172*	4.02*

2.16 Number of marriages in the Region of Flanders

Source: NIS - Population statistics

* Provisional figures

Marriage trend



2.17 Trend in the number of marriages in the Region of Flanders since 1995

Source: NIS – Population statistics

9.2. Relationship breakdowns

In 2004 there were 16 171 *divorces* in the *Region of Flanders*, a slight decrease (-1.3%). There were 2.69 divorces per 1 000 inhabitants in 2004 (provisional figures) (Table 2.18 and Figure 2.19).

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

Divorces

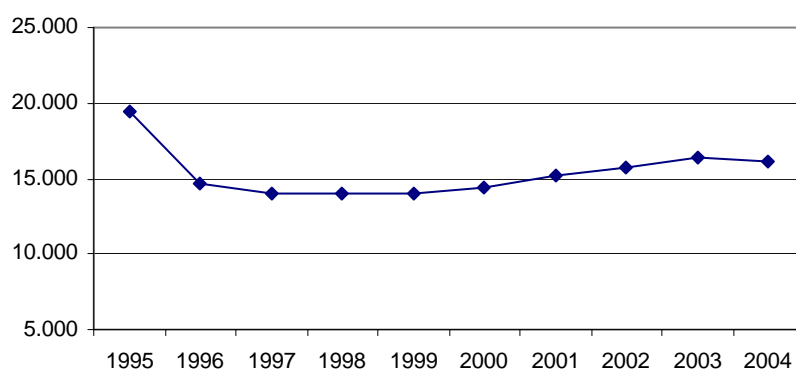
	Number	Per 1 000 inhabitants
2003	16 382	2.73
2004	16 171*	2.69*

2.18 Number of divorces in the Region of Flanders

Source: NIS - Population statistics

* Provisional figures

Divorce trend



2.19 Trend in the number of divorces in the Region of Flanders since 1995

Source: NIS – Population statistics

10. The European context

Quite a lot of 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. Running parallel to this evolution, the rise in the two main phenomena leading to one-parent families can be noted, namely the breakdown of relationships and births outside marriage.

In Belgium, 10.7% of children under 18 live in a one-parent family, a figure that is comparable with our neighbouring countries. The United Kingdom and Sweden have much higher percentages: 20% of children or more live in a one-parent family (see Table 2.20). However, we draw your attention to the fact that these figures are not recent.

Children in one-parent families (1)

	1991	2000
Belgium	5.3*	10.7**
<i>Neighbouring countries</i>		
Germany	10.4***	12.4
France	NA	NA
Luxembourg	5.8	7.1
The Netherlands	9.5	8.6****
<i>Scandinavian countries</i>		
Finland	11.5	15.0
Denmark	NA	NA
Sweden	17.9	20.9
<i>Mediterranean countries</i>		
Greece	NA	NA
Italy	6.1	5.7
Portugal	NA	NA
Spain	NA	NA
Austria	NA	NA
The United Kingdom	17.8	23.8****
Ireland	NA	NA

2.20 Children in one-parent families in the EU-15 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, 2005, report card no 6*

(1) children aged under 18

* 1988 **1997

*** 1989 ****1999

NA: not available

The *marriage rate* (= number of marriages per 1 000 inhabitants) in the Region of Flanders is very low (see Table 2.21). The figure for the Region of Flanders is lower than that of all other EU-15 countries. The marriage rate is highest in Denmark.

The number of marriages per 1 000 inhabitants has fallen in most of the countries studied over the past decade. This falling trend is coupled with marriage at an ever later age and an increase in other forms of cohabitation.

Marriages per 1 000

	1995	2000	2001	2002	2003	2004
Region of Flanders	5.2	4.2	3.9	3.7	3.9	4.0
Belgium	5.1	4.4	4.1	3.9	4.0	4.2
<i>Neighbouring countries</i>						
Germany	5.3	5.1	4.7	4.8	4.6	
France	4.4	5.1	4.9	4.7	4.6	
Luxembourg	5.1	4.9	4.5	4.5	4.4	
The Netherlands	5.3	5.5	5.1	5.3	5.0	
<i>Scandinavian countries</i>						
Finland	4.6	5.1	4.8	5.2	5.0	
Denmark	6.6	7.2	6.8	6.9	6.5	
Sweden	3.8	4.5	4.0	4.3	4.4	
<i>Mediterranean countries</i>						
Greece	6.1	4.6				
Italy	5.1	4.9	4.5	4.6	4.5	
Portugal	6.6	6.2	5.7	5.4	5.1	
Spain	5.1	5.4	5.1	5.1	5.0	
Austria	5.4	4.9	4.3	4.5	4.6	
The United Kingdom	5.5	5.2	4.8			
Ireland	4.3	5.0	5.0	5.1	5.1	

2.21 Number of marriages per 1 000 inhabitants (gross marriage rate) in the EU-15 countries since 1995.

Sources: Council of Europe, *Recent demographic developments in Europe, 2004*

NIS, Population statistics

In most of the EU-15 countries there are about 2 to 3 *divorces* per 1 000 inhabitants. The Mediterranean countries in the EU, with the exception of Portugal, have lower divorce rates (see Table 2.22).

Divorces per 1 000 inhabitants

	1995	2000	2001	2002	2003	2004
Region of Flanders	3.3	2.6	2.6	2.6	2.7	2.7
Belgium	3.5	2.6	2.8	3.0	3.0	3.0
<i>Neighbouring countries</i>						

Germany	2.1	2.4	NA	2.5	2.6
France	2.1	1.9	1.9	2.2	
Luxembourg	1.8	2.4	NA	2.4	2.3
The Netherlands	2.2	2.2	2.3	2.1	1.9
<i>Scandinavian countries</i>					
Finland	2.7	2.7	2.6	2.6	2.6
Denmark	2.5	2.7	2.7	2.8	2.9
Sweden	2.6	2.4	2.4	2.4	2.4
<i>Mediterranean countries</i>					
Greece	1.0	1.0	NA	1.0	
Italy	0.5	0.7	NA	0.7	
Portugal	1.2	1.9	1.8	2.7	2.2
Spain	0.8	1.0	0.9	1.0	1.1
Austria	2.3	2.4	2.6	2.4	2.3
The United Kingdom	2.9	2.6	2.6	2.7	
Ireland	NA	0.7	0.7	0.7	0.7

2.22 Number of divorces per 1 000 inhabitants in the EU-15 countries since 1995.

Sources: Council of Europe, *Recent demographic developments in Europe, 2004*

NIS, *Population statistics*

NA: not available

CH 3.

PROSPERITY AND DEPRIVATION

The welfare of children is highly dependent on the prosperity of their families and parents' employment is an important factor for the standard of living of the family. Having work still offers the main protection against poverty. This chapter starts by looking at participation in employment in families with young children. For the first time data is available on the employment of parents of young children for the whole population, since the Labour Market Data Warehouse of the Crossroads Bank for Social Security recently added a classification of individuals by position in the family to its records.

We also discuss certain aspects of employment, such as full-time/part-time work, working outside normal working hours and working set or variable hours. These aspects affect the availability of parents for their caring work.

Next we look at the income level of families with young children in Flanders, before going on to examine deprivation in these families.

We 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.

Lastly, the situation in Flanders is compared with the situation in the EU-15 countries.

1. Employment of parents of young children

In line with the purpose of "The Child in Flanders", this section presents a number of figures on the employment of the parents of young children, with the child as the unit of calculation. These data are population data from the Labour Data Warehouse of the Crossroads Bank for Social Security, and data from the Panel Study of Belgian Households, a questionnaire administered to a small sample of households.

1.1 Participation of parents of young children in employment

Most children live with parents who are in employment; only a small number of children live in a family with no adult in work

Nine out of ten children under the age of 12 have at least one parent* who is at work. Over 56% live in a family where both parents* work. Table 3.1 shows the situation by the age of the child.

Parents' employment

	Children Under 3	Children aged 3-6	Children aged 6-12	Total
Two working	57.8	57.6	55.0	56.3
One working and one seeking work and receiving benefit	4.5	3.9	3.2	3.6
One working and one not in paid employment and receiving benefit (1)	7.1	5.0	2.3	4.1
One working and one not in paid employment	16.4	18.0	22.0	19.7
Two parents seeking work and receiving benefit and/or not in paid employment (1)	5.3	4.5	4.2	4.5
One working	4.1	6.2	8.4	6.9
One seeking work and receiving benefit	2.0	2.2	2.2	2.1
One not in paid employment and receiving benefit (1)	0.3	0.3	0.3	0.3
One not in paid employment	2.2	2.3	2.5	2.4
Not known	0.2	0.1	0.1	0.1
<i>Total with at least one working parent in the family</i>	<i>90.0</i>	<i>90.7</i>	<i>90.8</i>	<i>90.6</i>
<i>Total with no working parent in the family</i>	<i>9.8</i>	<i>9.2</i>	<i>9.2</i>	<i>9.3</i>
Total	100.0	100.0	100.0	100.0

3.1 Children under 12 according to parents' employment, or employment of the reference person and his/her partner if the child does not live with his/her parents – Region of Flanders – 2001 (percentages)

Source: *Labour Data Warehouse of the Crossroads Bank for Social Security*

(1) Not in paid employment and receiving benefit: covers full-time early retirement, full-time career break and those exempt from registering as job-seekers

Parental participation in employment varies depending on the type of family the child is living in. Children living with a single mother are more likely to live in a family where no-one has paid employment. For children under the age of 3 living with a single mother, only 47.5% of the mothers work. For children aged 3 to 6, this is 58.5% and for children aged 6 to 12, 64%. Their mothers are more likely to be job-seekers receiving unemployment benefit. Of the children living with a single father, there are quite a lot whose father does not work. In the case of almost 21% of the children living with a single father, the father does not work (see Table 3.2 and Figure 3.3).

* Parents: the term 'parents' means the child's parents if he/she is living with them, or the reference person and his/her partner if the child is living in a different type of family.

Parents' employment and type of family

	Children	Children	Children	Total
--	----------	----------	----------	-------

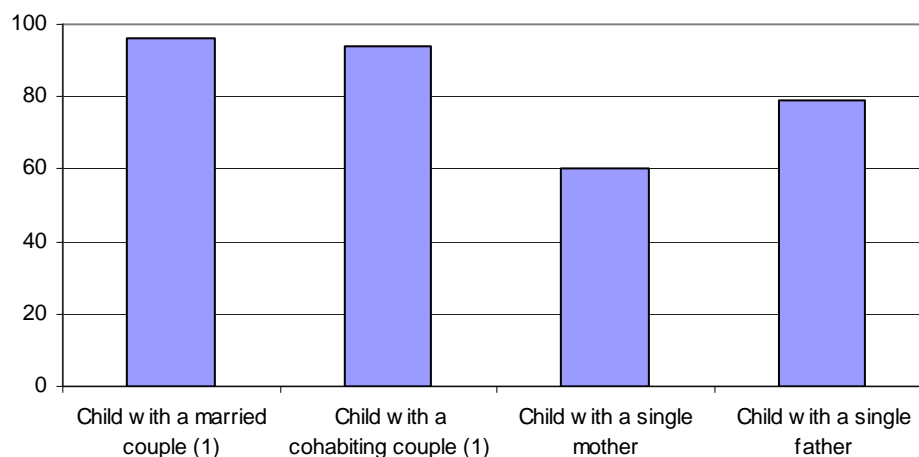
	aged 0-3	aged 3-6	aged 6-12	
Child with a married couple				
Both parents working	65.2	65.8	64.1	64.8
One parent working, one parent seeking work and receiving benefit	3.9	4.0	3.4	3.7
One parent working, one parent not in paid employment and receiving benefit (1)	8.2	5.8	2.6	4.6
One parent working, the other parent not in paid employment	18.3	20.6	25.9	23.0
<i>Total with one or both parents working</i>	<i>95.7</i>	<i>96.2</i>	<i>96.0</i>	<i>96.0</i>
Other	4.3	3.8	4.0	4.0
Total	100.0	100.0	100.0	100.0
Child with a cohabiting couple				
Both parents working	65.8	66.5	66.8	66.3
One parent working, one parent seeking work and receiving benefit	7.8	7.9	7.3	7.7
One parent working, one parent not in paid employment and receiving benefit (1)	6.9	5.1	2.9	5.1
One parent working, the other parent not in paid employment	13.7	14.2	16.7	14.9
<i>Total with one or both parents working</i>	<i>94.2</i>	<i>93.7</i>	<i>93.7</i>	<i>93.9</i>
Other	5.8	6.3	6.3	6.1
Total	100.0	100.0	100.0	100.0
Child with a single mother				
Mother working	47.5	58.5	64.0	60.2
Mother seeking work and receiving benefit	29.2	23.2	18.7	21.3
Mother not in paid employment and receiving benefit(1)	3.4	2.6	1.8	2.2
Mother not in paid employment	19.9	15.8	15.5	16.2
Total	100.0	100.0	100.0	100.0
Child with a single father				
Father working	75.5	77.7	80.6	79.2
Father seeking work and receiving benefit	11.6	10.2	7.7	8.8
Father not in paid employment and receiving benefit(1)	1.6	1.8	2.0	1.9
Father not in paid employment	11.3	10.3	9.7	10.1
Total	100.0	100.0	100.0	100.0

3.2 Children under 12 according to parents' employment, or employment of the reference person and his/her partner if the child does not live with his/her parents by type of family – Region of Flanders – 2001 (percentages)

Source: Labour Data Warehouse of the Crossroads Bank for Social Security

(1) Not in paid employment and receiving benefit: covers full-time early retirement, full-time career break and those exempt from registering as job-seekers

Working parents in the family



3.3 Percentage of children under 12 by whether there is one or more working parents in the family and by type of family – Region of Flanders – 2001

Source: Labour Data Warehouse of the Crossroads Bank for Social Security

(1) One or both parents working

1.2 The extent of the employment of parents of young children

Children in two-parent families: the family with two parents in full-time jobs is the most common, but families with one-and-a-half jobs and one job are also found in significant numbers

Almost 20% of the *children in a two-parent family* have parents who both work full-time as employees. Another group, slightly more than 10%, either have both parents self-employed or one parent who is self-employed and the other who is a full-time employee. These groups together make up 30%. The parents of these children can be said to be highly active in their work and careers, belonging to full-time “two-job families”. Other children in two-parent families, 26% of the children under 12, are in families where one parent works full-time and the other parent works part-time.

A third important group are the children who live in a family where only one parent works, full-time as an employee or in self-employment, or in a family where both parents work part-time. 29.1% of the children under 12 in a two-parent family are in this situation: in a “one-job family”.

Moving on to the *children in one-parent families*, many of their parents are not in paid employment. Almost 38% of these children live with a parent – usually the mother – who does not work. Almost 29% of these children live with a parent who works full-time as an employee; over 23% have a parent who works part-time and almost 7%

have a parent who is self-employed (see Table 3.4 and Figure 3.5).

Extent of employment (1)

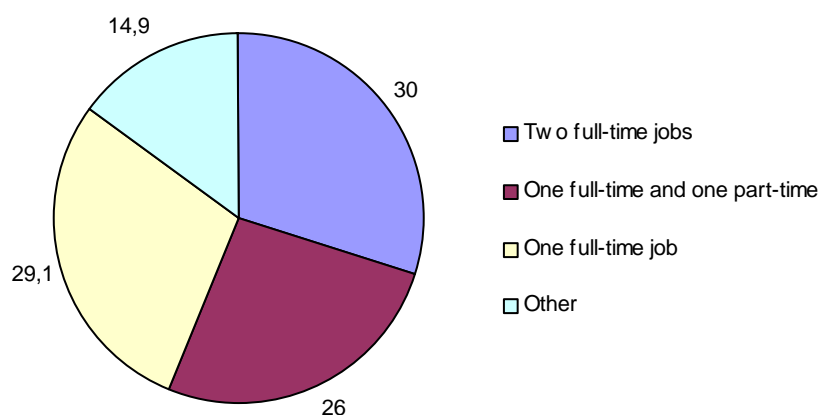
	Children aged 0-3	Children aged 3-6	Children aged 6-12	Total
Children in a two-parent family				
Both parents are full-time employees	24.6	19.9	17.1	19.5
One parent is a full-time and one parent is a part-time employee	21.1	26.6	28.0	26.0
Both parents are part-time employees	0.9	1.2	1.1	1.1
One parent is a full-time employee, one is not in paid employment	21.0	19.4	19.6	19.9
One parent is a full-time employee, one is self-employed	7.4	7.0	6.5	6.9
Both parents are self-employed	3.2	3.7	3.7	3.6
One parent is self-employed, one is not in paid employment	6.5	7.8	9.1	8.1
Other	15.5	14.5	14.8	14.9
Total	100.0	100.0	100.0	100.0
Children in a one-parent family				
Parent is a full-time employee	25.4	28.2	29.8	28.8
Parent is a part-time employee	16.2	22.2	25.3	23.2
Parent is self-employed	5.8	6.4	7.0	6.7
Parent is not in paid employment	49.1	39.5	34.0	37.6
Other	3.6	3.7	3.9	3.8
Total	100.0	100.0	100.0	100.0

3.4 Children under 12 by the extent of their parents' employment – Region of Flanders – 2001 (percentages)

Source: Labour Data Warehouse of the Crossroads Bank for Social Security

(1) Only children living with a married couple, a cohabiting couple or a single mother or father

Extent of employment



3.5 Extent of employment of the parents of children under 12 living in a two-parent family – Region of Flanders – 2001 (percentages)

Source: Labour Data Warehouse of the Crossroads Bank for Social Security

1.3 Arranging family-friendly working hours?

Combining caring for a family with work can be facilitated by arranging convenient working hours. We look at the extent to which parents work outside normal working hours and the kind of hours that they work.

For about 45% of the children whose mothers work, 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. Almost 55% of mothers do work outside normal working hours; this usually involves weekend work combined with early or late hours.

It is much more common for the fathers to work outside normal working hours. Almost 70% of the children have a father who works outside normal working hours.

Both the mothers and fathers of children who go to nursery school work outside normal working hours slightly less than the other groups of parents (see Table 3.6).

Working outside normal working hours

	Pre-school children	Children attending nursery school	Children attending primary school	Total
Not in the week before 7 a.m. or after 8 p.m. and not at the weekend	44.4	38.3	49.0	45.1

Mother works

Not in the week before

7 a.m. or after 8 p.m.

and not at the weekend

44.4

38.3

49.0

45.1

In the week before 7 a.m. or after 8 p.m.	6.7	16.0	9.7	11.0
At the weekend	9.0	11.7	7.1	8.6
In the week before 7 a.m. or after 8 p.m. and at the weekend	40.0	34.0	34.2	35.2
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	36.2	27.4	32.0	31.2
In the week before 7 a.m. or after 8 p.m.	10.6	27.4	25.2	23.8
At the weekend	8.5	7.4	6.3	6.9
In the week before 7 a.m. or after 8 p.m. and at the weekend	44.7	37.9	36.4	38.1
Total	100.0	100.0	100.0	100.0

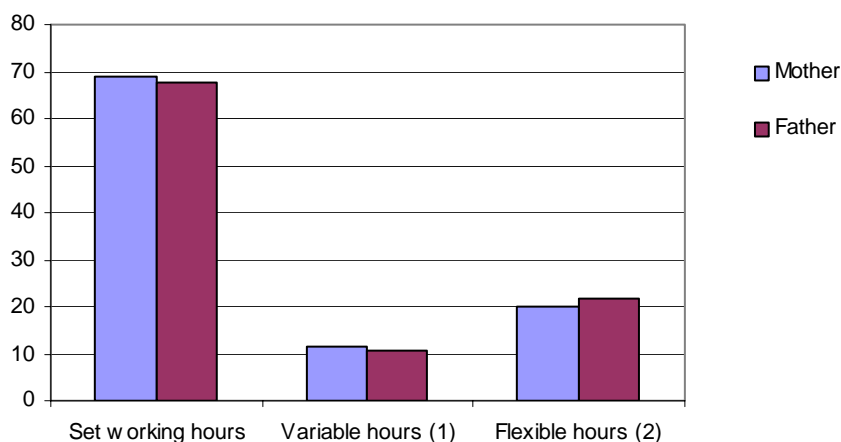
3.6 Children aged under 12: incidence of parents working outside normal working hours (percentages)

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

About 70% of the children have a mother and a father who work regular set hours.

Significantly more fathers of pre-school children work flexible hours than fathers of school children (33% compared with 20%). The opposite is the case for the mothers: flexible hours are more common among the mothers of school children (over 25% for nursery school children and almost 19% for primary school children compared with almost 13% for pre-school children) (see Figure 3.7).

Patterns of working hours



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

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

(1) Variable hours: the same number of hours every week, but the days and/or hours are not set

(2) Flexible hours: the number of hours worked varies from week to week

2. Participation in employment in families with young children from the perspective of the women

High level of employment among women with one child or their youngest child under 12, but there are differences

The Labour Data Warehouse of the Crossroads Bank for Social Security also allows you to zoom in on the employment of mothers with young children with “women” and not “children” as the unit of calculation. In view of the impact of employment participation on the family situation, we also present these data.

70% of mothers with a child under the age of 12 in the Region of Flanders were in some form of paid employment in 2001. Participation in employment is slightly lower among mothers with a child under the age of 3 (68.1%). Considerably fewer single mothers with a child under 12 are in employment than mothers who live with a partner (62.7% compared with 70.9%) (see Table 3.8).

Mothers’ employment

	One child or youngest child			
	under 3 years	3 to 6 years	6 to 12 years	Total
Mothers living with a partner				
Working in paid employment	60.1	62.3	61.2	61.1

Self-employed	6.7	7.5	7.6	7.3
Working as assistant to self-employed person	0.9	0.9	0.7	0.8
Working in paid employment and self-employed	1.7	1.7	1.7	1.7
<i>Total with paid work</i>	69.5	72.4	71.3	70.9
Job-seeker receiving benefit	5.1	4.1	3.1	4.1
Not in paid employment and receiving benefit(1)	7.7	3.4	1.0	3.9
Without paid work	17.7	20.1	24.6	21.1
Total mothers living with a partner	100.0	100.0	100.0	100.0
Single mothers				
Working in paid employment	42.6	55.4	60.0	55.3
Self-employed	4.6	5.4	5.7	5.4
Working as assistant to self-employed person	0.2	0.3	0.2	0.2
Working in paid employment and self-employed	1.2	1.8	1.9	1.7
<i>Total with paid work</i>	48.7	62.9	67.9	62.7
Job-seeker receiving benefit	28.7	20.8	16.3	20.0
Not in paid employment and receiving benefit(1)	3.3	2.3	1.7	2.2
Without paid work	19.3	13.9	14.1	15.1
Total single mothers	100.0	100.0	100.0	100.0
All mothers				
Working in paid employment	58.9	61.5	61.1	60.5
Self-employed	6.6	7.3	7.4	7.1
Working as assistant to self-employed person	0.9	0.8	0.6	0.8
Working in paid employment and self-employed	1.7	1.7	1.7	1.7
<i>Total with paid work</i>	68.1	71.3	70.8	70.0
Job-seeker receiving benefit	6.7	6.0	5.0	5.8
Not in paid employment and receiving benefit(1)	7.4	3.3	1.1	3.7
Without paid work	17.8	19.4	23.1	20.5
<hr/>				
Total	100.0	100.0	100.0	100.0
<hr/>				

3.8 Employment of all mothers (mothers with partners and single mothers) with one child or the youngest child under 12 years by age of the child/youngest child – Region of Flanders – 2001 (percentages)

Source: Labour Data Warehouse of the Crossroads Bank for Social Security

(1) Not in paid employment and receiving benefit: covers full-time early retirement, full-time career break and those exempt from registering as job-seekers

3. Family income level

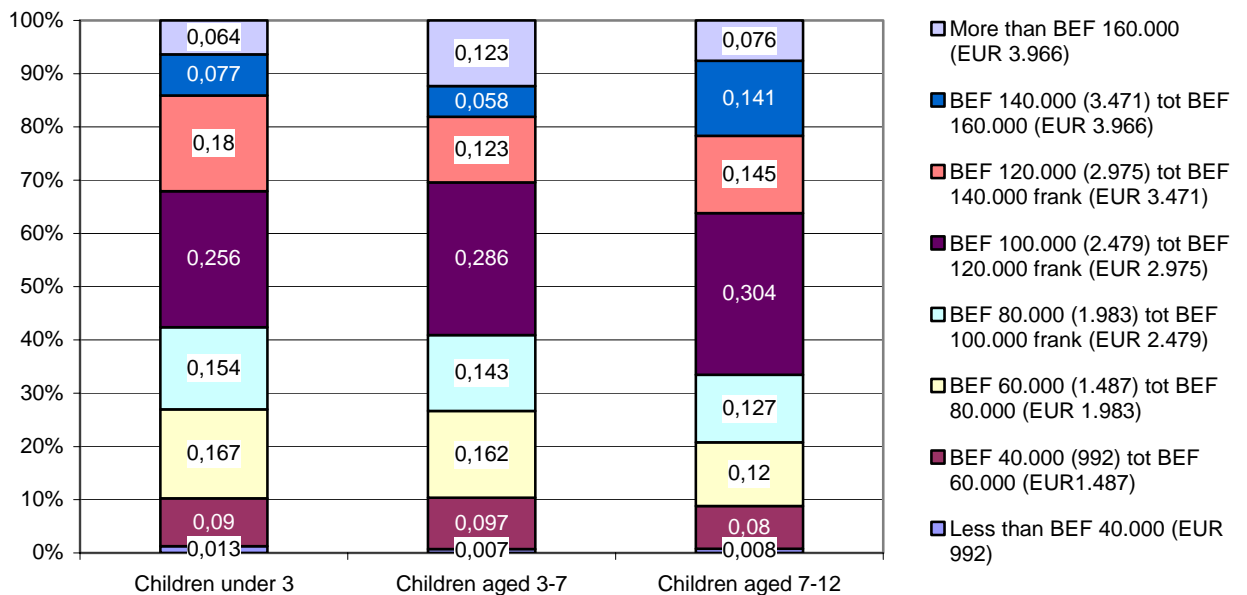
Few financial worries: most children live in a family with a decent income

Figure 3.9 gives an overview of the *net monthly disposable income* of families with young children. About 1% have to manage on a net disposable income of less than 992 euro (40 000 Belgian francs) and almost 9% on an income between 992 euro (40 000 Belgian francs) and 1 487 euro (60 000 Belgian francs). Over 36% have an income above 2 975 euro (120 000 Belgian francs) per month.

75% of young children live in a family that says it finds it quite easy or very easy to *manage*. Over 7% of children aged under 12 live in a family that finds it difficult or very difficult to manage. Over 18% live in a family that finds it quite difficult to manage on its income. Figure 3.10 shows this by age group.

This subjective opinion parallels the situation with respect to the family's *ability to save*. About 68% of the children's families manage to save (see Figure 3.11).

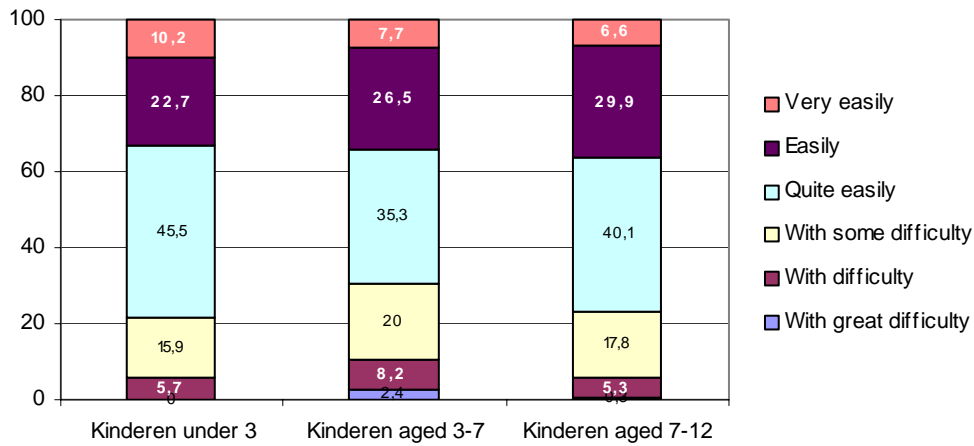
Monthly income



3.9 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 2002. Processed on behalf of Child and Family

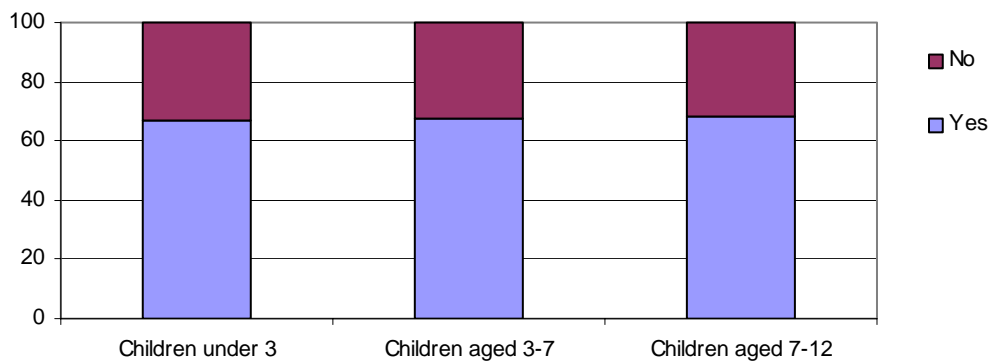
Family's assessment of its income



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

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

Saving



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

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

4. Children in families living at subsistence level

A small number of children live in families that only get a subsistence level of income

Around 14 000 children under 18 live in a family that has to manage with the subsistence level of income (1 January 2000 - no more recent figures available). This refers to dependent children (see Table 3.12).

Children in families living at subsistence level

Families with 1 child	3 218
Families with 2 children	4 088
Families with 3 children	2 937
Families with 4 children	1 904
Families with 5 or more children (1)	1 984
<hr/>	
Total number of children (1)	14 131
<hr/>	
Per 1 000 children aged under 18:	11.6

3.12 Number of children in families on a subsistence level of income by family size and number per 1 000 children under the age of 18 in the Region of Flanders - 2000

Source: Ministry of Social Affairs, Public Health and the Environment, Subsistence Income Department
(1) Estimate

5. Children in underprivileged families

A small number of children live in underprivileged families

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 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*, *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 and 31 December 2004 were assessed in accordance with the 6 criteria, and each underprivileged family was asked for information in connection with the assessment criteria. About 5.6% of children born in 2004 (in the Region of Flanders) were born into an underprivileged family (provisional figure). This percentage represented 3 498 children in the Region of Flanders. The percentage of children born into underprivileged families has remained virtually unchanged in comparison with 2003 (see Table 3.13).

Figure 3.14 shows the trend since 1995. It appears to have stabilised around 5 to 6% in recent years.

Underprivileged families

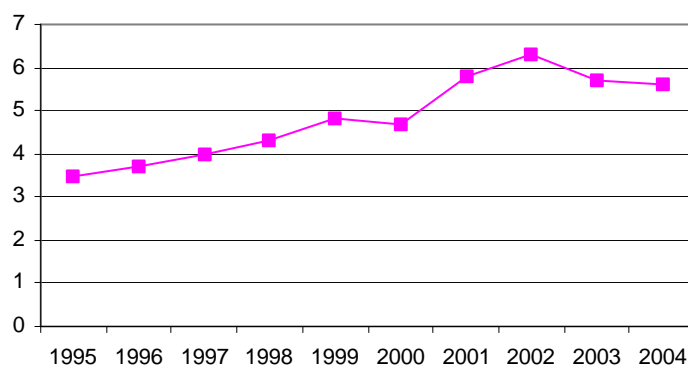
	2003	2004*
Antwerp	8.4	9.0
Flemish Brabant	2.4	2.4
West Flanders	4.9	4.1
East Flanders	5.0	4.7
Limburg	6.2	6.3
Total	5.7	5.6

3.13 Underprivileged families among families with a child born in the course of the year, by province (percentages)

Source: *Child and Family – Deprivation records*

* *Provisional figures*

Trend in underprivileged families



3.14 Trend in the percentage of underprivileged families in families with a child born in the course of the year - Region of Flanders (percentages)

Source: *Child and Family - Deprivation records*

The percentage of underprivileged families varies by *province*. The highest percentage of underprivileged families with young children, namely 9.0%, is found in the province of Antwerp, and the lowest in Flemish Brabant, with 2.4%. In the provinces of Limburg, East Flanders and West Flanders, percentages of 6.3%, 4.7% and 4.1% respectively were recorded (provisional figures)(see Table 3.13). The figures have increased since 2003, especially in the province of Antwerp, but the province of Limburg has also seen a very slight increase. In the provinces of West and East Flanders there was a decrease.

Deprivation is largely a *problem of the big cities* in Flanders. Over 43% of all children born into an

underprivileged family live in the cities of Antwerp (35.4%) and Ghent (7.8%): 1 240 and 273 births respectively.

Deprivation is coloured. The mothers of over 5 out of 10 children born into an underprivileged family did not have Belgian nationality at the time of their birth. Table 3.15 gives for the Region of Flanders the percentage of children born into an underprivileged family and the percentage not born into an underprivileged family by the origin of the mother at the time of their birth

Not having Belgian nationality undeniably increases the chance of being born into an underprivileged family.

Deprivation and origin(1)

	Number of children in underprivileged families	Number of children in non-underprivileged families
Belgian origin	45.0	83.1
EU origin, excl. Belgian	1.9	3.6
Moroccan origin	12.1	3.6
Turkish origin	8.6	2.7
Other origin	31.7	6.1
Not known	0.8	0.9
Total	100.0	100.0

3.15 Children born in 2004: percentage of children in an underprivileged family and in a non-underprivileged family with a mother with Belgian nationality at the time of her birth and with a mother of another nationality at the time of her birth - Region of Flanders

Source: *Child and Family – Deprivation records 2004*

(1) *Provisional figures*

Most underprivileged families face a *complex combination of problems*. A low monthly income and a poor work situation for the parents are the criteria indicated most often (respectively for 81.9% and 81.3% of children). A low level of education on the part of one or both parents is indicated in a good 7 out of 10 underprivileged families. Poor housing is reported for slightly over half of underprivileged families. About 33% of the children have developmental problems. The criterion of poor health scores lowest (see Table 3.16).

It also appears from the records that in the case of 48.1% of children born into an underprivileged family, the family is living in very poor socio-economic circumstances. This means that these families are poorly situated in terms of income, education and employment.

Problems of deprivation

	2003	2004*
Low monthly income	82.2	81.9
Poor employment situation of parents	81.6	81.3
Low level of education of one or both parents	68.0	70.9
Poor housing	55.8	52.6
Problems in children's development	34.6	33.3
Poor health	24.1	21.8

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

Source: *Child and Family – Deprivation records*

* *Provisional figures*

6. Children for whom guaranteed child benefit is paid

Guaranteed child benefit is paid for a small number of minors

Guaranteed child benefit is awarded when the persons responsible for the care of a child do not have enough to live on and are not entitled to support from any other child benefit scheme for employees, public servants or the self-employed. Those who are in receipt of the minimum income get this automatically without a means test. At the end of 2002, guaranteed child benefit was being paid for 3 704 minors. This was an increase of 8.8% over 2001 (see Table 3.17).

Guaranteed child benefit

	Children under 3	Children aged 6-12	Children aged 12-18	Total
2001	1 388	1 103	913	3 404
2002	1 482	1 216	1 006	3 704

3.17 Number of minors for whom guaranteed child benefit was being paid on 31/12 – Region of Flanders

Source: *Child Benefit Department for Employees, Geographical distribution of families*

7. Home circumstances

Most young children live in a single-family home and the family usually also owns the home. Faults in the home or in the living environment are not unusual

Most children live in a *single-family home* (91.7%). 4% live in an apartment or flat. The family usually also owns the home (81.3%). This percentage increases as the child grows older (see Table 3.18).

Many young children have experienced *moving house*. 45% of the children in the 7-12 age group have not always lived in the same dwelling (see Table 3.19).

Table 3.20 shows how many children move house in the course of one year. In the course of 2003, 10% of children under the age of 12 *moved house*. In about half of these cases they moved house within the same municipality. The figures have remained virtually unchanged since 2002.

Almost 34% of the children live in a *home that has a number of faults*. The most common faults are: insufficient space (14.3%), mould and damp (8.8%), poor soundproofing within the home (8.6%), too dark (7.9%) or a leaking roof (7%). The home circumstances of primary school children are noticeably better than those of younger children (see Table 3.21).

Almost 26% of the children live in an *environment that has one or more faults*. Street noise scores highest (14.4%). Vandalism and noise from neighbours are also quite common problems (8.8% and 7.5% respectively). The living environment of primary school children is also noticeably better than that of younger children (see Table 3.21).

Home

	Children under 3	Children aged 3-7	Children aged 7-12	Total
Type of home				
Single-family home – detached house	37.9	44.9	58.3	51.1
Single-family home – semi-detached or terraced house	37.9	45.5	38.7	40.6
Apartment or flat in building with fewer than 10 homes	10.3	1.2	1.3	2.7

Apartment or flat in building with 10 or more homes	6.9	0.0	0.3	1.3
Other	6.9	8.5	1.3	4.3
Total	100.0	100.0	100.0	100.0
Residential status				
Owner	70.5	78.1	86.2	81.3
Tenant	28.4	21.3	11.8	17.3
Living rent-free	1.1	0.6	2.0	1.4
Total	100.0	100.0	100.0	100.0

3.18 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 2002. Processed on behalf of Child and Family

Mobility since birth

	Children under 3	Children aged 3-7	Children aged 7-12	Total
Child has always lived in the same home	83.0	61.2	54.9	61.2
Child has moved house at least once	17.1	38.8	45.1	38.8
Total	100.0	100.0	100.0	100.0

3.19 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 2002. Processed on behalf of Child and Family

Moved house within past year

	2002		2003		Total
	Children	Children	Children	Children	Total

	Under 12	under 3	aged 3-7	aged 7-12	
Moved house within the municipality	5.2	6.5	5.8	4.1	5.1
Moved to a different municipality within the same district	2.2	2.5	2.5	1.8	2.1
Moved to a different district within the Region of Flanders	1.6	2.0	1.8	1.3	1.6
Moved to another region	0.5	0.7	0.6	0.4	0.5
Moved abroad or unknown	0.7	0.8	0.9	0.6	0.7
Total who moved house	10.2	12.5	11.7	8.2	10.0
Did not move house	89.8	87.5	88.3	91.8	90.0
Total	100.0	100.0	100.0	100.0	100.0

3.20 Children aged under 12: percentage who moved house during the year, by type of move
Source: NIS, Population statistics

Living conditions

	Children under 3	Children aged 3-7	Children aged 7-12	Total
Faults in the home				
Insufficient space	20.5	21.9	8.2	14.3
Too dark	13.6	8.3	5.9	7.9
Difficult to heat	8.0	3.6	2.6	3.7
Leaking roof	6.8	11.2	4.6	7.0
Mould and damp	5.7	12.4	7.6	8.8
Rotting woodwork	5.7	4.1	4.6	4.6
Subsidence, cracks	3.4	3.0	3.6	3.4
Poor soundproofing within the home	6.8	11.2	7.6	8.6
Too little privacy with respect to other people in the home	6.8	10.8	2.6	5.7

Too little privacy				
with respect to neighbours	6.8	7.7	4.6	5.9
<i>Percentage with one or more faults in the home</i>				
<i>faults in the home</i>	38.6	39.4	28.9	33.6
Faults in living environment				
Noise from neighbours	9.1	8.9	6.3	7.5
Street noise	20.5	14.8	12.5	14.4
Pollution	8.0	4.8	5.9	5.9
Vandalism	9.1	9.5	8.3	8.8
Polluted air	7.1	2.5	1.0	2.4
<i>Percentage with one or more faults in the home</i>	31.5	28.8	22.7	25.9

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

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

8. Consumer goods in the family

High-tech consumer goods such as mobile phones, PC, Internet gradually coming up to the level of traditional consumer goods

Almost all children live in a family that has a car (97%). 44.6% of these families actually have more than 1 car. Possession of a colour TV (97.1%) is also the norm.

Mobile phone possession is 93% and has greatly increased (in 2001: 83.8%). Possession of a fixed landline telephone remains more or less universal at 92%, but we noted lower levels of ownership of a fixed landline in families of pre-school children. The number of Internet connections is going up: 62% compared with 46.8% in 2001. It is noticeable that many more children live in a family that has a personal computer than in one that has an Internet connection. Almost 82% of children live in a family that has a personal computer (see Table 3.22).

Possession of consumer goods

	Children under 3	Children aged 3-7	Children aged 7-12	Total
Car	94.3	97.0	97.7	97.0
Colour TV	97.7	97.6	96.7	97.1
Video recorder	92.0	88.2	91.1	90.0
Microwave oven	96.5	93.5	90.1	92.1

Telephone	81.2	89.9	96.4	92.1
Answering machine	38.4	28.4	32.0	31.9
Mobile phone	95.4	90.5	93.7	93.0
Dishwasher	54.7	58.6	70.3	64.3
Tumble drier	79.1	79.4	87.4	83.7
Personal computer	77.0	75.2	86.8	81.7
Internet connection	60.9	56.2	65.5	62.0

3.22 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 2002. Processed on behalf of Child and Family

9. The European context

9.1. 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 *level of employment of women with young children* is known. Using the Labour Force Survey (Eurostat) we compared the Region of Flanders with the EU-15 countries, excluding the Nordic countries, Luxembourg and Ireland, which did not take part in this survey.

Table 3.23 breaks down the level of employment among mothers by the number of children they have – 1, 2, or 3 or more children – and by the age of the youngest child. The level of employment of mothers in the Region of Flanders is one of the highest. The level of employment of mothers is much lower in the Mediterranean countries in the EU, apart from Portugal. Germany and the United Kingdom have low rates of employment among mothers with one child or the youngest child under the age of 3. There is a noticeable difference in rates of employment between mothers with 1 or 2 children and those with 3 children or more. Generally, relatively fewer mothers with 3 or more children work.

Level of employment of mothers (1)

With 1 child	With 2 children	With 3 children or more
--------------	-----------------	----------------------------

With a child or the youngest child under 3

Region of Flanders	77	73	52
Belgium	69	66	44
<i>Neighbouring countries</i>			
Germany	59	51	33
France	72	51	30
The Netherlands	77	70	54
<i>Mediterranean countries</i>			
Greece	49	51	36
Italy	56	47	34
Portugal	78	74	57
Spain	56	43	30
Austria	70	52	49
The United Kingdom	62	51	32

With a child or the youngest child aged 3 to 6

Region of Flanders	75	78	61
Belgium	70	71	55
<i>Neighbouring countries</i>			
Germany	67	57	41
France	74	72	53
The Netherlands	70	67	54
<i>Mediterranean countries</i>			
Greece	49	52	52
Italy	56	47	36
Portugal	79	76	70
Spain	58	47	49
Austria	72	62	56
The United Kingdom	66	63	46

With a child or the youngest child aged 6 to 12

Region of Flanders	74	80	68
Belgium	67	73	62
<i>Neighbouring countries</i>			

Germany	73	68	54
France	78	76	69
The Netherlands	72	75	72
<i>Mediterranean countries</i>			
Greece	58	56	57
Italy	52	47	40
Portugal	78	79	63
Spain	53	53	48
Austria	80	71	58
The United Kingdom	75	76	63
Total with a child or the youngest child under 12			
Region of Flanders	75	78	60
Belgium	68	70	53
<i>Neighbouring countries</i>			
Germany	69	60	41
France	76	67	46
The Netherlands	73	71	60
<i>Mediterranean countries</i>			
Greece	55	54	49
Italy	54	47	36
Portugal	78	76	63
Spain	55	48	41
Austria	78	66	54
The United Kingdom	70	66	45

3.23 Level of employment of women with one child or the youngest child under the age of 12 in some EU-15 countries - 2003

Source: Eurostat, Labour Force Survey, 2003 (Processed by Employment and Training Centre (Steunpunt WAV))

(1) The other EU-15 countries (Luxembourg, Finland, Denmark, Sweden and Ireland) did not take part in the Labour Force Survey.

We also know how many children under the age of 18 years live in a family with no adult in employment. Belgium has a relatively high number of young people living in families with no adult in employment. Only the United Kingdom scores higher (see Table 3.24).

No adult working

	1995	2000	2001	2002	2003	2004
Belgium	12.3	10.8	12.9	13.8	13.9	13.2
<i>Neighbouring countries</i>						
Germany	8.3	9.0	8.9	9.3	10.3	10.3**
France	9.2	9.4	9.2	9.6	9.6	9.6
Luxembourg	3.7	4.1	3.4	2.8	3.1	3.1**
The Netherlands	9.7	8.0	6.0	6.0	7.2	7.0
<i>Nordic countries</i>						
Finland	NA	NA	NA	NA	5.7	5.7**
Denmark	NA	NA	NA	5.6	5.7	5.7**
Sweden	NA	NA	NA	NA	NA	NA
<i>Mediterranean countries</i>						
Greece	6.0	5.3	5.4	5.1	4.5	4.5**
Italy	8.3	7.6	7.0	7.2	7.0	7.0**
Portugal	5.1	3.9	3.6	4.2	5.0	4.3
Spain	11.5	6.5	6.5	6.6	6.1	6.3
Austria	3.7	4.3	4.1	4.4	4.3	5.6
The United Kingdom	20.4	17.0	17.0	17.4	17.0	16.8
Ireland	17.0	10.2	10.4	10.8	10.8**	11.8**
EU-15	11.0*	9.8*	9.5*	9.8*	9.9*	9.9**

3.24 Children under the age of 18 living in a household in which there is no adult with paid work (percentages) in the EU-15 countries

Source: Eurostat, Newcronos (website)

* Estimates

** Provisional figures

NA: not available

9.2. Poverty

Unicef published figures on child poverty in 2005. The table on child poverty in the rich countries shows that Belgium scores quite well on the percentage of children living in relative poverty. Relative poverty means that the family has an income below 50% of the median income of the country concerned (see Table 3.25).

Children in relative poverty (1)

	Percentage	Trend as % in the 1990s
Belgium	7.7	+3.9
<i>Neighbouring countries</i>		
Germany	10.2	+2.7
France	7.5	-0.2
Luxembourg	9.1	+4.2
The Netherlands	9.8	+1.7
<i>Nordic countries</i>		
Finland	2.8	+0.5
Denmark	2.4	+0.6
Sweden	4.2	+1.2
<i>Mediterranean countries</i>		
Greece	12.4	-0.3
Italy	16.6	+2.6
Portugal	15.6	+3.2
Spain	13.3	+2.7
Austria	10.2	NA
The United Kingdom	15.4	-3.1
Ireland	15.7	+2.4

3.25 Percentage of children living in relative poverty – Unicef review 2005

Source: *Unicef Innocenti Research Centre, Child poverty in rich countries 2005, Report Card, no 6*

(1) *Children living in a family with an income below 50% of the median income of the country concerned*

NA: *not available*

9.3 Housing problems

The European Panel Study of Households published data on housing problems experienced by families with children. The problems found were: lack of space; noisy neighbours or street noise; insufficient light; inadequate heating; damp or leaking roof; traffic pollution or industrial pollution; and vandalism or criminality.

Table 3.26 shows the percentage of families who reported three or more problems, by type of family. One-parent families with dependent children report relatively more housing problems than two-parent families with 1 or 2 dependent children. In most of the EU-15 countries, the percentage is a little higher in two-parent families with 3 or more children than in two-parent families with 1 or 2 children. Belgium comes in the middle of the range. Portugal scores noticeably worse. Finland, Denmark, Austria and Ireland score better.

	One-parent families	Two-parent families		
	With dependent children	With 1 child	With 2 children	With 3 or more children
Belgium	29.0	13.7	11.8	15.4
<i>Neighbouring countries</i>				
Germany	NA	NA	NA	NA
France	21.0	19.3	15.9	22.2
Luxembourg	NA	NA	NA	NA
The Netherlands	21.8	12.6	11.8	11.1
<i>Nordic countries</i>				
Finland	20.3	11.2	10.9	8.4
Denmark	18.0	6.1	7.6	6.8
Sweden	NA	NA	NA	NA
<i>Mediterranean countries</i>				
Greece	15.4	12.1	13.0	14.6
Italy	20.0	17.2	15.4	20.9
Portugal	42.2	28.5	29.1	45.3
Spain	20.3	11.0	12.7	17.0
Austria	15.0	6.5	8.7	13.6
The United Kingdom	34.7	19.7	17.8	22.0
Ireland	7.1	12.0	10.8	8.5
EU-15	24.2	16.5	15.2	19.8

3.26 Percentage of one- and two-parent families with three or more housing problems in the EU-15 countries – 2000

Source: Eurostat, Newcronos (website)

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 school children: 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 the EU-15 countries.

1. Use of child care

1.1. Children aged under 3

Regular use of child care has increased considerably in Flanders; almost 56% of children aged 3 months to 3 years use child care “regularly”

55.7% of children aged between 3 months and 3 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 (February 2004). Then there is another group of 10.1% who make limited use of child care. 34.2% of children aged 3 months to 3 years are not looked after by relatives, a family day care provider or a child care centre (see Table 4.1).

Figure 4.2 shows the trend in the regular use of child care since 1995. The fall between 1997 and 2001 is 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. Since 2001 the survey has mainly been carried out by telephone (among “average families”), and it has only still been done face to face among underprivileged and ethnic minority families. In addition, since 2001 people have been asked to state the exact number of hours' child care 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 use to rank themselves.

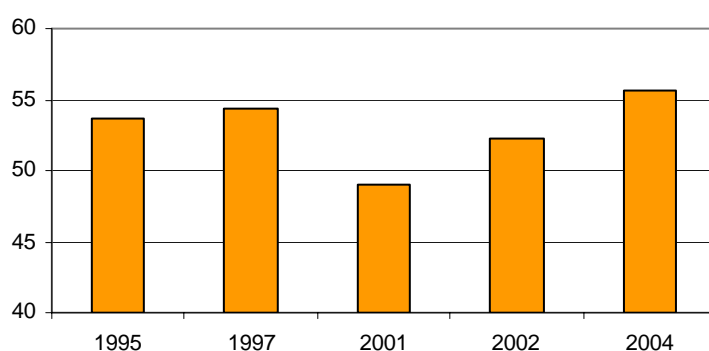
Regular use of child care in February 2004 was considerably higher than in the autumn of 2002. There was an increase of 3.5% between 2002 and 2004.

Use of child care

Percentage of all children aged between 3 months and 3 years		
	2002	2004
Regular use	52.2	55.7
Limited use	11.1	10.1
No use	36.7	34.2
Total	100.0	100.0

4.1 Use of child care for children aged between 3 months and 3 years in the Region of Flanders (percentages)
Sources: *Child and Family - Surveys on the use of child care for children aged under 3, autumn 2002 and February 2004*

Trend in the use of child care



4.2 Trend in the use of child care for children aged between 3 months and 3 years - percentage of regular users
Sources: *Child and Family - Surveys on the use of child-minding facilities for children aged under 3*

Ethnic minority children and children in underprivileged families make far less use of child care, but use by these groups has also increased significantly

Use of child care by ethnic minority children and children from underprivileged families is much lower than in the population as a whole.

Only 23.8% of ethnic minority children and 21.9% of children in underprivileged families use child care on a regular basis. The lowest rate of use is noted for ethnic minority children who also belong to underprivileged families (12.7%). Compared with autumn 2002, regular use of child care by ethnic minority children and children in underprivileged families has also increased significantly (see Table 4.3).

Children in one-parent families also make rather less use of child care: 48% of this group was using child care

on a regular basis in the autumn of 2004 (see Table 4.3).

Use of child care by subgroups

	2002	2004		
	Regular use	Regular use	Limited use	No use
Ethnic minority children	19.6	23.7	6.7	69.5
Children in underprivileged families	18.8	21.7	5.9	72.4
<i>of which</i>				
<i>Children in underprivileged Belgian families</i>	26.8	29.7	3.4	66.9
<i>Children in underprivileged ethnic minority families</i>	8.1	12.7	7.9	79.4
Child with a single parent	NA	48.0	11.4	40.6
All children	52.2	55.7	10.1	34.2

4.3 Ethnic minority children, children in underprivileged families and children with a single parent: use of child care for children aged between 3 months and 3 years in the Region of Flanders – autumn 2002 and February 2004 (percentages)

Sources: *Child and Family - Surveys on the use of child care for children aged under 3, autumn 2002 and February 2004*

Up to 6 months and after 2½ years: use of child care is much lower; regular use is over 60% between 1 year and 2½ years

The use of child care differs by age. Regular use of child care is much lower under the age of 6 months (see Table 4.4 and Figure 4.5). Table 4.4 and Figure 4.5 also include the age group 1 month to 3 months. Below 3 months regular use of child care is very exceptional. Between 1 and 2½ years, regular use is above 60%, with a peak at 1½ to 2 years. Regular use of child care for babies aged 3 to 6 months has fallen compared with the autumn of 2002. It has risen for the other age groups; with a particularly marked increase in the 6 months to 1 year age group from 52.5% to 59.8%.

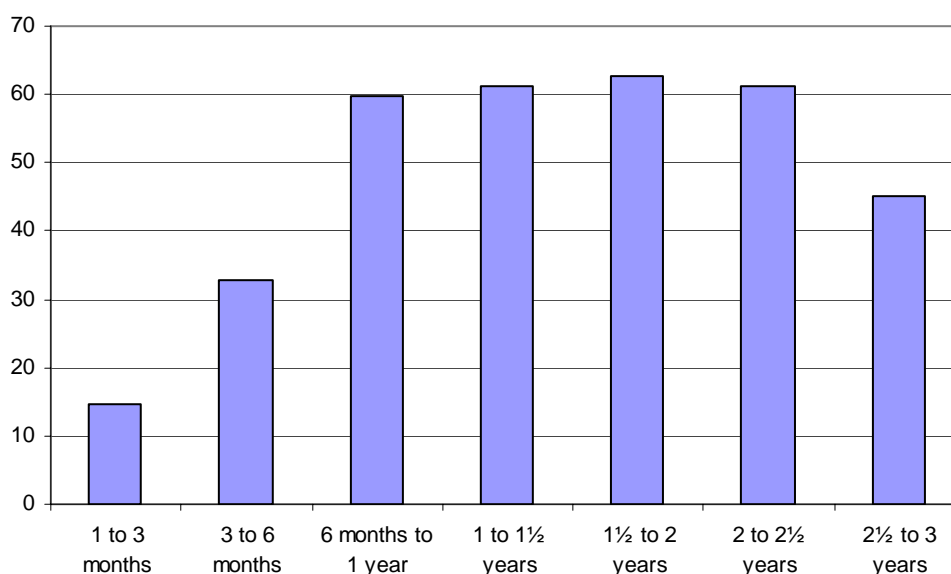
Use of child care by age

	2002		2004	
	Regular child care	Regular child care	Limited child care	No child care
1 to 3 months	8.8	14.5	16.0	69.5
3 to 6 months	34.8	32.7	12.0	55.2
6 months to 1 year	52.5	59.8	9.3	30.9
1 to 1½ years	56.9	61.3	8.5	30.2
1½ to 2 years	61.4	62.7	10.0	27.3
2 to 2½ years	56.1	61.3	8.3	30.4
Total 3 months to 2½ years	54.2	58.2	9.4	32.4
2½ to 3 years	41.8	45.1	13.5	41.4
Total 3 months to 3 years	52.2	55.7	10.1	34.2

4.4 Use of child care for children aged between 1 month and 3 years in the Region of Flanders by age – autumn 2002 and February 2004

Sources: Child and Family - Surveys on the use of child care for children aged under 3, autumn 2002 and February 2004

Use of child care by age



4.5 Regular use of child care for children aged between 1 month and 3 years in the Region of Flanders by age – February 2004

Source: *Child and Family - Survey on the use of child care for children aged under 3 - February 2004 (percentages)*

Type of child care used: mainly subsidised child care and grandparents, but the proportion of private child care is increasing fast

To a great extent, child care for children aged between 3 months and 3 years is provided by *family day care services that are subsidised by Child and Family*: 24.9% make use of a child-minder affiliated to a family day provider service, and 11.5% make use of a day care centre, making a total of 36.4%. There has been a relative decrease of 5.5% in child care subsidised by Child and Family compared with 2002: child care provided by subsidised day care centres fell by 4.1% and that provided by family day care services fell by 1.4%.

Grandparents provide 31% of child care and other family members, friends and neighbours provide 2.8%. Informal child care accounts for a total of 33.8%, representing a fall of 2.9% in comparison with 2002.

Private child care - private child-minders and day care centres - accounts for 26.2% of children. The relative share provided by this sector has risen markedly, by 7.3%. This can be mainly accounted for by an increase in private day care centres(+5.3%), but there has also been an increase in the number of private family day care providers (+2%) (see Table 4.6 and Figures 4.7 and 4.8).

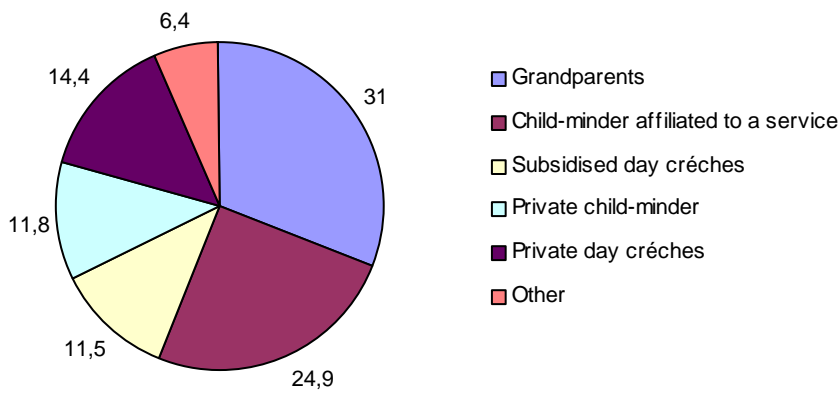
Types of child care

Percentages of regular users of child care		
	2002	2004
Grandparents	34.3	31.0
Other relatives, friends, neighbours, etc.	3.2	3.6
Family day care providers affiliated to a service (subsidised by Child and Family)	26.3	24.9
Day care centres (subsidised by Child and Family)	15.6	11.5
Private family day care providers registered with or supervised by Child and Family	9.8	11.8
Private day care centres registered with or supervised by Child and Family	9.1	14.4
Day care centre, family day care provider, type not known	0.4	0.8
Out-of-school child care	1.2	1.6
Other (live-in staff, child-care and family support centre, local employment agency (PWA), au pair, etc.)	0.2	0.6
Total	100.0	100.0

4.6 Children aged between 3 months and 3 years: regular use of child care by type of child care - Region of Flanders (percentages)

Sources: *Child and Family - Surveys on the use of child care for children aged under 3, autumn 2002 and February 2004*

Types of child care

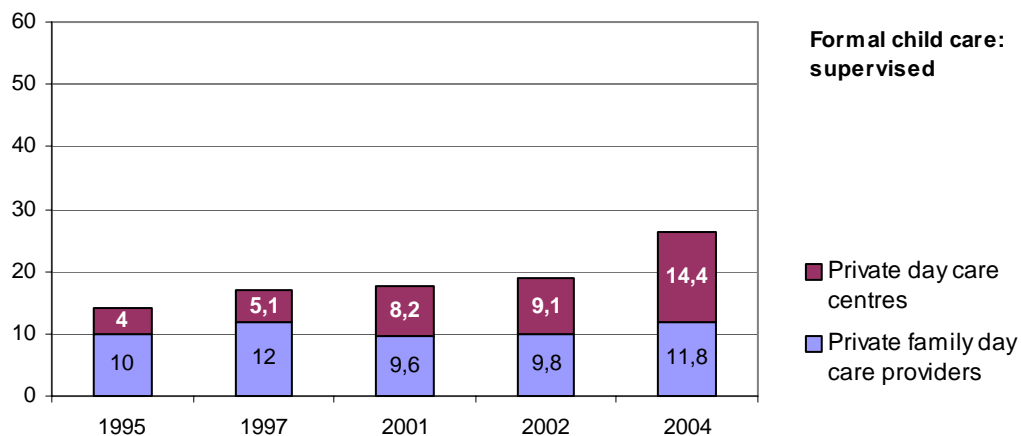
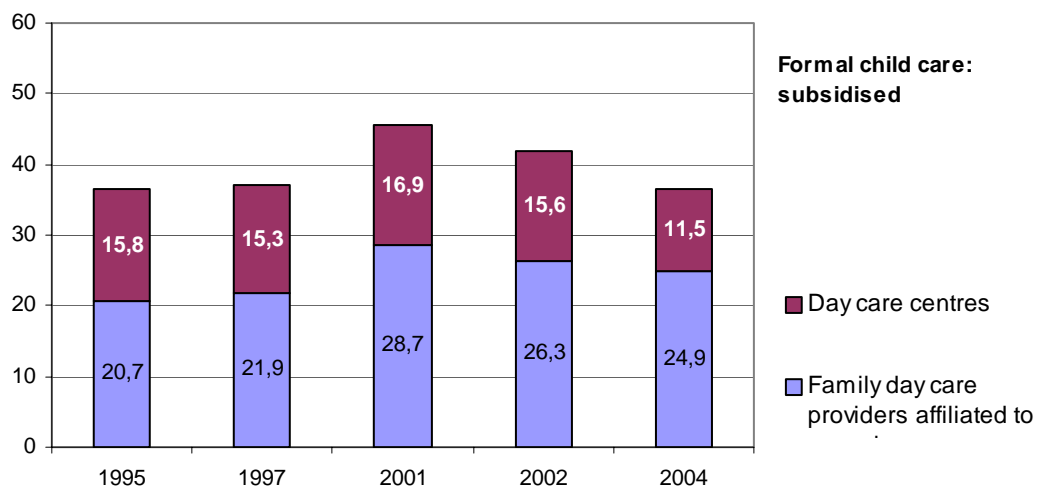


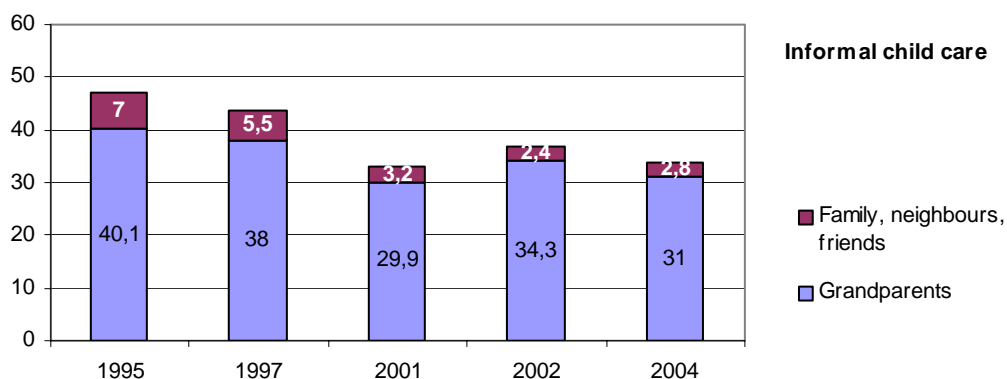
4.7 Children aged between 3 months and 3 years: regular use of child care by type of child care – most important types of child care – Region of Flanders – February 2004

Source: *Child and Family - Survey on the use of child care for children aged under 3 - February 2004*

Trends in child care types

Formal child care: subsidised/formal child care: supervised/informal child care





4.8 Trend in the use of formal and informal child care for children aged between 3 months and 3 years in the Region of Flanders - percentages of regular users of child care

Sources: *Child and Family - Surveys on the use of child-minding facilities for children aged under 3*

Almost 71% of the children who are cared for on a regular basis are cared for part-time (see Table 4.9). Part-time child care has increased slightly in comparison with 2002 (+0.7%). 35.4% of regular users sometimes make use of *atypical child care*, that is to say care before 7 a.m., after 6 p.m., night and weekend child care or for more than 11 hours per day. Use of atypical child care has also increased since 2002 (+4%).

Length of child care

	2002	2004
Full-time	29.8	29.1
Part-time	70.2	70.9
Total	100.0	100.0

4.9 Intensity of child care per week among children aged 3 months to 3 years who regularly go to child care (= at least one continuous period of 5 hours per week) in the Region of Flanders (percentages)

Sources: *Child and Family - Surveys on the use of child care for children aged under 3, autumn 2002 and February 2004*

1.2. Children aged 3-12

Greater use of out-of-school child care for children aged 3 to 6, especially care at the end of the school day

55% of children aged 3-6 and almost 40% of children aged 6-12 are cared for *during the week* by persons or

facilities other than their parents (see Table 4.10). That means that in the course of a week they are cared for at least once before school, after school or on a Wednesday afternoon. Use of out-of-school care for children aged 3 to 6 years has increased by 1.4% since autumn 2002. Use for children aged 6 to 12 years has decreased by 0.7%.

Children who live in a one-parent family make use of out-of-school care to the same degree as children who live with both their parents (46.3% and 44.5% respectively use it regularly).

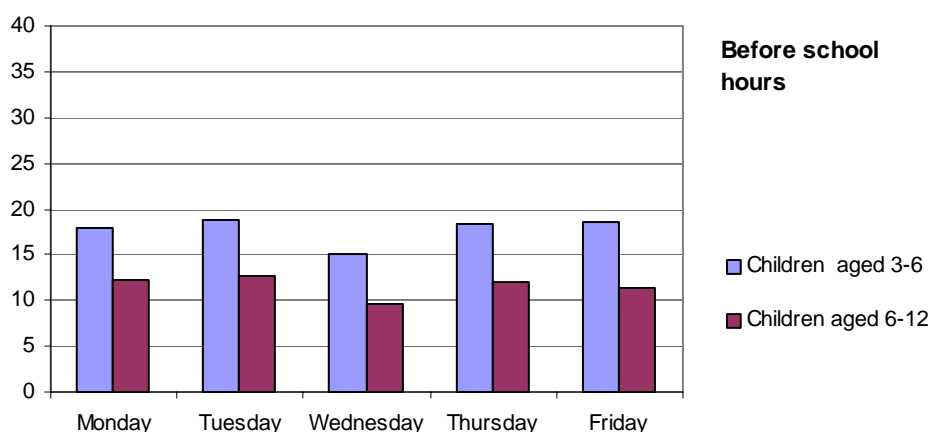
Use of out-of-school care

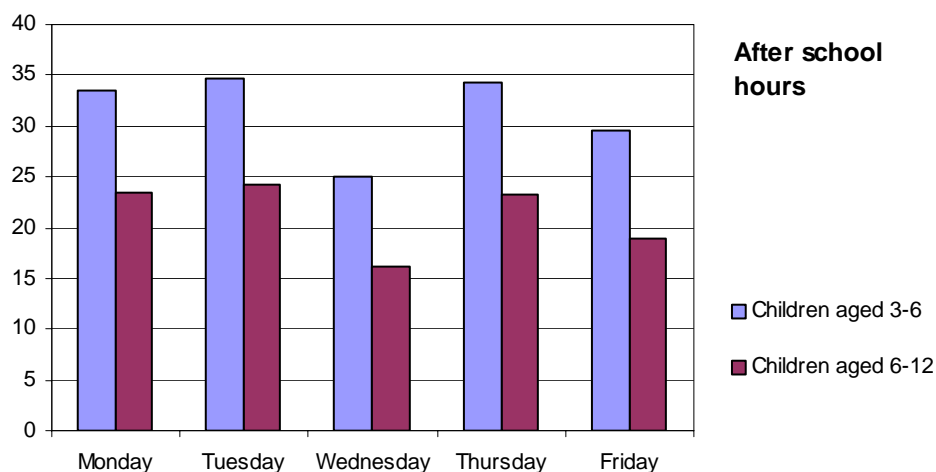
	Children aged 3-6		Children aged 6-12		Children aged 3-12	
	2002	2004	2002	2004	2002	2004
Do use	53.6	55.0	40.5	39.8	44.7	44.6
Do not use	46.4	45.0	59.5	60.2	55.3	55.4
Total	100.0	100.0	100.0	100.0	100.0	100.0

4.10 Use of out-of-school child care for children aged 3 to 12 years in the Region of Flanders (percentages)
Sources: Child and Family - Surveys on the use of out-of-school child care for children aged 3 to 12 years, autumn 2002 and February 2004

Child care is mainly used after school. Figure 4.11 shows the use of child care per child care day and by the time of day.

Out-of school child care by time of day





4.11 Use of out-of-school child care for children aged 3-6 and 6-12 per day and by time of day in the Region of Flanders (percentages of all children aged 3-6 and 6-12) – February 2004

Source: *Child and Family - Survey on the use of out-of-school child care for children aged 3-12, February 2004*

Intensity of out-of-school care: a small number of children make very frequent use of child care both before school and after school

We look at intensity of use over a week. 14.3% of the children being cared for make intense use of out-of-school care, that is 4 or 5 times before school and 4 or 5 times after school. 17% only make occasional use of care, at most once before school and once after school (see Table 4.12).

Intensity of out-of-school care (1)

		After school			
		None or little use	Moderate use	High use	Total
Before school					
None or little use	17.0	25.4	21.5	63.9	
Moderate use	3.7	6.0	1.3	11.0	
High use	6.8	4.0	14.3	25.0	
Total	27.4	35.4	37.1	100.0	

4.12 Use of out-of-school care for children aged 3 to 12 years in the Region of Flanders by intensity of use – 2004

(1) None or little use means 0 or 1 occasion; moderate use means 2 or 3 occasions; high use means 4 or 5 occasions

Source: *Child and Family - Survey on the use of out-of-school child care for children aged 3-12, February 2004*

Type of child care used: grandparents and school-based child care used the most

At 35.1%, *grandparents* are still the most important providers of child care for the entire group of children aged 3 to 12 years (February 2004). Child care provided by and at the school comes in second place: almost 34.5%. IBOs (out-of-school child care initiatives) account for 11.5%. There are only small differences between the group aged 3-6 and the group aged 6-12. Child care provided in and by schools is being used more frequently by 6- to 12-year-olds and is the most important type of child care for this group; IBOs are used rather more frequently by 3- to 6-year-olds.

The percentage of children being looked after by grandparents has fallen sharply since 2002, from 43.1% to 35.1% in the whole group of children from 3 to 12 years old. The percentage of children being looked after at and by schools has increased from 28.4% to 34.5%. Care provided by IBOs fell by almost 1% to 11.5% in 2004 (see Table 4.13).

Type of child care (1)

Percentage of all users of out-of-school child care		
	2002	2004
Children aged 3-12		
Grandparents	43.1	35.1
Other family member	2.4	4.9
Neighbours, acquaintances	2.6	2.3
IBO	12.4	11.5
Child care provided by and at school	28.4	34.5
Private child-minder	2.0	1.9
Child-minder affiliated to a service	1.5	2.2
Child-minder, type not known	0.0	0.1
Registered day crèche	1.1	0.6
Private day crèche	0.6	0.6
Other	3.0	3.3
Two types of child care, both equally important (2)	2.9	2.9
Total	100.0	100.0
Children aged 3-6		
Grandparents	42.5	34.4
Other family member	1.8	5.4
Neighbours, acquaintances	2.3	2.4

IBO	13.4	12.1
Child care provided by and at school	25.8	31.1
Private child-minder	2.9	3.3
Child-minder affiliated to a service	2.2	2.9
Child-minder, type not known	0.0	0.2
Registered day crèche	1.3	1.1
Private day crèche	1.3	0.8
Other	3.2	3.1
Two types of child care, both equally important (2)	3.3	3.3
Total	100.0	100.0
Children aged 6-12		
Grandparents	43.5	35.6
Other family member	2.8	4.6
Neighbours, acquaintances	2.8	2.2
IBO	11.7	11.1
Child care provided by and at school	30.0	36.8
Private child-minder	1.6	1.0
Child-minder affiliated to a service	1.2	1.7
Child-minder, type not known	0.0	0.1
Registered day crèche	0.9	0.4
Private day crèche	0.1	0.6
Other	2.8	3.4
Two types of child care, both equally important (2)	2.6	2.6
<hr/>		
Total	100.0	100.0

4.13 Use of child care by children aged 3-6 and 6-12 by type of child care, Region of Flanders (percentages of users of out-of-school child care)

Sources: *Child and Family - Surveys on the use of out-of-school child care for children aged 3 to 12 years, autumn 2002 and February 2004*

(1) Refers to the main type of child care

(2) A limited number of children make equal use of 2 types of child care and so the main type of child care cannot be determined.

1.3. Sick children

Illness in children is not unusual and it involves changes in the type of child care used

A sick child creates a difficult situation for families who use child care facilities. In February 2004, 16.8% of the

children aged 1 month to 3 years were ill during the week of the survey. The use of child care changed for almost 53% of the children who were ill. 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 (see Table 4.14).

Children who normally go to day crèche experience considerably more changes when they are ill (registered day nursery 71.7%; private day nursery 63.6%). Children who are normally looked after by grandparents or other relatives experience the least change in child care (32.8%).

There is no recent information available on the child care arrangements for school children when they are ill.

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

Impact on the child care

Child care arrangements not changed	47.3
Child care arrangements changed	52.7
Total	100.0

Nature of the change (1)

Non-working partner looked after the child	13.5
Parent worked at home	6.8
Parent took social leave	24.3
Parent took leave or days off in lieu	15.0
Grandparents looked after the child	47.2
Relatives, neighbours, acquaintances looked after the child	4.2
Used service that provides care for sick children	3.0
Baby-sitter	0.0
Child care instead of school	1.4
Other	11.3

4.14 Care in the event of illness of children aged between 1 month and 3 years who normally use child care facilities or attend nursery school in the Region of Flanders 2004 (percentages)

Source: Child and Family - Survey on the use of child care for children aged under 3 - February 2004

(1) Several answers possible

2. Wellbeing and child care

Keen to go to the child care, and even more keen to come home

The research study "Care of Young Children" conducted by the Herman Deleeck Centre for Social Policy included a number of questions on children's feelings about going to and coming home from their child care facility.

For pre-school child care, questions were asked about children from the age of 12 months.

Table 4.15 shows the scores on the items the parents were asked about.

Most parents reported that their child is relaxed and lively or has a lot of energy when going to their child care.

Aggressive or quiet and withdrawn behaviour was rarely reported.

Saying goodbye seems to be a bit more difficult but is still very positive. When the child is picked up from the child care, the questions on the children's behaviour were answered in even more positive terms.

Wellbeing and child care

	Entirely disagree	Dis-agree	Neither Agree agree nor disagree	Entirely agree	
On going to their child care					
Child is relaxed	0.0	2.1	9.3	54.6	34.0
Saying goodbye is difficult	31.9	37.2	10.6	11.7	8.5
Child is interested in what is going to happen	2.1	7.3	15.6	44.8	29.5
Child is aggressive, cries or struggles or is very quiet and withdrawn	46.0	37.0	8.0	7.0	1.0
Child is lively, has a lot of energy	0.0	4.1	5.2	48.5	42.3
On coming back from their child care					
Child is listless	50.5	38.9	3.2	6.3	1.1
Child is interested in what is happening in his/her environment	1.0	2.1	2.1	52.6	41.2
Child does not look at parent, has little to say	45.4	42.3	6.2	4.1	1.0
Child is relaxed	0.0	5.2	3.1	62.9	28.9
Child is aggressive, cries or struggles or is very quiet and withdrawn	56.1	32.7	7.1	3.1	1.0

4.15 Wellbeing and formal child care: children aged 1 to 3 years who use formal child care facilities; parents questioned about their mood and reactions when going to and coming back from their child care – spring 2005 (provisional figures)

Source: *Herman Deleeck Centre for Social Policy, Antwerp*

(1) formal child care: care provided by a day nursery or child-minder

3. Going to school

Including under-3s; near home but still taken to school by car

Most children in the Region of Flanders attend nursery school. Even before the age of 3, school attendance is *fairly universal*. In the spring of 2004, 47.8% of children aged between 2½ and 3 were attending school full-time and 32.8% part-time, not every day or not always for full days. 19.4% of these children were not yet attending school. The number of children between the age of 2½ and 3 years not attending school at all fell between 2002 and 2004. Full-time attendance and part-time attendance both increased (see Table 4.16).

School attendance by under-3 years

	2002	2004
Full week	40.5	47.8
Part of school week	29.0	32.8
Not at all	30.5	19.4
Total	100.0	100.0

4.16 Children aged 2½ to 3 years: extent of school attendance in 2002 and 2004.

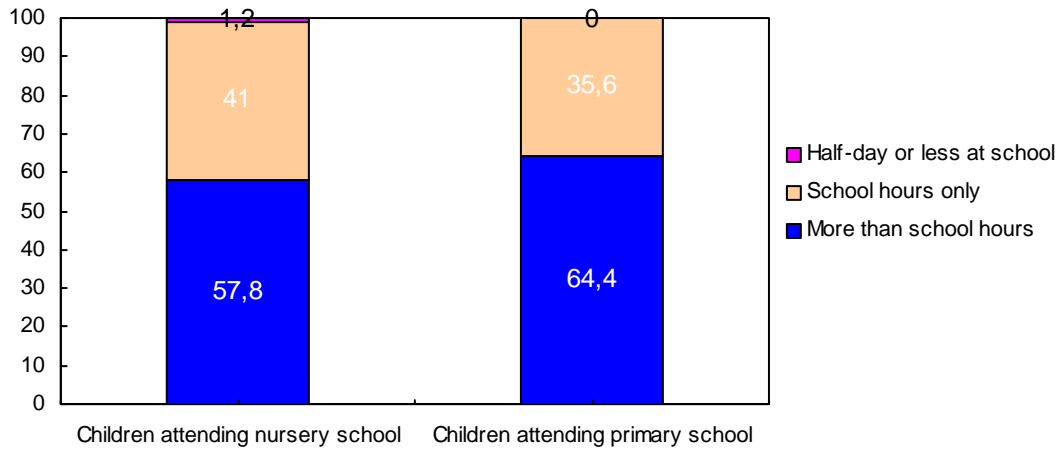
Sources: *Child and Family - Surveys on the use of child care for children aged under 3, 2002 and 2004*.

For many children attending nursery school or primary school, a *day at school* lasts longer than the actual school hours: almost 58% of children at nursery school and almost 64% of primary school pupils stay at school for longer than school hours (see Figure 4.17). On average they stay at school after official school hours for almost 55 minutes and over 45 minutes respectively.

The school, and in particular the nursery school, is a very short *distance away from the home*. 58% of children attending nursery school live a maximum of 1 km from the school, and 32.5% live between 1 and 5 km away. The respective percentages for children attending primary school are 49.7% and 40.3% (see Figure 4.18). However, this short distance does not prevent 69.4% of nursery-school children and 53.9% of primary-school

children from being taken to school by car (see Figure 4.19).

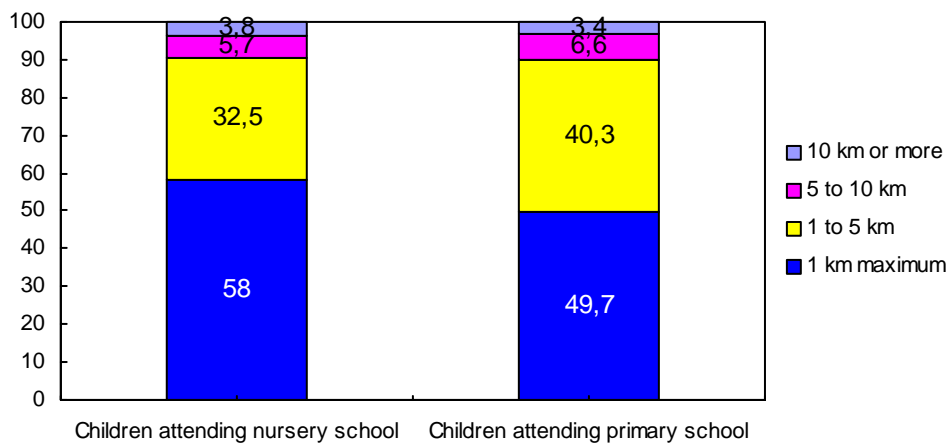
Length of time spent at school



4.17 Children aged under 12: length of time spent at school (percentages)

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

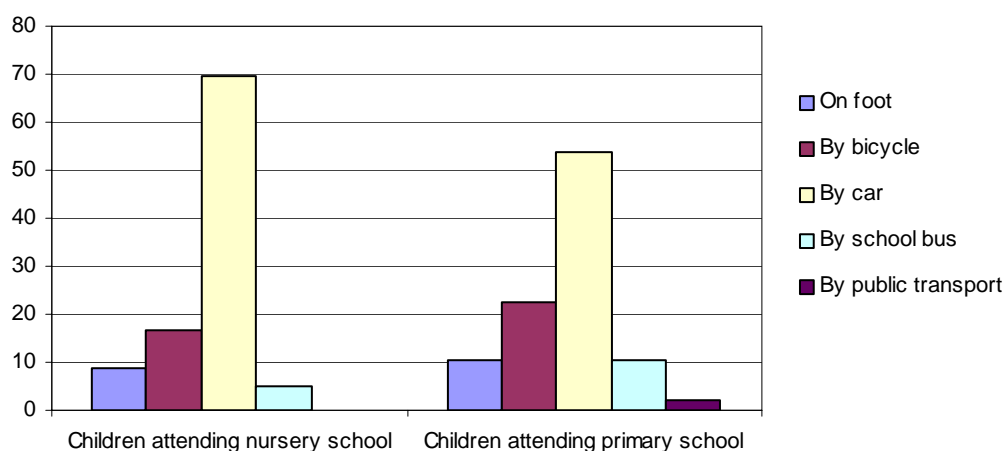
Distance to school



4.18 Children aged under 12: distance to school (percentages)

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

Travel



4.19 Children aged under 12: means of travelling to school (percentages)

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

Even at nursery school age some children do not attend a mainstream school; at primary level this goes up to over 6%

0.7% of children of nursery school age receive special nursery school provision, mainly of type 2: special education for children with a moderate or serious mental handicap.

At primary school level, 6.3% of children are in special education, mainly type 1: special education for children with minor mental handicaps; and type 8: special education for children with speech, language and/or serious learning disorders (see Table 4.20).

Special education (1)

	Nursery school	Primary school
2003-2004 school year		
Minor mental handicaps (type 1)	-	10 580
Moderate or serious mental handicap (type 2)	1 007	3 399
Behavioural problems (type 3)	184	1 544
Physical handicap (type 4)	239	821
Visual impairment (type 6)	46	129
Hearing impairment (type 7)	244	572
Speech, language and/or serious learning disorders (type 8)	-	9 907
Total number of children	1 720	26 952
Percentage	0.73	6.32

2002-2003 school year

Total number of children	1 726	26 901
Percentage	0.73	6.24

4.20 Children in special education: number and percentage of children attending school

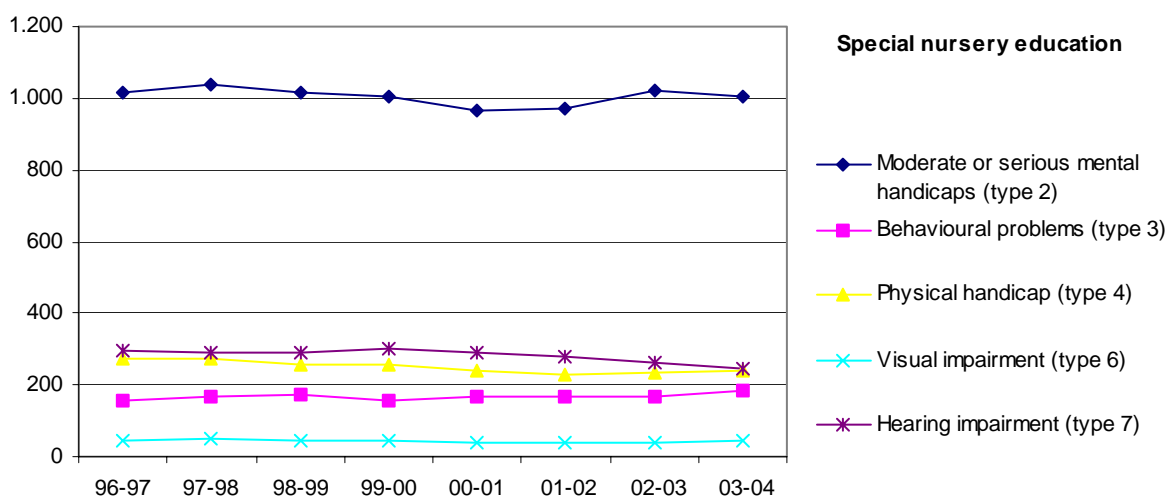
Source: *Statistical Yearbook of Flemish Education, 2003-2004 school year*

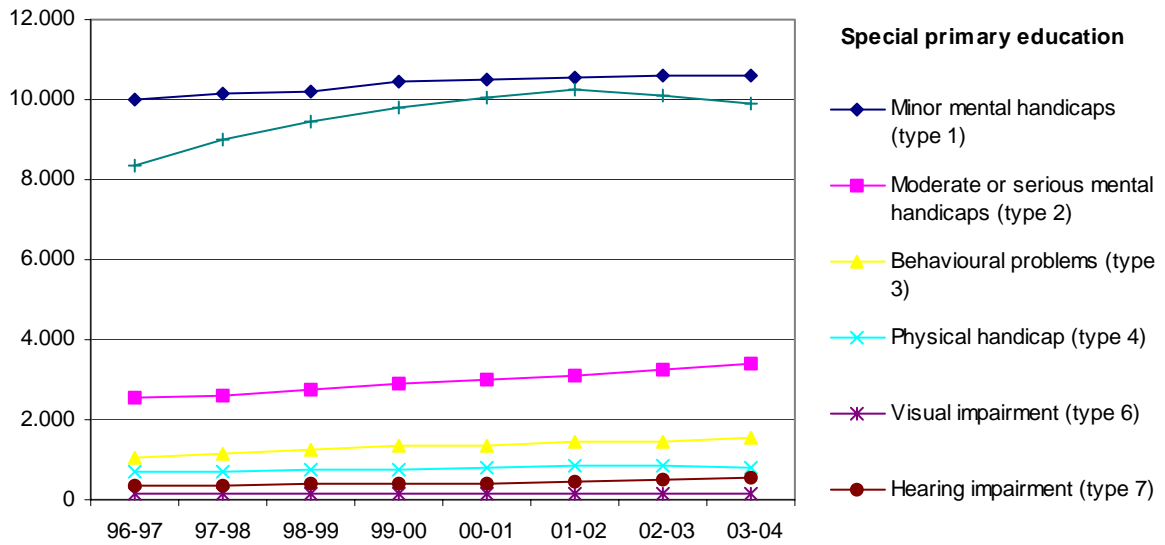
(1) To prevent pupils being counted twice, hospital schools (type 5) were not included

Figure 4.21 shows the increase in the number of children in each of the types of special primary education, which has taken place despite increasing resources for special needs provision in mainstream schools. There has been a continuous rise in the number of children attending almost all types of special nursery school, apart from type 4, for children with a physical handicap, and type 7, for children with hearing impairment.

The fall in the number of children going to special type 7 nursery schools started in the 2001-2002 school year. The first cohort of children to all be given the Algo hearing test reached the age for admission to nursery school in that school year. 1998 was the first year of universal administration of this hearing test in Flanders and these children started to reach the age of 2½ years in the 2001-2002 school year. In most cases where a serious hearing impairment is detected early, the children can go to mainstream school after receiving appropriate treatment.

Special education: trend by type

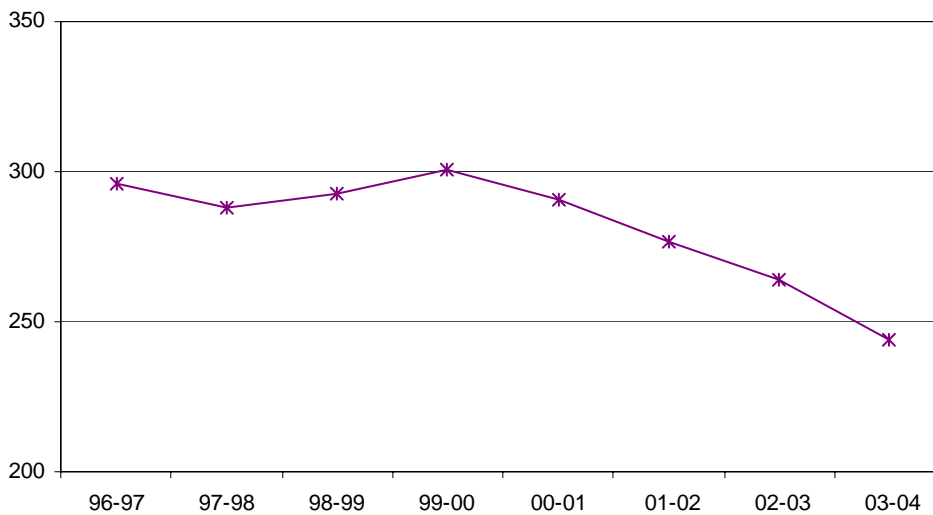




4.21 Trend in the number of pupils in special primary education in each school year by type

Source: *Statistical Yearbook of Flemish Education*

Special nursery education – hearing impairment



4.22 Trend in the number of pupils in special nursery education for children with hearing impairment (type 7) by school year

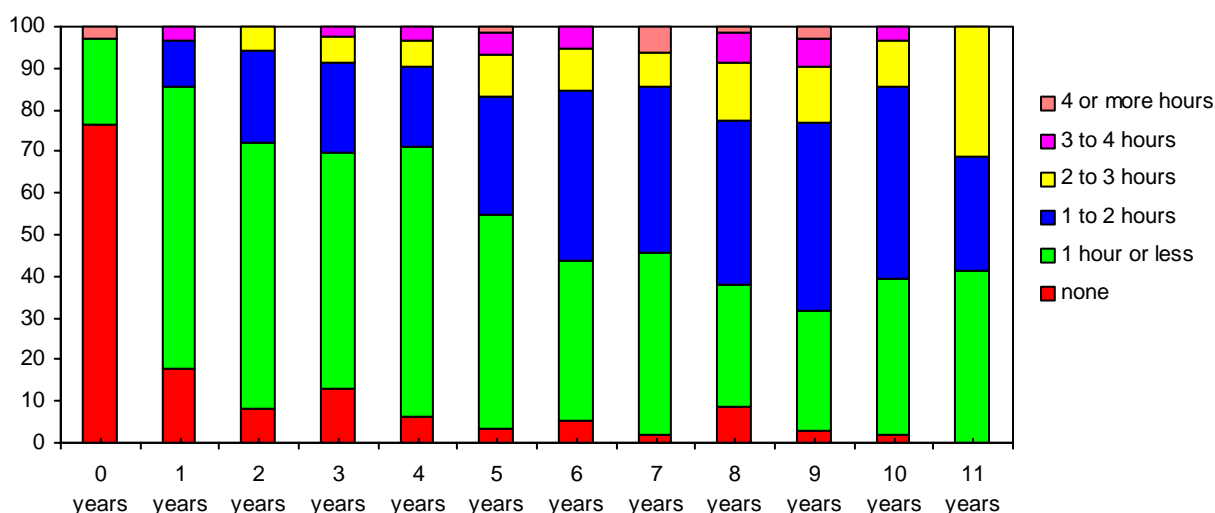
Sources: *Statistical Yearbook of Flemish Education*

4. TV/video watching

Figure 4.23 shows how many hours per day children watch TV by age. The number of hours that children spend watching TV increases with age.

The American Academy of Pediatrics issued guidelines on television watching in 1999. The Academy advises against “screen time” for children under the age of 2. For older children, a maximum of 1 to 2 hours watching high-quality TV or video programmes is recommended. Data from the Panel Study of Belgian Households show that watching TV at a very young age is especially problematic. Only 18% of children aged 1 to 2 years do not watch TV at all. Watching TV for more than 2 hours is infrequent. In the 2 to 5 age group, about 6% of 2-year-olds to about 10% of 4-year-olds watch TV or video for more than 2 hours a day.

TV watching



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

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

5. Annual holidays

Not having an annual holiday is rather unusual

A good 91% of the children went on holiday in 2002 for *at least a week*. By age of the child, there is a noticeably slightly higher percentage for children aged under 3 (94.2%) (see Table 4.24).

Annual holidays

	Children under 3	Children aged 3-7	Children aged 7-12	Total
The family goes on holiday	94.2	88.7	92.4	91.6

The family does not go on holiday	5.8	11.3	7.6	8.4
Total	100.0	100.0	100.0	100.0

4.24 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 2002. Processed on behalf of Child and Family

6. Free-time activities of school children

Sports and youth organisations score highest

Children aged 3-7 do not engage in many traditional free-time activities, namely sport, dance, art and crafts, music and theatre and youth organisations. Of the children who do have a free-time activity, most of them do sport; 25.5% of children under 7 do some kind of sport.

Among children aged 7 to 12, almost 65% do sport and 27.2% take part in activities run by a youth organisation. Music and theatre attract a good 18%; dance and arts and crafts account for 13% and 12.4% respectively (see Table 4.25).

Free-time activities

	No	Yes	Number of hours per week			
			Maximum 1 hour	1 to 2 hours	2 to 3 hours	3 hours or more
Children aged 3-7						
Sport	74.5	25.5	14.3	7.5	2.5	1.2
Dance	93.1	6.9	5.7	1.3	0.0	0.0
Art and crafts	94.3	5.7	1.3	2.5	0.0	1.9
Music, theatre	99.4	0.6	0.6	0.0	0.0	0.0
Youth organisations	96.2	3.8	0.6	3.1	0.0	0.0
Children aged 7-12						
Sport	35.2	64.8	15.8	16.4	11.7	20.8
Dance	87.0	13.0	7.2	4.8	1.0	0.0
Art and crafts	87.6	12.4	1.7	6.9	3.1	0.7
Music, theatre	81.7	18.3	5.5	0.3	6.6	5.9

Youth organisations	72.8	27.2	0.3	3.7	18.0	5.1
---------------------	------	------	-----	-----	------	-----

4.25 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 2002. Processed on behalf of Child and Family

7. Children receiving supervision and support via special youth welfare

When problems arise or in a crisis involving young children, or when living, employment, home, health or financial circumstances create a need for day and night care, parents can call upon services registered and subsidised by Child and Family. A small number of children receive supervision and support through these special welfare services.

In addition, supervision and support measures are in place for a number of young children via the special youth welfare committees and the juvenile courts.

7.1 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 providing foster care as a means of supporting the family. This is short-term care at the parents' request on account of special living, working, home, health or financial circumstances.

On 1 February 2005 (first working day in February), 1 306 children under the age of 12 were receiving supervision and support in child care and family support centres, and there were 95 children in foster families who had been placed there by the foster care services. A total of 1 401 children were receiving supervision and support via the special youth welfare service, subsidised by Child and Family. The number of children receiving supervision and support was more or less unchanged from 2004 (see Table 4.26).

Supervision and support via Child and Family

		2004		2005		
	Total	Children under 3	Children aged 3-6	Children aged 6-12	Children aged 12 and older	Total

Child care and family

support centres	1 311	513	361	414	18	1 306
Foster care services offering temporary family support	84	18	31	42	4	95
Total	1 395	531	392	456	22	1 401

4.26 Number of children receiving supervision and support from a special youth welfare service, subsidised by Child and Family, on the first working day in February (2 February 2004 and 1 February 2005)

Source: *Child and Family*

7.2 Supervision and support via the special youth welfare service

There were a total of 11 088 children under 15 subject to supervision by a *special youth welfare committee* or a *supervision measure imposed by a juvenile court* on 31 December 2003: 1 846 under 5 years, 3 592 aged 5 to 10 and 5 650 aged 10 to 15. The total number of children under the age of 15 receiving supervision and support increased by 4.3% compared with 2002. The increase in the number of under-3s being supervised was slightly higher (+6.3%).

For most of the under-5s this involved placement in a foster family provided by foster care services. Admission to a residential home, a centre run by the regional office of the special youth welfare service, Child and Family, supervision and guidance at home or preventive social measures are other services that are used quite frequently (see Tables 4.27 and 4.28).

For children aged 5 to 10, admission to a residential home, foster care, a centre run by the regional office of the special youth welfare service, supervision at home and guidance and preventive social measures are the main measures.

For children aged 10 to 15, day centres and reception and orientation centres are also important.

Supervision and support via the special youth welfare service

	2002	2003
Children aged under 5	1 737	1 846
Children aged 5-10	3 442	3 592
Children aged 10-15	5 452	5 650
Total	10 631	11 088

4.27 Number of children receiving supervision and support via the special youth welfare service (on 31.12)

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

Type of support

	Children under 5		Children aged 5-10		Children aged 10-15	
	2002	2003	2002	2003	2002	2003
General hospitals	9	8	16	25	28	32
Private general welfare centres	0	0	0	0	1	0
Residential homes	171	163	608	602	951	939
Boarding schools	8	12	66	66	166	178
Day centres	1	1	272	240	564	569
Foster care services	562	609	814	869	930	925
Unpaid Foster family	19	33	36	29	35	44
Foster family not supported by service	1	2	1	2	11	7
Reception and orientation centres	42	37	180	204	641	621
Special youth welfare projects	3	3	5	7	29	41
Psychiatric hospitals	6	3	22	16	52	34
Home supervision services	255	281	393	407	455	454
Regional offices of the special youth welfare service	196	203	400	471	738	804
Child and Family	278	284	177	180	57	82
Preventive social measures	114	123	299	329	423	478
Projects	0	4	0	0	4	17
Flemish Fund (VFSIPH)	19	21	119	123	314	360
Facilities outside Dutch-speaking areas	9	7	13	12	36	38
Unable to be allocated	44	51	17	9	14	11
Unknown	0	1	4	1	3	16
Total	1 737	1 846	3 442	3 592	5 452	5 650

4.28 Children receiving supervision and support via the special youth welfare service: type of support (on 31.12)

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

8. The European context

8.1. Child care

Use of child care varies greatly from one country to another (see Table 4.29). When considering the figures, account must also be taken of the age that children start school (see Table 4.30). The Nordic countries and Ireland have high to very high rates of use of formal child care but this must be put in the context of the fact that children do not start school until they are 4, 5 or 6, and in Sweden formal child care provision only starts at the age of 1 year. France, the Netherlands and Portugal are in the middle of the range. Use of child care is low in the Mediterranean countries, Germany and Austria. Table 4.29 includes the use of out-of-school care.

Use of child care

	Use of formal child care	Use of out-of-school care
Flemish Community	aged under 3 years: 36.5% (regular use)	3 to 12 years: 23.1% (regular use)
French Community	aged under 3 years: 26.1%	2½ to 6 years: 32.0% 6 to 12 years: 15.0%
<i>Neighbouring countries</i>		
Germany	aged under 3 years: 7.0% aged 3 to 6 years: 89.0%	6 to 11 years: 13.0%
France	aged under 3 years: 30.9%	3 to 12 years: 13.0%
Luxembourg	aged under 3 years: 14.0% aged 3 to 4 years: 14.0%	NA
The Netherlands	aged under 3 years: 34.5% aged 3 to 4 years: 25.0% full time; 7.5% part time	5 to 12 years: 7%
<i>Nordic countries</i>		
Finland	aged under 3 years: 34.5% aged 3 to 7 years: 59.0%	7 to 9 years: 10%
Denmark	aged under 3 years: 55.0% aged 3 to 6 years: 91.0%	7 to 12 years: 81%
Sweden	aged under 3 years: 40.7% aged under 7 years: 86.0%	6-year-olds: 73%
<i>Mediterranean countries</i>		
Greece	aged under 3 years: 7%	NA
Italy	aged under 3 years: 6.3%	NA
Portugal	aged under 3 years: 18.4%	NA
Spain	NA	6 to 12 years: 35%
Austria	aged under 3 years: 8.8%	7 to 12 years: 9.6%
The United Kingdom	NA	NA
Ireland	aged under 3 years: 41%	6 to 12 years: 8%

4.29 Use of formal child care and out-of-school care in the EU–15 countries around 2004 (estimate)

Source: <http://www.childcareinachangingworld.nl>

NA: not available

8.2. Going to school

The age at which the school system starts is very variable in the EU–15 countries. In France children can start school from the age of two years and in Belgium from 2½ years. The school system also starts at quite a young age in Sweden, Italy, Spain and Portugal (see Table 4.30). The differences are smaller when it comes to the age of compulsory schooling; 6 years in most countries.

Table 4.30 also gives school opening hours. Belgium is in the middle of the range with regard to school opening hours. The school day is much shorter in Germany and Greece, and also in the Netherlands, where they also have a long lunch break. Denmark and Sweden have a long school day.

Many parents in the Region of Flanders take up the opportunity to send their children to school from a very young age.

The Region of Flanders leads the EU-15 countries in school attendance before the age of 4 years. School attendance by very young children is also high in France, Spain and Italy. It is low in the Netherlands, Finland, Greece and Ireland. Table 4.31 includes children under the age of 3 who go to school in the calculations, so that the percentage is above 100 for some countries.

School system

	Starting age	Age of compulsory education	School opening hours
Flemish Community	2½ years	6 years	08.30 - 15.30
French Community	2½ years	6 years	08.30 - 15.30
<i>Neighbouring countries</i>			
Germany	3 years	6 years	07.30 - 13.00/14.00
France	2 years	6 years	08.30 - 16.30
Luxembourg	4 years	4 years	08.00 – 16.00
The Netherlands	4 years	5 years	08.30 – 12.00/ 13.15 – 15.15
<i>Nordic countries</i>			
Finland	6 years	7 years	NA
Denmark	5/6 years	7 years	07.00 – 17.00/18.00
Sweden	3 years	7 years	06.30 – 18.30
<i>Mediterranean countries</i>			
Greece	4 years	6 years	08.15 – 13.30
Italy	3 years	6 years	08.30 – 16.30
Portugal	3 years	6 years	09.00 – 16.00
Spain	3 years	6 years	09.00 – 12.00/

Austria	5 years	6 years	15.00 – 17.00 earliest 07.00 latest 18.00
The United Kingdom	4 years	5 years (England and Wales)	09.00 – 16.00
Ireland	4 years	6 years	08.30/9.30 – 14.30/15.30

4.30 Age that school starts, age of compulsory education and school opening hours in the EU–15 countries, around 2004

Source: <http://www.childcareinachangingworld.nl>

Going to school (1)

Belgium	119.6
<i>Neighbouring countries</i>	
Germany	80.3
France	119.7
Luxembourg	76.8
The Netherlands	48.8
<i>Nordic countries</i>	
Finland	39.6
Denmark	86.9
Sweden	75.5
<i>Mediterranean countries</i>	
Greece	28.5
Italy	103.0
Portugal	66.4
Spain	112.5
Austria	63.8
The United Kingdom	81.2
Ireland	26.3

4.31 Children under the age of 4 who attend school in the EU-15 countries: percentage of all children aged 3 to 4 (2002)

Source: OECD, *Education at a Glance, 2004*

(1) In some countries the percentage is higher than 100, because children under the age of 3 who go to school

have been included

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. We zoom in on mortality in children up to the age of 15 years – number of deaths and causes of death – and on life expectancy at birth and at the age of 1 year.

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 describing congenital abnormalities and hearing loss, already identified in the neonatal period. We then go on to look at a number of diseases and disorders of relevance to young children and at specific problems that the children have as reported by their parents.

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

We conclude with a number of benchmarks from the EU-15 countries.

1. Data on pregnancy and childbirth

1.1. Antenatal care

Gynaecologists provide antenatal care to almost all pregnant women

Antenatal care in Flanders is mainly provided by gynaecologists: Over 95% of pregnant women were under the care of a private gynaecologist during pregnancy, and just under 3% were under the care of both a gynaecologist and their own GP. This remained virtually unchanged from 2003 to 2004.

The number of pregnancies not involving antenatal care is very low (0.2%) (see Table 5.1).

Antenatal care

	2003	2004
Private gynaecologist	95.2	95.3
Mixed(1)	3.0	2.8
GP	0.9	0.8
Child and Family antenatal clinic	0.2	0.2
Midwife	0.7	0.7
No antenatal care	0.2	0.2

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

Source: *Child and Family – Ikaros*

1) *Mixed: antenatal care provided by private gynaecologist and GP*

1.2. Data on deliveries*

In Flanders in 2003, of 100 deliveries, 47.2 were first-born children, 34.3 were second children, 12.4 were third children, and 6.2 were fourth or later children. The relative proportion of third or later children increased from 18.3 in 2002 to 18.5 in 2003.

The percentage of young mothers, i.e. mothers aged under 20, was 2.3% (2003). Seven out of ten women who gave birth were between 25 and 35 years of age. Two in ten were older than 35, and 1.6% were even older than 40 years of age. The average age of mothers on giving birth to their first child was 27.7 years, and it was 30.9 years for multiparae. The average age increased slightly compared with 2002 for multiparae only (see also chapter 1, section 6.3)*.

A number of pregnancies not to be underestimated, i.e. 4.1%, were achieved following *fertility treatment*: 1.4% of women had had hormone therapy, 1.4% had undergone in vitro fertilisation (IVF), 0.5% had been artificially inseminated, and 0.7% had had an intracytoplasmic sperm injection (ICSI) (2003). The number of births following fertility treatment increased slightly compared with 2002, by 0.2%. Since 1995, however, the figure has increased from 3.2% (in 1995) to 4.1%.

Over 36.3% of multiple pregnancies came about following medically assisted fertilisation. This was the case for only 3.5% of single births.

3.8% of children came into the category of *multiple births*. The number of babies born a twin was 3.7% of all babies born, and the number born a triplet was 0.1%. 1 131 twin births and 12 triplet births were registered. In 2003 the number of twin births was the second highest recorded in the past ten years. The number of triplet births fell: 12 triplet births were recorded in 2003; in 2002 there were 24. There was not a single quadruplet birth in 2003. Since 1 July 2003 a federal law has linked funding of IVF/ICSI to the number of embryos that may be put back into the womb (1 if the woman is under the age of 36 and 2 if she is older than 36). However, the women who gave birth in 2003 after undergoing fertility treatment had had their treatment before this law came into effect. This new law is only expected to have repercussions from 2004.

In 2003, 7.4% of pregnant women gave birth prematurely, following a pregnancy of less than 37 weeks. This was a slight increase over the figure for 2002, which was 7.3%. The relative proportion of *babies with a low birth weight* (less than 2 500 grams) was 7.3%. The birth weight of 1.2% of children was extremely low (less than 1 500 grams). The number of children with a low birth weight increased slightly, by 0.1%. Six out of ten children who were in the *multiple birth* category weighed less than 2 500 grams at birth. This was the case for only 5.3% of single births.

In three in ten women (30.0%), the birth was *induced*, usually for reasons of convenience to either the obstetrician or the pregnant woman. Around 70% of children were born *without obstetric intervention*. 18.9% of babies were born by Caesarean section. The number of Caesareans had increased slightly compared with 2002, and this was part of a sustained rise: since 1995, the incidence of Caesareans in all deliveries has risen from 13.6% (1995) to 18.9%. In 9.7% of deliveries, vacuum extraction** or forceps were used. The use of vacuum extraction and forceps has been falling slowly but steadily: from 14.0% in 1995 to 9.7%. Epidural anaesthesia was used for 64.4% of births. There has also been a gradual but sustained increase in the incidence of epidural anaesthesia: since 1995 the incidence has increased from 48.2% to 64.4%.

After the birth, 13.9% of babies were transferred to a neonatal unit and 4.4% to a neonatal intensive care unit. There was an increase of 0.4% in the number of transfers to a neonatal unit; the number of transfers to a neonatal intensive care unit remained unchanged compared with 2002.

* Source: Study Centre for Perinatal Epidemiology (SPE)

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

2. Life expectancy

Increasing life expectancy; male disadvantage reduced

Life expectancy *at birth* and *at the age of 1 year* is 76.5 years and 75.9 years for males and 81.6 and 81.2 years for females (2003). Since 1995 life expectancy has increased by 1.9 years for males and by 1.1 year for females. At the age of 1 year, it has increased by 1.8 years and 1 year respectively. In other words, males have caught up to some extent (see Table 5.2).

Life expectancy

		At birth	At 1 year
Males	1995	74.6	74.1
	2000	75.7	75.0
	2001	76.1	75.4
	2002	76.3	75.6
	2003	76.5	75.9
Females	1995	80.8	80.2
	2000	81.5	80.8
	2001	81.8	81.1
	2002	81.8	81.1
	2003	81.6	81.2

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

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

3. Mortality

3.1. Number of deaths of children aged 0-15 in the Region of Flanders

In the whole group of children aged 0-15

Most deaths in childhood occur before the age of 1 year. After the first year the number of deaths falls to 0.2 per 1 000 children or less. More boys die than girls. This gender difference in death rates is greatest in the first year, when considerably more boys die than girls. The number of deaths in 2003 was 4.1% lower than in 2002 (see Table 5.3).

Deaths by age group and gender

	2002	2003		
		Males	Females	Total
Number				
Under 1 year	259	149	112	261
1 to 5 years	72	27	31	58
5 to 10 years	45	20	17	37

10 to 15 years	40	24	19	43
Total	416	220	179	399
Per thousand				
Under 1 year	4.30	4.81	3.81	4.32
1 to 5 years	0.28	0.17	0.20	0.19
5 to 10 years	0.13	0.12	0.10	0.11
10 to 15 years	0.11	0.13	0.11	0.12

5.3 Number of deaths and number of deaths per thousand in children aged 0-15 by age group and gender - Region of Flanders

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

In children aged under 12 months

This section looks in more detail at the deaths of children aged under 12 months.

Data on mortality in the youngest age group are generally presented with the aid of a number of measures known as mortality criteria (see Table 5.4).

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 274 stillbirths in 2003. The figure for *stillbirths* was 4.5 per thousand births. This figure was 0.3 per thousand higher than in 2002.

Early neonatal mortality is death occurring between birth and the age of seven days (7 x 24 hours). In 2003, 122 infants died in this period; the figure for early neonatal mortality was 2.0 per thousand live births, a rise of 0.2% compared with 2002.

The *perinatal mortality figure* was 6.6 per thousand births. Perinatal mortality is the death of infants during the first seven days of their life, together with the figure for stillbirths. Perinatal mortality rose by 0.6 per thousand in 2003, with rates of both stillbirths and early neonatal mortality increasing.

Another mortality criterion frequently employed is *neonatal mortality*. This covers death between birth and the 28th day after birth. In 2003, 168 infants died during the first four weeks (28 days) of their life. The neonatal mortality rate was 2.8 per thousand live births, a rise of 0.3 per thousand compared with 2002.

Late neonatal mortality was 0.8 per 1 000 live births, an increase of 0.1 per thousand compared with 2002. 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 2003, 261 infants died during their first year of life. The infant mortality rate was 4.3 per 1 000 live births, unchanged from 2002. Two different trends are operating here: an increase in mortality before the 28th day after birth and a decrease in mortality after this period (post-neonatal mortality) (see Table 5.4).

Only 46.7% of babies with a *birth weight* of 1 000 g or less survive to the age of 1 year. 25.4% are dead at birth and 27.8% die before reaching the age of 1 year (2003) (see Table 5.5). As Table 5.6 shows, mortality is appreciably higher in *multiple births* than in single births. Twins have a 4.88 times greater risk of dying before

the age of 1 year than singletons.

Mortality figures

	2002	2003
Stillbirths per 1 000 births	4.2	4.5
Early neonatal mortality per 1 000 live births	1.8	2.0
Perinatal mortality per 1 000 live births and stillbirths	6.0	6.6
Late neonatal mortality per 1 000 live births	0.7	0.8
Neonatal mortality per 1 000 live births	2.5	2.8
Post-neonatal mortality per 1 000 live births	1.8	1.5
Infant mortality per 1 000 live births	4.3	4.3

5.4 Foeto-infant mortality figures in the Region of Flanders

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

Mortality by birth weight

	Stillbirths	Early neonatal mortality	Late neonatal mortality	Post-neonatal mortality	Alive at 1 year	Total
Under 500 g	0	7	0	1	1	9
500 to 1 000 g	74	49	16	8	135	282
1 000 to 1 500 g	50	8	2	7	311	378
1 500 to 2 000 g	35	17	1	7	786	846
2 000 to 2 500 g	34	9	5	11	2 277	2 835
2 500 g and over	70	32	22	59	55 991	56 174
Not known	11	0	0	0	182	193
Total	274	122	46	93	57 683	60 717

5.5 Outcome of pregnancy: number of deaths and live births by birth weight in the Region of Flanders – 2003

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

Multiple pregnancies

	Stillbirths	Early neonatal mortality	Late neonatal mortality	Post-neonatal mortality	Alive at 1 year	Total
Single births	239	92	36	82	57 989	58 438
Twins	34	30	9	11	2 153	2 237*
Triplets	1	0	1	0	40	42
Quadruplets	0	0	0	0	0	0
Total	274	122	46	93	60 182	60 717

5.6 Outcome of pregnancy: number of deaths and live births in single and multiple pregnancies in the Region of Flanders – 2003

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

* The total number of children born as twins is uneven, because 3 children born in 2002 died in 2003.

3.2. Causes of death in children aged under 15 years in the Region of Flanders

In children aged under 12 months

Complications during pregnancy and the perinatal period and congenital abnormalities: the most important causes of death in cases of stillbirth and infant mortality

The most important causes of death in stillbirths and infant mortality are complications during pregnancy and in the perinatal period and congenital abnormalities. In 2003, 214 children died as a result of complications during pregnancy and in the perinatal period and 116 as a result of congenital abnormalities. 30 babies died as a result of cot death, four more than in 2002. The number of cases of cot death remains low (see Table 5.7 and Figure 5.8).

Causes of death under the age of 12 months

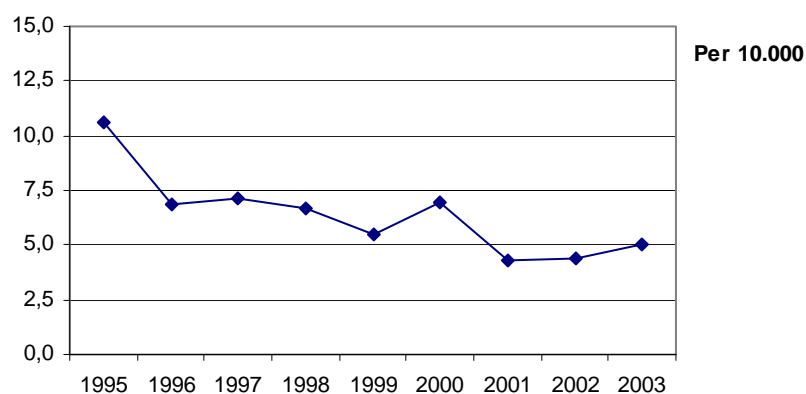
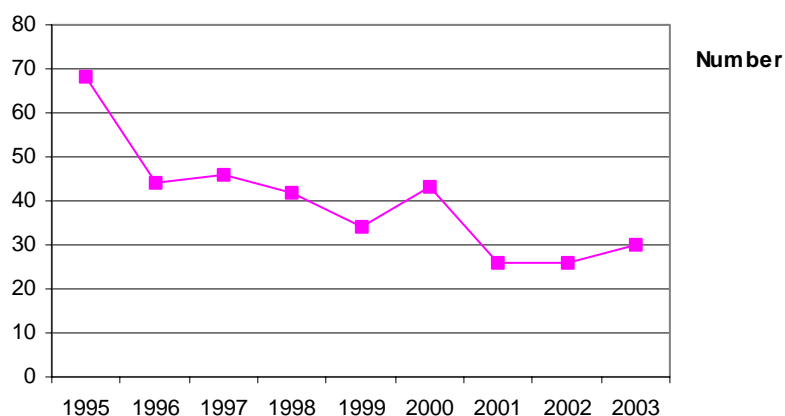
	2002			2003		
	Still births	Infant mortality	Total	Still births	Infant mortality	Total
Congenital abnormalities	30	81	111	34	82	116
Complications during pregnancy and in						

the perinatal period	135	55	190	138	76	214
Prematurity and dysmaturity	7	13	20	5	9	14
RDS (Respiratory Distress Syndrome)	5	26	31	6	32	38
SIDS (cot death)	0	26	26	0	30	30
Other	3	55	58	0	25	25
Poorly defined	73	3	76	91	7	98
Total	253	259	512	274	261	535

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

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

Cot deaths



5.8 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 Community of Flanders, Health Care Administration

In children aged 1 to 15 years

Two most important causes of death in children aged 1 to 15: accidents; cancer and blood disorders.

Marked decrease in deaths resulting from accidents

The most important cause of death in children aged 1-15 is accidents. Almost 24% of deaths in 2003 resulted from an accident, but this represented a marked decrease from earlier years. In second place are cancer and blood disorders (14.1%) For the 1 to 5 years age group, infections and muscle and nervous system disorders are the second most important cause of death (both 16.1%). In the 5 to 10 years age group, accidents, at almost 30%, and cancer and blood disorders, at over 20%, are the most frequent. For children aged 10 to 15 years, accidents are the most common cause of death, accounting for 26.0% of deaths in 2003, and cancer and blood disorders are also quite important (17.4%) (see Table 5.9).

Causes of death 1-15 years

	2001	2002	2003	
	Number	Number	Number	%
<u>Children aged 1-5</u>				
Infections	7	7	10	16.1
Cancer and blood disorders	10	14	5	8.1
Metabolism	4	2	6	9.7
Muscle and nervous system disorders	8	6	10	16.1
Heart, blood and respiratory	0	5	5	8.1
Gastrointestinal tract	0	2	2	3.2
Congenital abnormalities	9	10	4	6.5
SIS	2	0	3	4.8
Accident	28	17	12	19.4
Intentional self harm	0	0	0	0.0
Violence	5	4	4	6.5
Other or not specified	0	5	1	1.6
<i>Total deaths in children aged 1-5 years</i>	73	72	62	100.0
<u>Children aged 5-10</u>				
Infections	4	2	2	5.9
Cancer and blood disorders	9	9	7	20.6
Metabolism	2	3	2	5.9
Muscle and nervous system disorders	5	5	3	8.8
Heart, blood and respiratory	3	6	3	8.8
Gastrointestinal tract	0	0	0	0.0
Congenital abnormalities	1	4	5	14.7

Accident	21	14	10	29.4
Intentional self harm	0	0	0	0.0
Violence	1	2	2	5.9
Other or not specified	1	0	0	0.0
Total deaths in children aged 5-10	47	45	34	100.0
<u>Children aged 10-15</u>				
Infections	1	1	2	4.3
Cancer and blood disorders	13	10	8	17.4
Metabolism	2	4	5	10.9
Muscle and nervous system disorders	2	3	5	10.9
Heart, blood and respiratory	1	1	2	4.3
Gastrointestinal tract	1	0	0	0.0
Congenital abnormalities	2	1	1	2.2
Accident	23	17	12	26.0
Intentional self harm	7	1	7	15.2
Violence	2	1	1	2.2
Other or not specified	0	1	3	6.5
Total deaths in children aged 10-15	54	40	46	100.0
<u>Children aged 1-15</u>				
Infections	12	10	14	9.9
Cancer and blood disorders	32	33	20	14.1
Metabolism	8	9	13	9.2
Muscle and nervous system disorders	15	14	18	12.7
Heart, blood and respiratory	4	12	10	7.0
Gastrointestinal tract	1	2	2	1.4
Congenital abnormalities	12	15	10	7.0
SIS	2	0	3	2.1
Accident	72	48	34	23.9
Intentional self harm	7	1	7	4.9
Violence	8	7	7	4.9
Other or not specified	1	6	4	2.8
Total deaths in children aged 1-15	174	157	142	100.0

5.9 Causes of death in children aged 1-15 years in the Region of Flanders

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

Deaths as a result of an accident in children aged 1 to 15 years

In Table 5.10 we look at deaths resulting from accidents in 2003 in more detail. 12 children aged 1 to 5 years

died as a result of an accident, of whom 3 drowned and 3 died as a result of fire.

10 children aged 5 to 10 years died as a result of an accident, of whom 7 were killed in traffic accidents. Traffic accidents are also the commonest cause of accidental death in children aged 10 to 15 years, accounting for 8 of the 12 deaths.

Fatal accidents

	Children Aged 1-5	Children aged 5-10	Children aged 10-15
Pedestrian	1	1	2
Cyclist or motorcyclist	0	1	1
Passenger in a vehicle	0	1	2
Other or not specified	0	4	3
<i>Total traffic accidents</i>	<i>1</i>	<i>7</i>	<i>8</i>
Fall	2	0	1
Trapping, jamming	1	0	1
Drowning or submersion	3	0	1
Unintentional poisoning	0	0	1
Hanging, strangulation, choking	1	1	0
Fire	3	1	0
Other	1	1	0
<i>Total other accidents</i>	<i>11</i>	<i>3</i>	<i>4</i>
Total	12	10	12

5.10 Causes of fatal accidents in children aged under 15 in the Region of Flanders in 2003

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

4. Morbidity

In addition to mortality figures, figures for the incidence of diseases are an important indicator of the state of health of the population. In this section we present figures on a number of illnesses and abnormalities of relevance to children and we also look at specific problems reported by parents that children have with their feelings, concentration and behaviour and problems they have getting on with other people.

4.1. Congenital abnormalities

Data on congenital abnormalities affecting all children in Flanders are available only from obstetric records (SPE). In 2003, congenital abnormalities were identified in the perinatal period in 1.6% of births. This

percentage was 0.2% higher than in 2002. Table 5.11 gives a detailed picture of the incidence of congenital abnormalities.

Congenital abnormalities*

	Number	Per 100 births
Specific abnormalities		
Spina bifida	10	0.02
Anencephaly	3	<0.01
Hydrocephalus	25	0.04
Cleft lip/palate	79	0.13
Imperforate anus	15	0.02
Missing limbs	25	0.04
Diaphragmatic hernia	15	0.02
Umbilical hernia/gastroschisis	11	0.02
Other abnormalities		
Nervous and sensory system	27	0.04
Gastro-intestinal tract	65	0.10
Urogenital tract	149	0.25
Heart and lungs	212	0.35
Muscles and skeleton	131	0.22
Craniofacial complex	29	0.05
Multiple congenital abnormalities	47	0.08
Chromosomal abnormalities	72	0.12
Other	302	0.50

5.11 Congenital abnormalities recorded (perinatal period) in Flanders – 2003

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. For Flanders, the whole province of Antwerp participates in the Eurocat register. The provisional figures for 2003 must be treated with caution. In the past it has been found that the final figures do differ somewhat from the provisional figures for a number of disorders. That is why we have also included the comparison between 2001 and 2002.

From 2001 to 2002, a decrease was recorded in congenital abnormalities of the limbs, cleft lip and palate and chromosomal abnormalities and an increase was recorded in congenital abnormalities of the nervous system

and metabolic diseases(see Table 5.12).

Congenital abnormalities up to the age of 1 year (1)

System affected	Per 10 000 births		
	2001	2002	2003*
Cardiovascular system	45.6	46.5	43.6
Limbs	57.2	40.2	40.8
Nervous system	18.5	24.1	26.0
<i>of which, neural tube</i>	9.2	7.5	6.1
<i>hydrocephalus</i>	4.0	5.7	7.2
Digestive system, excluding pyloric stenosis	15.6	15.5	11.0
Pyloric stenosis	28.3	28.2	19.3
Internal urogenital system	34.1	34.5	25.9
External urogenital system	7.5	6.9	15.4
Cleft lip	14.4	8.6	11.6
Cleft palate	6.4	4.0	6.1
Umbilical hernia	2.9	2.9	2.2
Gastroschisis	0.0	1.7	1.7
Metabolic diseases	8.1	15.5	7.2
Chromosomal abnormalities	27.7	25.9	34.2
<i>of which, Down's syndrome</i>	14.4	11.5	16.0

5.12 Congenital abnormalities recorded up to the age of 1 year in the province of Antwerp per 10 000 births.

Source: Eurocat, Provincial Institute of Hygiene, Antwerp

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

** Provisional figures (concluded in October 2004). Reports for 2004 and 2005 are still being received, partly because sometimes it takes a while before a diagnosis is certain.*

4.2 Hearing loss

Hearing loss can be detected at a very young age. Almost all babies who are born at full term in Flanders are tested by Child and Family in the first months of their life.

A hearing abnormality was detected in 132 of the children tested who were born in 2004 (provisional figures). Per 1 000 children tested, there were 2.17 with a hearing impairment in 2004. The incidence for children born in 2003 was 2.32 per 1 000 children tested. Table 5.13 also shows the degree of hearing loss in children born in

2002 and 2003. This information is not yet available for 2004.

Hearing loss (1)

Incidence of hearing loss per 1 000 children tested

2002	1.83
2003	2.32
2004	2.17*

Degree of hearing loss

	Unilateral	Bilateral
<hr/>		
2002		
21 to 40 dB	9	8
41 to 70 dB	15	25
71 to 90 dB	7	12
> 90 dB	9	19
Total with classified hearing loss	40	64
<hr/>		
2003		
21 to 40 dB	11	8
41 to 70 dB	15	31
71 to 80 dB	7	19
> 90 dB	13	21
Total with classified hearing loss	46	79
<hr/>		

5.13 Young children in whom hearing loss was identified, expressed in decibels (dB); hearing loss in accordance with the scale of the International Office for Audiophonology by year of birth – only children tested by Child and Family

Source: Child and Family

(1) Not included: children who were admitted to an NICU

** Provisional figure*

4.3. Diseases and disorders

Thanks to the Health Surveys in Belgium, data are available on diseases and disorders in children in the Region of Flanders. The second Health Survey, which was conducted in 2001, included 685 children under the age of 12 living in the Region of Flanders.

Of the children surveyed aged under 12 *at the time of the survey* 7.1% were suffering from one or more long-term diseases, disorders or disabilities. This figure was lowest for children under 1 (1.1%). Numbers fell between 1997 and 2001, except for the 1 to 3 age group (see Table 5.14).

Long-term diseases, disorders, disabilities

	1997	2001
Children under 1	4.4	1.1
Children aged 1-3	7.3	8.5
Children aged 3-6	10.4	7.5
Children aged 6-12	9.8	7.6
Children under 12	8.9	7.1

5.14 Percentages of children aged under 12 in the Region of Flanders suffering from one or more long-term diseases, disorders or disabilities at the time of the survey

Source: Health Survey 1997 and 2001, Department of Epidemiology, Scientific Institute of Public Health

The Health Survey also enquired into 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 or chronic non-specific respiratory disease and allergies.

Asthma, chronic bronchitis and chronic non-specific respiratory disease

Asthma and chronic bronchitis are words that the general public uses. From a medical point of view we point out here that below the age of 4 no diagnosis of asthma can be made, and from a medical point of view one must now talk of wheezing bronchitis instead of chronic bronchitis or chronic non-specific respiratory disease.

The 2001 Health Survey shows that in the Region of Flanders, in a 12-month period, over 4% of children under 12 had had *asthma* and over 2% had had *chronic bronchitis or chronic non-specific respiratory disease*. Children aged 3-6 suffer from asthma most often; chronic bronchitis occurs most often in children aged 1-3 (see Table 5.15).

A comparison with 1997 is not possible, because no distinction was made at that time between asthma and chronic bronchitis.

Asthma and chronic bronchitis or chronic non-specific respiratory disease (1)

	Asthma	Chronic bronchitis or chronic
--	--------	-------------------------------

	non-specific respiratory disease	
Children under 1	0.0	2.1
Children aged 1-3	4.6	4.1
Children aged 3-6	8.1	1.3
Children aged 6-12	3.1	2.1
Children under 12	4.3	2.3

5.15 Percentages of children aged under 12 with asthma, chronic bronchitis or chronic non-specific respiratory disease in a 12-month period in the Region of Flanders - 2001

Source: 2001 Health Survey Belgium, Department of Epidemiology, Scientific Institute of Public Health
(1) In a 12-month period

Allergies

About 14% of children under 12 years of age suffered from an allergy in a 12-month period. There were fewer cases of allergies in children under the age of 1 year (see Table 5.16).

	Allergies (1)	
	1997	2001
Children under 1	0.0	8.2
Children aged 1-3	13.2	15.1
Children aged 3-6	14.3	16.5
Children aged 6-12	13.6	13.7
Children under 12	12.6	14.1

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

Source: Health Survey 1997 and 2001, Department of Epidemiology, Scientific Institute of Public Health
(1) In a 12-month period

Active tuberculosis

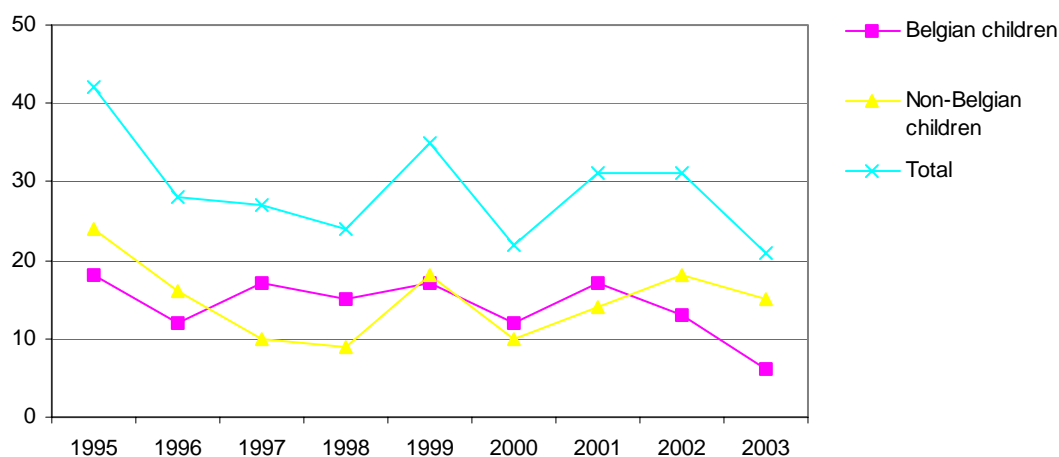
Most frequent in non-Belgian children

Active tuberculosis is not found only in developing countries. Children also suffer from tuberculosis in the industrialised countries of the West. In 2003, 21 new cases of tuberculosis were recorded in children under 15 in Flanders, 6 of them in Belgian children and 15 in non-Belgian children.

The number of new cases of active tuberculosis was much lower than in 2002. Fewer new cases were noted

both in Belgian and non-Belgian children. Figure 5.17 shows the trend since 1995.

Active tuberculosis



5.17 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. Tooth decay

Tooth decay in early childhood: almost two in ten pre-schoolers have it

The “*Niets aan de tand?*” (Anything wrong with your teeth?) project that ran in Ghent in 2003-2004 produced data on early childhood caries in children aged 2½ to 3 years. Early childhood caries was found in 18.5% of children aged 2½ to 3 years. This includes children with only 1 affected tooth and children with several large areas of caries. 12.2% of the children surveyed had a serious form of caries or at least symmetric tooth decay on the smooth surfaces of the incisors (always the top incisors first), which is also called “baby-bottle decay”. A moderate form of caries was found in 6.3% of young children (see Table 5.18).

Early childhood caries

Moderate form	6.3
Serious form (baby-bottle decay)	12.2
Total early childhood caries	18.5

5.18 Tooth decay in early childhood (children aged 25 to 33 months), 2003 to 2004 – percentages

Source: “*Niets aan de tand?*” (Anything wrong with your teeth?) project, a preventive health project in Ghent
* Project of the Brugse Poort, De Sleep and Botermarkt district health centres, Ghent University, Child and

Family, the Flemish Healthy Teeth Task Force, the Association of Flemish Dentists (VVT) – Studieclub Gent and the city of Ghent

4.5. Overweight in children aged 2 to 12 years

For some years the Body Mass Index (BMI, body weight in kilograms, divided by the square of the height in metres) has been used as an indicator of overweight and obesity for children and adolescents as well as adults. The BMI has been the standard by which to judge the body weight of adults for decades. It is not so simple with children. The BMI varies with age, so it is not realistic to have a simple threshold limit value that is valid for all ages. An obvious option is to use BMI percentile curves, that take explicit account of age differences. Then all that remains is to choose where to set the threshold percentiles for overweight and obesity. An arbitrary choice of a particular percentile (e.g. the 85th percentile) as the threshold limit value for being overweight presents an important conceptual problem. The increasing incidence of overweight people in the population means that as the years go by this percentile will go higher and higher. The International Obesity Task Force (IOTF) has proposed using the percentiles that correspond to a BMI of 25 or 30 kg/m² at age 18 as objective criteria for overweight and obesity respectively. That is why this criterion was used in the “Flemish growth curves” project to calculate the prevalence of overweight and obesity in Flanders.

The fieldwork for this project was carried out between January 2002 and December 2003 and it found that 11.2% of boys aged 2 to 12 were overweight and 2.5% were obese. The equivalent figures for girls were 15.2% and 3.4% (see Table 5.19).

Overweight and obesity

	Boys	Girls
Overweight	11.2	15.2
Obese	2.5	3.4

5.19 Incidence of overweight and obesity in 2- to 12-year-olds in Flanders based on the threshold limit values of the International Obesity Task Force – 2002-2003 (percentages)

Source: Mathieu Roelants, Anthropogenetics Laboratory, Free University, Brussels; Roland Hauspie, Anthropogenetics Laboratory, Free University, Brussels; Karel Hoppenbrouwers, Youth Health Department, Catholic University, Leuven, “Flemish growth curves” project

4.6. Children with psychosocial and/or emotional problems

The research study entitled “Caring for young children” carried out by the Herman Deleeck Centre for Social Policy (2004 – 2005) assessed children from the age of 4 years for psychosocial and emotional problems that they might have, and asked the parents to grade these problems as minor, obvious or serious.

The parents of over 18% of the children reported that their child had problems with his/her feelings, concentration or behaviour, or problems getting on with other people (see Table 5.20). Most of the problems reported were graded as minor or obvious; over 1 in 10 children had serious problems. Most of these problems had been going on for more than a year (see Table 5.21).

Psychosocial and emotional problems

	Children aged 4-6	Children aged 6-12	Total
Children with problems	16.2	19.3	18.6
Children without problems	83.8	79.7	80.6
Not known	0.0	1.0	0.8
Total	100.0	100.0	100.0

5.20 Children with problems with their feelings, concentration or behaviour or problems they have getting on with other people, by age of the child – spring 2005 (provisional figures - percentages)

Source: Herman Deleeck Centre for Social Policy, Antwerp

Seriousness and duration of the problems

Seriousness of the problems

Minor problems	42.4
Obvious problems	46.6
Serious problems	11.0
Total	100.0

Duration of the problems

1 to 5 months	11.8
6 to 12 months	12.6
More than a year	75.6

Total	100.0
-------	--------------

5.21 Children with problems with their feelings, concentration or behaviour or problems they have getting on with other people, by seriousness and duration of the problems – spring 2005 (provisional figures - percentages)

Source: Herman Deleeck Centre for Social Policy, Antwerp

4.7. Hospital admissions

In a 12-month period, almost 13% of children aged under 12 were admitted to hospital, in most cases only once. In the case of children aged 1-3, in a 12-month period almost 1 child in 4 was admitted to hospital (see Table 5.22).

Hospital admissions(1)

	1997	2001
Children under 1	16.6	18.1
Children aged 1-3	18.9	24.4
Children aged 3-6	10.8	10.4
Children aged 6-12	10.9	8.1
Total under 12	13.0	12.6

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

Source: Health Survey 1997 and 2001, Department of Epidemiology, Scientific Institute of Public Health

(1) In a 12-month period

5. Accidents to children

Accident prevention is an important task for anybody involved in caring for young children. Statistics on the actual situation are indispensable for preventive measures to be taken.

This section looks at accidents for which a doctor was consulted and traffic accidents. For deaths as a result of an accident we refer to section 3.2 in this chapter on causes of death.

5.1. Accidents necessitating medical treatment

1 child in 4 has an accident every year, especially in and near their own home. Falling on the same level is common

Data on fatal accidents are systematically compiled in statistics on the causes of death, but this represents only the tip of the iceberg. The *population surveys* present a much more complete picture of accidents. The second population survey conducted by Child and Family in 1999-2000 – the first was in 1984-1985 – asked a large group of parents of children under 3 each month 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 with what consequences.

In the course of a year almost 1 in 4 children aged between 3 months and 3 years were the victims of an accident for which a doctor was consulted. The *accident rate* is a little higher in boys than in girls, and varies depending on age. A noteworthy feature is that the accident rate has hardly changed at all compared with 15 years ago (see Table 5.23).

Accident rate

	1984-1985	1999-2000
Boys (1)	0.27	0.26
Girls (1)	0.21	0.20
Total	0.24	0.23
Children aged 3 months to 1 year	0.09	0.13
Children aged 1 to 2 years	0.26	0.22
Children aged 2 to 3 years	0.27	0.25
Total	0.24	0.23

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

Source: *Child and Family, Accidents necessitating medical treatment in babies and toddlers, 2003*

(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 matches the increased use of formal child care (see Table 5.24 and Figure 5.25).

Places where accidents occur

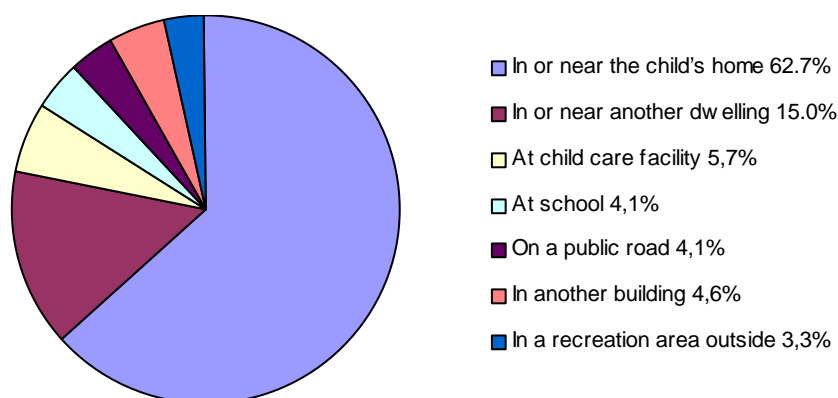
	1984-1985	1999-2000
In or near the child's home	64.7	62.7
In or near another dwelling	16.0	14.8
At child care facility	1.8	5.7
At school	5.7	4.1
On a public road	6.6	4.7
Elsewhere	5.1	7.9
<i>Of which</i>		
<i>in another building</i>	NA	4.6
<i>in recreation area outside</i>	NA	3.3
Not known	0.1	0.1
Total	100.0	100.0

5.24 Accidents necessitating medical treatment, to children aged between 3 months and 3 years, by the place where the accident occurred (percentages)

Source: *Child and Family, Accidents necessitating medical treatment in babies and toddlers, 2003*

NA: not available

Places where accidents occur



5.25 Accidents necessitating medical treatment among children aged between 3 months and 3 years, by the place where the accident occurred - 1999-2000

Source: *Child and Family, Accidents necessitating medical treatment in babies and toddlers, 2003*

Falls are a common cause of accidents to young children (64.2%). More of the children aged under 12 months fall from a height; slightly more of the children aged 1-3 years fall on the level. In second and third place come cuts and knocks (8.8%) and trapping or jamming of a limb (7.9%). These two types of accidents increase in relative terms as children get older. Burns and poisoning account for 5.7% 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 14% of accidents (see Table 5.26 and Figure 5.27).

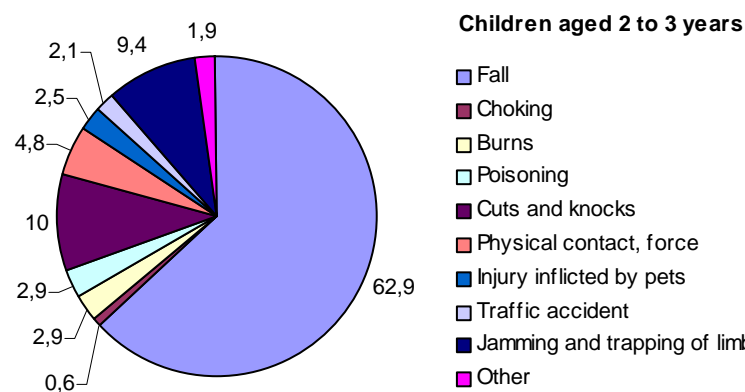
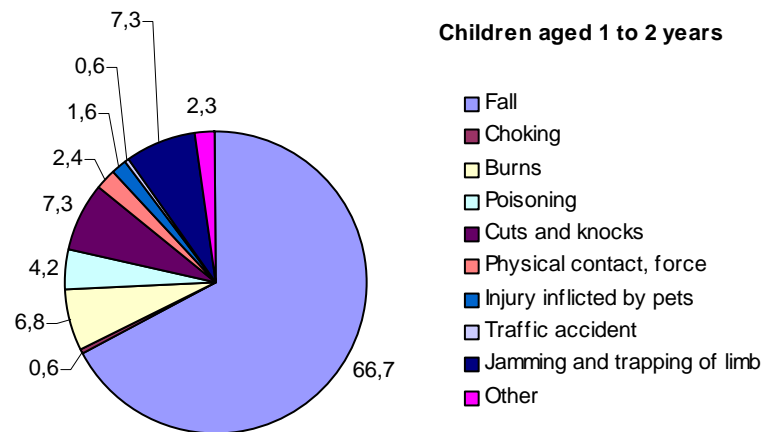
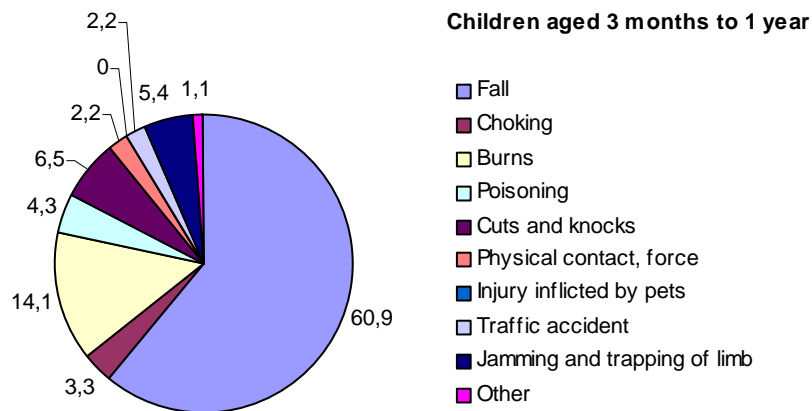
Type of injury

	Children from 3 m to 1 y	Children from 1 y to 2 y	Children from 2 y to 3 y	Total
Fall	60.9	66.7	62.9	64.2
On the level, tripping	12.0	32.1	31.2	29.8
On the stairs	5.4	8.4	7.5	7.8
From a higher to a lower floor	0.0	0.0	0.2	0.1
Other fall from a height	43.5	26.2	24.0	26.5
Choking	3.3	0.6	0.6	0.9
Burns	14.1	6.8	2.9	5.7
Poisoning	4.3	4.2	2.9	3.7
Cut, knock	6.5	7.3	10.0	8.8
Contact with static object	2.2	2.2	3.6	2.8
Contact with falling/thrown object	3.3	2.0	2.7	2.5
Contact with sharp object	1.0	2.2	1.0	1.6
Contact with moving object	0.0	2.2	1.0	1.6
Trapping, jamming of a limb	5.4	7.3	9.4	7.9
Physical contact, force	2.2	2.4	4.8	3.5
Injury inflicted by an animal	0.0	1.6	2.5	1.9
Traffic accident	2.2	0.6	2.1	1.4
Something in eye, ear, nose	1.1	1.3	1.9	1.6
Drowning, falling into water	0.0	1.0	0.0	0.4

5.26 Accidents necessitating medical treatment, to children aged between 3 months and 3 years, in 1999-2000, by type of injury and age (percentages)

Source: *Child and Family, Accidents necessitating medical treatment in babies and toddlers, 2003*

Type of injury



5.27 Accidents necessitating medical treatment, to children aged between 3 months and 3 years, by type of injury and age – 1999-2000

Source: Child and Family, Accidents necessitating medical treatment in babies and toddlers, 2003

The most common injuries sustained by young children in accidents are *open wounds* and *bruises* (see Table 5.28). 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 5.29).

Injuries

Open wound (flesh wound)	34.0
Contusions (bruises, etc.)	18.4
Burns	6.0
Broken bone	5.2
Open wound + contusions	4.5
Sprain	3.2
Dislocation	3.2
Brain injury	2.5
Grazes + contusions	2.3
Internal injury	2.3
Grazes	2.1
Other injury	1.6
Remaining categories (1)	5.9
No injury	8.7
Total	100.0

5.28 Accidents necessitating medical treatment among young children by injuries sustained, 1999-2000 - percentages (more than one answer possible)

Source: Child and Family, Accidents necessitating medical treatment in babies and toddlers, 2003

(1) Remaining categories includes all categories that in themselves make up less than 1% of the accidents recorded

Medical intervention (1)

GP	54.3
Accident and emergency department	42.6
Other specialists	11.7
Paediatrician	10.4
Admission to hospital	4.5
Dentist	3.9
Poisons unit	2.1
First aid post	1.5

5.29 Accidents to young children necessitating medical treatment by type of medical intervention – 1999-2000 –

percentages

Source: *Child and Family, Accidents necessitating medical treatment in babies and toddlers, 2003*

(1) Several answers possible, so the percentages may add up to more than 100

5.2. Traffic accidents

Mainly when riding as a passenger in a private car

In 2001, 68 children under 5 were *killed* or *seriously injured* in traffic accidents in the Region of Flanders. In over 6 out of 10 of these accidents the child was a passenger in a private car. Almost 3 in 10 of these children became victims of accidents while on foot.

132 children aged 5 to 10 years were killed or seriously injured. Once again, the most common situation was as a passenger: almost 42% of the children aged 5 to 10 who were killed or seriously injured were travelling as passengers in private cars. Almost 36% were on foot and almost 20% were riding bicycles.

206 children aged 10 to 15 years were killed or seriously injured. In the 10 to 15 age group, the most frequent serious accidents were those where the child was a cyclist, moped rider, motorcyclist or car driver: in 55.3% of the serious accidents the victim was in charge of a vehicle. Accidents sustained as a passenger came second (21.8%) and in third place accidents to pedestrians (17%) (see Table 5.30).

The only figures currently available for 2002 are the national figures. In 2002, 496 children under 15 were killed or seriously injured in Belgium.

This represents a fall of over 2% compared with 2001. The main decrease was in the number of deaths, which fell from 63 to 37.

Victims of traffic accidents in the Region of Flanders

	Pedestrian	Driver of a bicycle, moped, motor cycle, passenger car	Car passenger	Other	Total
Children aged under 5					
Seriously injured(1)	16	2	39	2	59
Dead within 30 days	4	0	3	2	9
Total	20	2	42	4	68
Children aged 5-10					
Seriously injured(1)	43	23	50	4	120
Dead within 30 days	4	2	5	1	12

Total	47	25	55	5	132
Children aged 10-15					
Seriously injured(1)	31	108	40	11	190
Dead within 30 days	4	6	5	1	16
<hr/>					
Total	35	114	45	12	206

5.30 Victims of traffic accidents in the Region of Flanders – Number of children under the age of 15 who died within 30 days, the number seriously injured and type of road user in 2001

Source: *Belgian Road Safety Institute - NIS data*

(1) *Seriously injured: necessitating admission to hospital for more than 24 hours*

Victims of traffic accident in Belgium

	2001			2002		
	Deaths	Seriously injured(1)	Total	Deaths	Seriously injured(1)	Total
Children under 5 years	18	108	126	9	117	126
Children aged 5 to 10 years	23	195	218	9	117	126
Children aged 10 to 15 years	22	281	303	19	225	244
<hr/>						
Total	63	584	647	37	459	496

5.31 Victims of traffic accidents in Belgium – Number of deaths within 30 days and serious injuries among children under the age of 15 years

Source: *Belgian Road Safety Institute - NIS data*

(1) *Seriously injured: necessitating admission to hospital for more than 24 hours*

6. Child abuse

Once again a marked increase in the number of notifications to the confidential child abuse centres; notifications mainly from child's immediate circle

In 2004, the six confidential child abuse centres recorded a total of 6 060 *notifications* of specific cases of abuse or neglect of minors. A total of 7 874 minors were involved (see Table 5.32).

The number of notifications rose by 7.9% compared with 2003. Figure 5.33 shows the trend in notifications

since 1995: the decrease in the number of notifications in 2003 has been completely wiped out.

In 2004, the *number of children notified per 10 000 children* was 61.8 (for the Region of Flanders). Figure 5.34 shows the trend per 10 000 children since 1995. This figure shows a slight increase over 2003 from 61 to 61.8, which didn't however completely wipe out the decrease observed between 2002 and 2003.

The relative number of children notified per 10 000 children in 2004 varies from province to province. It is highest in the province of Antwerp (70.7 per 10 000) and lowest in the province of West Flanders (47.6 per 10 000) (see Table 5.35). There was a slight decrease in the provinces of Antwerp and West Flanders. There was an increase in Flemish Brabant, East Flanders and especially in Limburg.

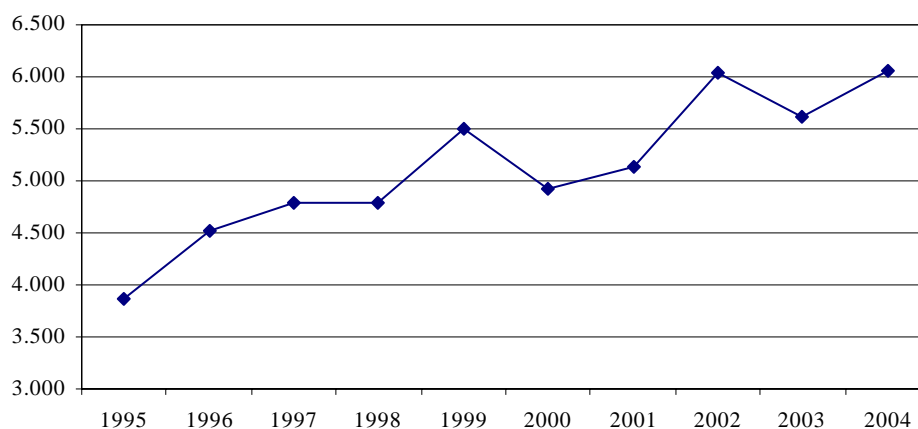
Notifications

	2003	2004
Number of notifications	5 615	6 060
Number of children affected	7 779	7 874

5.32 Numbers of notifications of child abuse or neglect

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

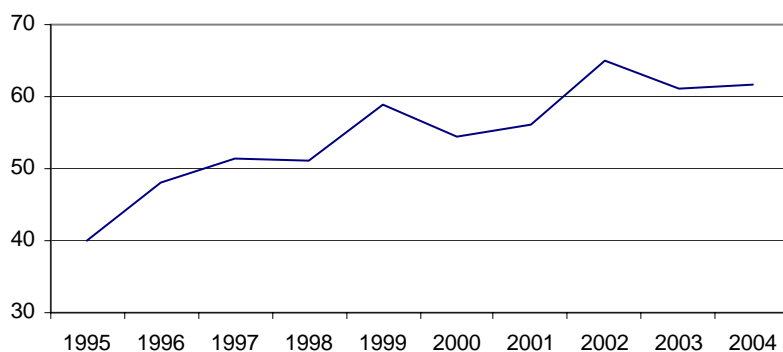
Trend in the number of notifications



5.33 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*

Trend in the number of children notified



5.34 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 cases notified per 10 000 children

	2003	2004
Antwerp	71.5	70.7
Flemish Brabant	65.1	68.6
West Flanders	51.1	47.6
East Flanders	54.9	56.4
Limburg	58.1	63.4
Region of Flanders	61.0	61.8

5.35 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*

In the case of 2 297 children, or 29.2% of cases notified, those notifying the abuse reported *physical abuse or neglect*.

The number of children that were notified because of *sexual abuse* was 1 850 or 23.5% of the children reported. Since 2004 sexual abuse has been broken down further: incest was recorded for 1 185 children or 64.1% of all cases of sexual abuse and extra-familial sexual abuse was recorded for 556 children or 30.1% of all cases of sexual abuse. In the case of 109 children, or 5.9% of all cases notified for sexual abuse, it was still not clear whether sexual abuse was involved or not.

1 550 children or 19.7% were reported on account of *emotional abuse or neglect*.

Compared with 2003, there was a decrease in the number of children notified for physical neglect (-10.9%), for a situation involving the risk of abuse or neglect (-4.8%) and for the category covering cases where the problem is not clear (-18.4%). In all other categories we noted an increase. The greatest increases were in emotional

neglect (+18.8%), Münchhausen syndrome by proxy (+51.8%) and problems arising from earlier abuse or neglect (12.1%) (see Table 5.36).

44.7% of notifications came from the child's immediate surroundings; they included, in particular, notifications by the mother figure (15.4% of the total number of notifications), other members of the immediate family or relatives (9.8%), neighbours or acquaintances (9.6%), the father figure (6.9%), or by the victims themselves (1.2%).

29.3% of notifications came from professionals (16.7% from health care workers, 7.9% from welfare organisations and 4.8% from the special youth welfare service).

Notifications by all other professionals together accounted for 23.8%. These were judicial institutions (1.3%), pre-school facilities (1.1%) and school facilities (21.4%). 0.8% of notifications came from someone from the perpetrator's social circle. In 0.7% of the cases notified, it is not known who reported them.

Problems notified

	2003		2004*		Difference 2004-2003
	Number	%	Number	%	In %
Physical abuse	1 355	17.4	1 436	18.2	6.0
Physical neglect	966	12.4	861	10.9	-10.9
<i>Total physical abuse and neglect</i>	<i>2 321</i>	<i>29.8</i>	<i>2 297</i>	<i>29.2</i>	<i>-1.0</i>
Emotional abuse	870	11.2	921	11.7	5.9
Emotional neglect	529	6.8	629	8.0	18.9
<i>Total emotional abuse and neglect</i>	<i>1 399</i>	<i>18.0</i>	<i>1 550</i>	<i>19.7</i>	<i>10.8</i>
Sexual abuse: incest	1 117	14.4	1 185	15.1	6.1
Sexual abuse: not incest, or not known whether incest is involved	629	8.1	665	8.4	5.7
<i>Total sexual abuse</i>	<i>1 746</i>	<i>22.4</i>	<i>1 850</i>	<i>23.5</i>	<i>6.0</i>
Münchhausen syndrome by proxy	24	0.3	36	0.5	50.0
Child at risk of abuse/neglect	1 217	15.6	1 159	14.7	-4.8
Problem unclear, person reporting not sure	619	8.0	505	6.4	-18.4
Problems to do with working through earlier abuse/neglect	107	1.4	120	1.5	12.1
No abuse, other problem	346	4.4	357	4.5	3.2

Total	7 779	100.0	7 874	100.0	1.2
-------	-------	-------	--------------	--------------	-----

5.36 Child abuse: children 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 76.5 years for men and 81.6 years for women, the Region of Flanders scores quite well. Only Sweden, Spain and Italy have higher life expectancies, both for men and women (see Table 5.37).

Life expectancy at birth

Males

	1995	2000	2001	2002	2003
Region of Flanders	74.6	75.7	76.1	76.3	76.5
Belgium	73.4	74.6	74.9	75.1	
<i>Neighbouring countries</i>					
Germany	73.3	75.0	75.5	75.6	75.5*
France	73.9	75.3	75.5	75.6	75.8
Luxembourg	73.2	74.8	75.2	74.9	
The Netherlands	74.6	75.5	75.8	76.0	76.1*
<i>Nordic countries</i>					
Finland	72.8	74.2	74.6	74.9	75.1*
Denmark	72.8	74.5	74.7	74.8	74.9
Sweden	76.2	77.4	77.6	77.7	77.9
<i>Mediterranean countries</i>					
Greece	74.9	NA	75.4	75.8	75.4*
Italy	74.8	76.6	76.7	76.8	76.9*
Portugal	71.6	73.2	73.5	73.8	74.0*
Spain	74.3	75.7	75.6	76.7	77.2*

Austria	73.3	75.1	75.6	75.8	76.0*
United Kingdom	74.0	75.5	75.7	75.8	76.2*
Ireland	72.8	74.3	74.6	74.4	

Females

	1995	2000	2001	2002	2003
Region of Flanders	80.8	81.5	81.8	81.8	81.6
Belgium	80.2	80.8	81.1	81.1	
<i>Neighbouring countries</i>					
Germany	79.7	81.0	81.3	81.6	81.3*
France	81.8	82.7	82.9	82.9	82.9
Luxembourg	80.4	81.1	80.7	81.5	
The Netherlands	80.4	80.5	80.7	80.7	80.8
<i>Nordic countries</i>					
Finland	80.1	81.0	81.5	81.5	81.8*
Denmark	77.9	79.3	79.3	79.5	79.5*
Sweden	81.5	82.0	82.1	82.1	82.4
<i>Mediterranean countries</i>					
Greece	80.1	NA	80.7	81.1	80.7*
Italy	81.3	82.5	82.8	82.9	82.9*
Portugal	78.7	80.0	80.3	80.5	80.5*
Spain	81.5	82.5	82.9	83.1	83.7*
Austria	79.9	81.1	81.5	81.7	81.8*
United Kingdom	79.2	80.2	80.4	80.5	80.7*
Ireland	78.3	79.2	79.6	79.8	

5.37 Male and female life expectancy at birth from 1995 onwards in the EU-15 countries

Sources: Council of Europe, *Recent demographic developments in Europe 2003*

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

<http://www.who.int>

Eurostat, Newcronos, website

NA: not available

* Estimated figures

7.2. Caesareans

With over 189 Caesareans per 1 000 live births, Flanders is in the middle of the range. In the Netherlands, the Nordic countries and France the proportion of Caesareans is lower. In Italy, the proportion of Caesareans is much higher at 372 per 1 000 live births. It is also higher in Germany, Luxembourg and Portugal (see Table 5.38).

Caesareans

	1995	2000	2001	2002	2003
Flanders (1)	147.6	169.7	176.4	183.2	189.2
Belgium	143.7	158.2	170.6	170.6	
<i>Neighbouring countries</i>					
Germany	172.4	208.9	221.3		
France	NA	171.3	177.3		
Luxembourg	NA	198.7	219.5	232.0	
The Netherlands	96.5	118.7	136.4	135.2	
<i>Nordic countries</i>					
Finland	155.9	158.5	163.5	160.8	
Denmark	124.8	144.5	162.4	176.7	
Sweden	113.5	142.5			
<i>Mediterranean countries</i>					
Greece	NA				
Italy	NA	330.3	347.7	361.9	
Portugal	203.1	225.5	239.7	243.1	
Spain	188.0				
Austria	NA	130.5	140.9		
United Kingdom	NA	177.4	181.1	191.6	
Ireland	NA				

5.38 Number of Caesareans per 1 000 live births in the EU-15 countries since 1995.

Sources: Study Centre for Perinatal Epidemiology

OECD, Health Data 2004

(1) Figures for the Region of Flanders and a Dutch-speaking maternity hospital in Brussels; number per 1 000 births

NA: not available

7.3. Birth weight

Rates of prematurity, defined as a birth weight below 2 500 g, vary greatly in the EU-15 countries. The Nordic countries have low rates, at 5.5 per 100 live births in Denmark and 4.3 per 100 in Finland and Sweden. At 7.4 per 100 in 2003, the Region of Flanders still scores on the high side.

The United Kingdom, Portugal and Greece also have high levels of prematurity (see Table 5.39).

Low birth weight

	1995	2000	2001	2002	2003
Flanders(1)	6.9	6.8	7.1	7.4	7.4
Belgium	6.5				
<i>Neighbouring countries</i>					
Germany	6.1				
France	5.8	6.4	6.5	6.5	
Luxembourg	5.7				
The Netherlands	NA	NA	5.7		
<i>Nordic countries</i>					
Finland	4.0	4.3	4.3	4.3	
Denmark	5.5	4.9	5.3	5.5	
Sweden	4.4	4.4	4.3	4.3	
<i>Mediterranean countries</i>					
Greece	6.8	8.1			
Italy	6.0	6.7	6.5		
Portugal	6.0	7.1	7.9	7.4	
Spain	5.5	6.5	6.8		
Austria	5.7	6.3	6.7	6.6	
United Kingdom	7.2	7.5	7.5	7.7	
Ireland	4.7	4.8	5.1		

5.39 Number of children with a birth weight below 2 500 g per 100 live births in the EU-15 countries since 1995

Sources: OECD, Health Data 2004

Study Centre for Perinatal Epidemiology

(1) Figures for the Region of Flanders and a Dutch-speaking maternity hospital in Brussels

7.4 Congenital abnormalities

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

Table 5.40 compares the data from the Antwerp register for 2002* with the data from all Eurocat registers that operate fully in accordance with Eurocat guidelines. There are 16 registers.

Compared with the Eurocat average for 2002, incidence of abnormalities to the limbs and the internal urogenital system were noticeably higher in Antwerp in 2002. There were more abnormalities of the nervous system and the digestive system. On the other hand, there were noticeably fewer cases of abnormalities of the cardiovascular system, the external urogenital system and chromosomal abnormalities.

Congenital abnormalities up to the age of 1 year

	Antwerp 2002	Eurocat average 2002
	Per 10 000 births	Per 10 000 births
Cardiovascular system	46.5	58.0
Limbs	40.2	32.1
Nervous system	24.1	22.5
<i>of which</i>		
<i>neural tube</i>	7.5	9.3
<i>hydrocephalus</i>	5.7	5.5
Digestive system, excluding pyloric stenosis	15.5	12.9
Pyloric stenosis	28.2	*
Internal urogenital system	34.5	29.2
External urogenital system	6.9	13.6
Cleft lip	8.6	8.4
Cleft palate	4.0	5.3
Umbilical hernia	2.9	2.9
Gastroschisis	1.7	1.7
Metabolic disorders	15.5	**
Chromosomal abnormalities	25.9	34.1
<i>of which, Down's syndrome</i>	11.5	18.6

5.40 Congenital abnormalities recorded up to the age of 1 year in the Eurocat registers per 10 000 births

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

* The provisional figures for 2003 are also available (see section 4.1), but as past experience has taught us that these provisional figures often do differ somewhat from the final figures, we have opted to use the 2002 figures here.

7.5. Mortality

Infant mortality in the Region of Flanders has fallen considerably since 1995. In 2003, infant mortality in the Region of Flanders was on a par with other European countries that have a good score for infant mortality. The Nordic countries do noticeably better (see Table 5.41).

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 the stillbirth figures (see Table 5.42).

Infant mortality

	1995	2000	2001	2002	2003
Region of Flanders	5.9	4.7	4.5	4.3	4.3
Belgium	6.1	4.8	4.5	4.9	4*
<i>Neighbouring countries</i>					
Germany	5.3	4.4	4.3	4.3	4*
France	4.9	4.6	4.5	4.1	4.1
Luxembourg	5.5	5.1	5.9	5.1	5*
The Netherlands	5.4	5.1	5.4	5.0	4.8
<i>Nordic countries</i>					
Finland	3.9	3.8	3.2	3.0	4*
Denmark	5.1	5.3	4.9	4.4	3*
Sweden	4.1	3.4	3.7	2.8	3*
<i>Mediterranean countries</i>					
Greece	8.1	6.1	5.1	5.9	4*
Italy	6.2	4.5	4.7	4.7	4*
Portugal	7.5	5.5	5.0	5.0	4*
Spain	5.5	3.9	3.5	3.4	4*
Austria	5.4	4.8	4.8	4.1	4*
United Kingdom	6.2	5.6	5.5	5.3	5*
Ireland	6.4	6.2	5.7	5.1	6*

5.41 Infant mortality: number of deaths of children aged under 12 months per 1 000 live births from 1995 onwards in the EU-15 countries

Sources: OECD, Health Data 2004

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

WHO, Mortality Database (<http://www.unicef.org/infobycountry>)

* Provisional figures

Perinatal mortality

	1995	2000	2001	2002	2003
Region of Flanders	7.7	6.1	6.3	6.0	6.6
Belgium	7.7				
<i>Neighbouring countries</i>					
Germany	6.8	6.1			
France	7.4	6.7	6.9		
Luxembourg	7.0	7.3	6.7		
The Netherlands	8.0	7.8	7.9	7.7	
<i>Nordic countries</i>					
Finland	5.1	4.4	4.3	4.1	
Denmark	7.5	NA	6.8		
Sweden	5.5	5.6	5.7		
<i>Mediterranean countries</i>					
Greece	10.4	8.1			
Italy	7.7	5.8			
Portugal	9.0	6.2	5.6		
Spain	6.0	5.5	5.6		
Austria	6.8	6.7	6.2	6.4	
United Kingdom	7.5	6.9	6.7	6.9	
Ireland	10.6	9.0	9.2		

5.42 Perinatal mortality per 1 000 births in the EU-15 countries since 1995

Sources: OECD, Health Data 2004

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

Deaths in children aged 1 to 5 are falling everywhere. Once again the Nordic countries have the best scores (see Table 5.43).

Deaths in children aged 1-5

	1995	2000	2001	2002	2003
Region of Flanders	NA	NA	28.4	28.0	19.0
Belgium	69.6				
<i>Neighbouring countries</i>					
Germany	30.7	24.1	25.3		
France	30.1	25.1			
Luxembourg	9.5	21.6	48.4	30.8	
The Netherlands	33.2	28.1	26.2	26.9	24.1
<i>Nordic countries</i>					
Finland	24.8	17.7	15.5	16.1	
Denmark	30.5				
Sweden	26.4	12.3	18.9		
<i>Mediterranean countries</i>					
Greece	22.2	18.3	17.4		
Italy	29.0	18.9	21.2		
Portugal	52.1	42.6	38.9	39.5	
Spain	34.5	26.1	24.7		
Austria	31.9	22.7	23.1	19.6	
United Kingdom	26.4	22.8	22.9	23.4	
Ireland	29.9	21.3	35.8		

5.43 Number of deaths of children aged 1 to 5 years per 100 000 live births from 1995 onwards in the EU-15 countries

Source: WHO, Mortality Database (<http://www3.who.int/mort>) (own calculations)

7.6. Cot deaths

For most of the EU-15 countries the most recently available figures on cot deaths are for 2001 or 2000.

Table 5.44 shows very low figures for the Mediterranean EU countries and the Netherlands, with fewer than 2 cases of cot death under the age of 1 year per 10 000 live births.

It also appears that the number of cases of cot death is falling in all the EU-15 countries.

Cot deaths

	1995	2000	2001	2002	2003
Region of Flanders (1)	10.6	6.9	4.3	4.4	5.0
Belgium	NA				
<i>Neighbouring countries</i>					
Germany	9.8	6.3	5.9		
France	7.4	4.5			
Luxembourg	NA	3.5	12.8	5.6	
The Netherlands	NA	1.2	1.7	1.1	1.4
<i>Nordic countries</i>					
Finland	NA	3.2	2.3	2.3	
Denmark	3.3				
Sweden	4.0	2.8	3.1		
<i>Mediterranean countries</i>					
Greece	2.2	1.1	1.1		
Italy	1.1	0.6	0.5		
Portugal	0.4	0.5	NA	0.5	
Spain	2.1	1.8	1.8		
Austria	6.4	5.0	3.0	4.1	
The United Kingdom	5.6	3.7	3.8	2.9	
Ireland	5.9	9.1	6.6		

5.44 Number of cases of cot death in infants under the age of 1 year per 10 000 live births in the EU-15 countries

Sources: WHO Statistics, Mortality Database (own calculations)

Ministry of the Flemish Community, Health indicators

NA: not available

(1) Figures for total number of cases of cot death per 10 000 live births

7.7. Deaths caused by accidents

The number of deaths caused by accidents is on the high side in Belgium. In the EU-15 countries the very bad score of Portugal stands out. Sweden has relatively the lowest number of deaths resulting from accidents (see Table 5.45).

The number of deaths caused by traffic accidents is also high in Belgium compared with the other EU-15

countries. Only Greece and Portugal have worse scores (see Table 5.46).

Deaths caused by accidents

	Children aged 1-5	Children aged 5-10	Children aged 10-15
Belgium	9.8	8.1	9.6
<i>Neighbouring countries</i>			
Germany	11.1	7.1	7.3
France	12.0	7.3	8.4
Luxembourg	NA	NA	NA
The Netherlands	8.4	5.0	6.6
<i>Nordic countries</i>			
Finland	7.3	7.7	9.1
Denmark	9.1	7.1	8.2
Sweden	5.6	4.5	5.5
<i>Mediterranean countries</i>			
Greece	8.7	6.4	7.9
Italy	5.9	4.7	7.6
Portugal	23.8	15.2	15.3
Spain	10.2	6.6	7.8
Austria	12.0	7.3	9.1
United Kingdom	7.3	4.6	6.4
Ireland	10.1	6.8	7.8

5.45 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*

NA: not available

Deaths caused by traffic accidents

Belgium	4.3
<i>Neighbouring countries</i>	
Germany	3.6

France	3.8
Luxembourg	NA
The Netherlands	3.4
<i>Nordic countries</i>	
Finland	4.2
Denmark	4.0
Sweden	2.5
<i>Mediterranean countries</i>	
Greece	4.7
Italy	3.3
Portugal	8.7
Spain	4.0
Austria	4.0
United Kingdom	2.9
Ireland	4.1

5.46 Number of deaths caused by traffic accidents per 100 000 children aged 1 to 15 in the EU-15 countries in the period 1991-1995

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

NA: not available

7.8. Deaths as a result of child abuse

UNICEF published league tables on deaths resulting from child abuse in the affluent nations. The annual average number of deaths of children under the age of 15 was calculated for each country over the last 5 years for which mortality figures were available.

This is about 0.5 per 100 000 deaths in the EU-15 countries. Only Spain, Greece, Italy and Ireland score below this with 0.3 or fewer. Austria scores higher, with 0.9 (see Table 5.47).

Apart from the figure for deaths classed as deaths caused by manslaughter and fatal maltreatment by other persons, UNICEF also gives "revised figures" which, in addition to deaths caused by manslaughter and fatal maltreatment, include deaths classed as of "undetermined intent". UNICEF makes the assumption that when no other cause of death and no other motive can be given, a child's death can most probably be blamed on abuse or neglect that cannot be legally proved.

Deaths due to child abuse

	Per 100 000 (1)	Revised figures (2) Per 100.000
Belgium	0.6	1.1
<i>Neighbouring countries</i>		
Germany	0.6	0.8
France	0.5	1.4
Luxembourg	NA	NA
The Netherlands	0.5	0.6
<i>Nordic countries</i>		
Finland	0.7	0.8
Denmark	0.7	0.8
Sweden	0.5	0.6
<i>Mediterranean countries</i>		
Greece	0.2	0.2
Italy	0.2	0.2
Portugal	0.4	3.7
Spain	0.1	0.1
Austria	0.9	1.0
United Kingdom	0.4	0.9
Ireland	0.2	0.3

5.47 Average number of deaths per year per 100 000 children under the age of 15 in the EU-15 countries, based on the mortality figures for the 5 most recent years available

Source: UNICEF, *A League Table of Child Maltreatment Deaths in Rich Nations*, INNOCENTI Report Card, no 5, September 2003

(1) Only deaths with "manslaughter and fatal maltreatment by another person" recorded as the cause of death

(2) Deaths with "manslaughter and fatal maltreatment by another person" recorded as the cause of death as well as deaths classed under "undetermined intent"

NA: not available

7.9. Smacking

Child abuse is a general problem and its roots lie in cultural, economic and social customs. UNICEF translates the challenge to put a stop to child maltreatment into the challenge to break the link between adults' problems and children's pain. Preventing child abuse is really about creating a culture of non-violence toward children. In this context, UNICEF assessed the status of legislation on the physical chastisement of children, and was able to distinguish gradations. The most radical is the explicit banning of physical punishment of children. A rather less far-reaching rejection of physical punishment means that parents cannot appeal on the grounds of their rights in cases of "disciplinary" aggression.

Sometimes physical punishment is prohibited in some contexts and not in others. UNICEF looks at whether it is banned in the home, at school, in the prison system, in other institutions and in care environments outside the family.

Table 5.48 compares the situation in Belgium with a number of other European countries.

Physical punishment in schools and in prison is banned everywhere. In other institutions and in care outside the home, the picture is mixed, going from a ban, through a partial ban to no ban at all. The Nordic countries and Austria have had a ban on physical punishments for a very long time; Germany introduced it recently. The other countries have not taken that step yet.

Aspects of the health and development of young children

Physical punishment of children						
	Explicit ban	Right to “disciplinary” aggression retracted	Banned in the home	Banned at school	Banned in prison	Banned in other institutions and care outside the home
Belgium	No	Right does not exist	No	Yes	Yes	Yes
<i>Neighbouring countries</i>						
Germany	Yes (2000)	Yes	Yes	Yes	Yes	Yes
France	No	No	No	Yes	Yes	No
Luxembourg	No	No	No	Yes	Yes	Sometimes
The Netherlands	No	No	No	Yes	Yes	Sometimes
<i>Nordic countries</i>						
Finland	Yes (1984)	Yes	Yes	Yes	Yes	Yes
Denmark	Yes (1997)	Yes	Yes	Yes	Yes	Yes
Sweden	Yes (1979)	Yes	Yes	Yes	Yes	Yes
<i>Mediterranean countries</i>						
Greece	No	No	No	Yes	Yes	No
Italy	No	Yes (1)	Yes	Yes	Yes	Yes
Portugal	No	No	No	Yes	Yes	Yes
Spain	No	No	No	Yes	Yes	Yes
Austria	Yes (1989)	Yes	Yes	Yes	Yes	Yes
The United Kingdom	No	No	No	Yes	Yes	Sometimes
Ireland	No	No	No	Yes	Yes	Yes

5.48 Physical punishment of children: the legal situation

Source: UNICEF, *A League Table of Child Maltreatment Deaths in Rich Nations*, INNOCENTI Report Card, no 5, September 2003

(1) 1996 judgment of the Supreme Court, but not yet established in law

7.10 Overweight in children aged 6 to 12 years

The “Flemish growth curves” study looked at children between the ages of 2 and 12 years. For the purposes of comparison with the EU-15 countries, we have taken from this study the total figure for boys and girls in the 6 to

12 age group, because this is the figure that is available for other countries. In Flanders 14.8% of 6- to 12-year-olds are overweight and 3.4% are obese. Flanders is in the middle of the range.

The incidence varies from 12.0% (the Netherlands) to 36.0% (Italy)(see Table 5.49).

Overweight

Flanders	14.8
Belgium	18.0
<i>Neighbouring countries</i>	
Germany	16.0
France	19.0
The Netherlands	12.0
<i>Nordic countries</i>	
Denmark	15.0
Sweden	18.0
<i>Mediterranean countries</i>	
Greece	31.0
Italy	36.0
Spain	34.0
The United Kingdom	20.0

5.49 Incidence of overweight among 6-12 year-olds in a number of EU countries

Sources: Lobstein T., Frelut M-L., *Prevalence of overweight among children in Europe, Obesity news 2003*
Mathieu Roelants, *Anthropogenetics Laboratory, Free University, Brussels*; Roland Hauspie, *Anthropogenetics Laboratory, Free University, Brussels*; Karel Hoppenbrouwers, *Youth Health Department, Catholic University, Leuven, "Flemish growth curves" project*

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 and the composition of the feed, safe sleeping habits, use of therapeutic drugs and passive smoking.

As regards nutrition, we can fall back on the results of a large-scale survey into the nutrition situation of young children in Flanders that Child and Family had carried out in 2002. The parents of almost 3 000 children were asked at four key ages, 3, 6, 12 and 24 months, about the feeding of their young child*.

** Lenaers St., Goffin I., Survey into the nutrition situation of young children, SEIN, Limburg University Centre, November 2002*

1. Feeding babies in the first year of life

1.1. First food

Breast-feeding immediately after birth is the most common option; ethnic minority babies are breast-fed much more

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 against infections, offers the child protection against illnesses such as airway infections, diarrhoea and ear infection for longer, and helps to prevent allergy to cow's milk.

In our society mothers do not breast-feed as a matter of course, certainly not for a long period. However, we do observe that a large number of babies are breast-fed initially.

In 2003, the definitions of first food used by Child and Family were changed to bring them more into line with WHO definitions. Under the definition used since April 2003, breast-feeding means feeding the baby exclusively on breast milk. Small quantities of water, oral rehydration substances, medicines and vitamins and/or mineral supplements are still considered to be exclusive breast-feeding, as is some formula milk that has to be given due to particular circumstances. When, however, formula milk or other food is given regularly in addition to breast milk, this is no longer considered as breast-feeding.

There is still a difference between the WHO definition and ours: the WHO does not consider breast milk given to the baby in a bottle to be exclusive breast-feeding. Child and Family does not take the WHO line on this, because there is a great deal of debate in the medical world about whether the best way to give expressed

breast milk is in a bottle or in a cup.

A second change to the way the records are kept concerned the determination of the precise date of initial feeding. This is now defined very precisely as being on day six.

In Flanders, 63.4% of newborn babies are fed exclusively on breast milk as their *first food* on day 6. This represents an increase of 0.5% compared with 2003.

The percentage of babies who are exclusively breast-fed varies by *province*. The percentage is highest in Flemish Brabant, where 67.3% of babies are initially exclusively breast-fed. In the province of West Flanders, the percentage is the lowest, at only 55.7%. In the provinces of Limburg, Antwerp and East Flanders, 65.6%, 64.6% and 63.5% of newborn babies respectively are exclusively breast-fed (see Table 6.1). The percentage of babies who are initially exclusively breast-fed increased in all provinces except Limburg.

The percentage of babies who are initially exclusively breast-fed is higher for *first-borns* than for subsequent babies. The number of first-borns that are breast-fed is 65.1%; for subsequent babies the figure is 61.8%. Babies in *underprivileged families* are breast-fed to a slightly lesser degree (55.6%) (see Table 6.2).

The percentage is also higher among babies of *non-Belgian origin* than among babies of Belgian origin: 77.2% compared with 63.3%.

Breast-feeding from birth (1)

	2003*	2004
Antwerp	64.2	64.6
Flemish Brabant	66.8	67.3
West Flanders	54.8	55.7
East Flanders	62.3	63.5
Limburg	67.1	65.6
Region of Flanders	63.0	63.4

6.1 Percentages of babies exclusively breast-fed from birth by province – Region of Flanders

Source: *Child and Family – Ikaros*

(1) *Being exclusively breast-fed on day 6*

Babies born in May to December 2003

Breast-feeding by subgroups (1)

	2003*	2004
First-borns	65.2	65.1
Second or later babies	61.0	61.8
Babies in underprivileged families	55.6	55.2
Babies not in underprivileged families	63.4	63.9
Babies of Belgian origin	59.9	63.3
Babies of non-Belgian origin (2)	77.1	77.2
All babies	63.0	63.4

6.2 Percentage of babies that are breast-fed from birth, by order of birth, by origin and whether or not the family is underprivileged - Region of Flanders

Source: *Child and Family – Ikaros*

(1) *Being exclusively breast-fed on day 6*

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

* *Babies born in May to December 2003*

1.2. Course of breast-feeding

Not many babies breast-fed for a long period

Breast-feeding was mentioned extensively in the "Survey into the nutrition situation of young children", not only the practice of breast-feeding but also the parents' intentions before the birth.

66.5% of the parents* surveyed intended to breast-feed the baby. On the sixth day after birth almost 60% of babies were only breast-fed and a further 4.5% breast-fed and bottle-fed. By the age of 3 months the number of breast-fed babies had fallen considerably: only 25% were still only breast-fed and almost 14% receiving breast-feeding and other feeding. At the age of 6 months the number of breast-fed babies, whether or not in combination with other feeding, was 10.1% and at 12 months only around 4% were still being breast-fed together with other feeding (see Table 6.3).

Course of breast-feeding (1)

	Breast-feeding	Breast-feeding and other food
Intention of the parents before the birth	66.5	-
Feeding on the sixth day	58.9	4.5
Feeding at 3 months	25.2	13.7

Feeding at 6 months	0.8	9.3
Feeding at 12 months	-	3.9

6.3 Intentions of parents with regard to feeding the baby and course of breast-feeding up to the age of 12 months - 2002

Source: * Lenaers St., Goffin I., *Survey into the nutrition situation of young children, SEIN, Limburg University Centre, November 2002*

(1) Not included: babies in underprivileged families and from ethnic minorities

* Ethnic minority babies and babies in an underprivileged family were not surveyed

1.3. Bottle-feeding: the first bottle feed and bottle-feeding at 6 and 12 months

Most babies start with whey-protein-based infant formula. At six months most bottle-fed babies are being fed on suitable follow-up formula and at 12 months most of them are still being fed on growth or follow-up formula

What type of milk do parents choose when they bottle-feed their baby? The survey into the nutrition situation of young children in Flanders describes the composition of the first bottle-feed, bottle-feeding at 6 months and at 12 months.

The first bottle-feed

We make a distinction between babies that are bottle-fed from birth and babies that are breast-fed initially but later change over completely or partly to bottle-feeding.

Almost seven out of ten babies that are bottle-fed immediately after birth start with whey-protein-based infant formula, which is the best choice for bottle-feeding. 11.7% start with a hypoallergenic milk (HA milk) and 8.5% with a casein-based infant formula (see Table 6.4). In particular, parents who have allergies in their families choose HA milk instead of a whey-protein-based infant formula (27% compared with 21%).

Only 44% of babies who are switched from breast- to bottle-feeding at a later stage start with a whey-protein-based infant formula. HA formulas (27% in case of allergies in the family, 13% if not), anti-regurgitation formulas (AR milks) and other formulas are more common here.

First bottle-feed (1)

Babies initially bottle-fed	Babies initially breast-fed	Total
--------------------------------	--------------------------------	-------

Whey-protein-based	69.1	44.4	55.0
Casein-based	8.5	7.5	7.9
HA formula (2)	11.7	20.0	16.4
AR formula (3)	6.3	10.5	8.7
Soy-based formula	1.8	4.1	3.1
Follow-up formula	0.4 (4)	0.3	0.4
Other milks (4)	1.8	13.2	8.3
Combination (4)	0.4	0.0	0.2
Total	100.0	100.0	100.0

6.4 Composition of the first bottle-feed in babies who are bottle-fed from birth and in babies who are breast-fed initially 2002 (percentages)

Source: * Lenaers St., Goffin I., *Survey into the nutrition situation of young children, SEIN, Limburg University Centre, November 2002*

(1) Not included: babies in underprivileged families and from ethnic minorities

(2) Only indicated to prevent allergies

(3) Only indicated in case of regurgitation

(4) Not recommended at this age

At the age of 3 months, 67% of babies who started bottle-feeding have changed the type of bottle-feed at least once. Usually there are several factors behind the decision to change the feed. In seven out of ten cases the reason for the change is at least one gastro-intestinal problem, and in four out of ten cases the reason for the change is the regurgitation of milk. Colic, hunger and crying are also quite often the reason for the change.

Bottle-feeding at 6 months

Table 6.5 describes the type of *bottle-feeding at 6 months*. 86% of babies receive follow-up formulas at six months. 11% of babies are still given an infant formula at that stage, although this is only indicated from 0 to 4-6 months. Over 1% of respondents use several types of formula in one bottle. These may be both follow-up formulas and infant formulas. Around 1% give milks that are not suitable for babies of 6 months or are already giving toddler formula.

The follow-up formulas are mostly formulas based on cow's milk. Almost 46% of bottle-fed babies drink a follow-up formula based on cow's milk. AR follow-up formulas (15.8%), soy-based follow-up formulas (11.4%) and HA follow-up formulas (7.5%) are also regularly used.

The unsuitable milks mentioned are full milk, semi-skimmed milk, milk from the farm and buttermilk.

Bottle-feeding at 6 months (1)

Cows' milk-based follow-up formulas	45.7
AR follow-up formula (2)	15.8
Soy-based follow-up formulas	11.4
HA follow-up formula (3)	7.5
Other follow-up formulas	5.9
From birth - infant formula (4)	11.4
Combination feed (4)	1.3
Unsuitable milks (full/semi-skimmed cow's milk or other animal milks)	0.9
Soy-based "growth formulas" or toddler formula	0.1
<hr/>	
Total	100.0

6.5 Composition of the bottle feed at 6 months – 2002 (percentages)

Source: * *Lenaers St., Goffin I., Survey into the nutrition situation of young children, SEIN, Limburg University Centre, November 2002*

- (1) Not included: babies in underprivileged families and from ethnic minorities
 (2) Only indicated in case of regurgitation
 (3) Only indicated to prevent allergies
 (4) Not indicated at this age

Bottle-feeding at 12 months

Cow's milk-based formula is recommended up to the age of 12 to 18 months. Table 6.6 shows the milks babies are drinking on a daily basis at the age of one year. Around 85% are given growth or follow-up formulas at this age; 15% are not or no longer drinking formula milk.

Bottle-feeding at 12 months (1) (2)

	%
Follow-up formula or growth formula	85.2
Full cow's milk	10.9
Soy-based formula	10.9
Semi-skimmed milk	9.0
Sweetened milk drinks	6.5
Other vegetable milk	1.5
Skimmed milk	0.7

Other animal milks 0.7

6.6 Composition of the milk formula in babies that are bottle-fed at the age of 6 months – 2002 (percentages)

Source: * Lenaers St., Goffin I., Survey into the nutrition situation of young children, SEIN, Limburg University Centre, November 2002

(1) Not included: babies in underprivileged families and from ethnic minorities

(2) Several answers possible

1.4. Spoon feeding

Babies start to eat from a spoon at 4½ months on average, usually with pureed vegetables or fruit

Solid food must be offered at the optimum time to stimulate the development of normal chewing and swallowing. The critical period for starting spoon feeding is between 4 and 6 months. Technically speaking, spoon feeding can only be introduced from 4 months, because the baby is only able to take food from a spoon from this age. There are of course variations that depend on the development of the baby.

The average starting age for spoon feeding is 16.6 weeks (4.5 months). Nevertheless the fact is that 28% of babies start spoon feeding before the age of 4 months (16 weeks); over 24% do this in the fourth month (12 to 15 weeks), almost 4% before the age of 3 months (12 weeks).

Around as many babies start with vegetable puree as with fruit puree (see Table 6.7).

Spoon feeding (1)

Starting age

Under 4 months	27.9
<i>of which</i>	
0 to 3 weeks	0.1
4 to 7 weeks	0.7
8 to 11 weeks	2.9
12 to 15 weeks	24.3
From 4 to 6 months	70.7
Older than 6 months	1.4
Total	100.0

Type of first spoon feed

Vegetable puree	39.0
Fruit puree	36.7
Fruit juice	23.6
Milk formula	0.3
Other food	0.4

Total	100.0
-------	-------

6.7 Introduction age of spoon feeding and type of first spoon feeding – 2002 (percentages)

Source: * Lenaers St., Goffin I., Survey into the nutrition situation of young children, SEIN, Limburg University Centre, November 2002

(1) Not included: babies in underprivileged families and from ethnic minorities

1.5. The consumption of fat

A fairly large number of babies on a diet: fat excluded from vegetable puree

When preparing vegetable puree it is advisable to add fat. 45% of parents always add a fat and 10% often do so, but 29% never do this and 16% do so only occasionally.

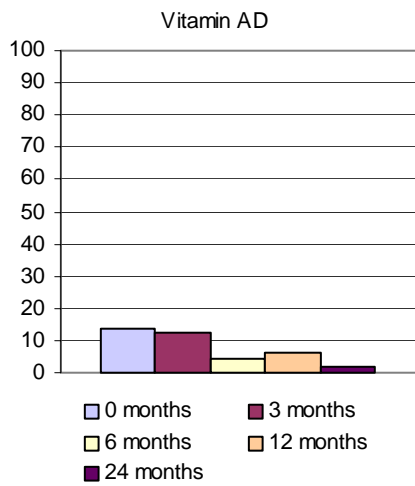
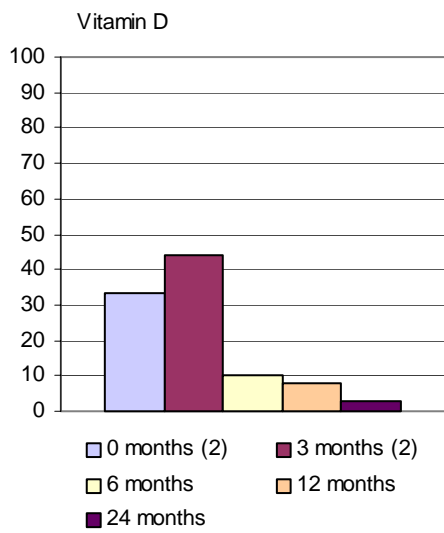
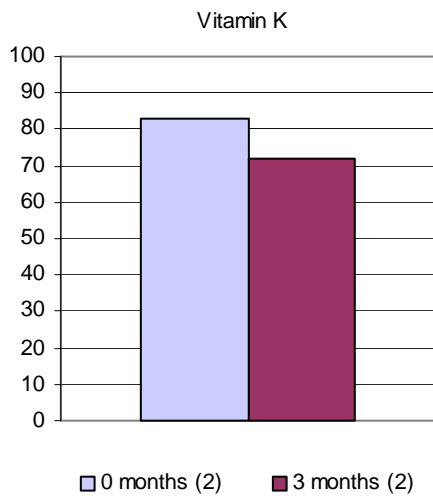
1.6. Addition of vitamins to the food

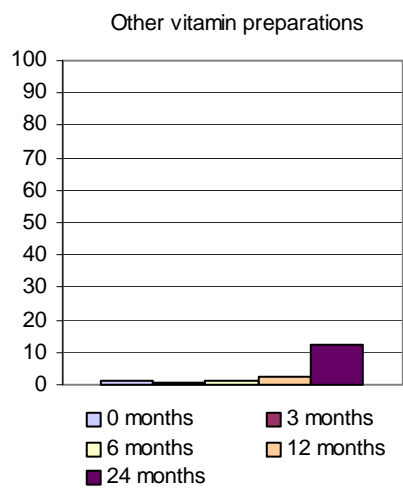
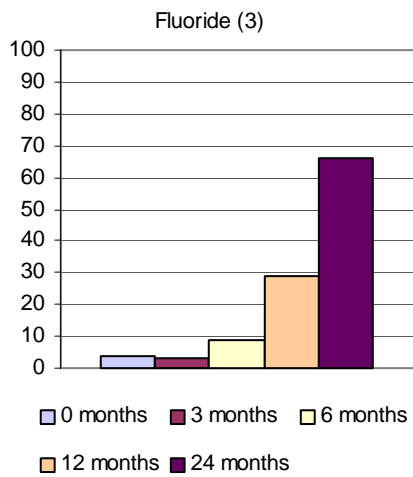
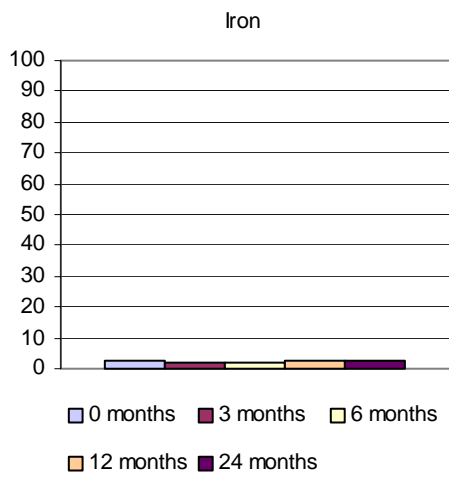
Vitamin K is recommended for breast-fed babies from birth to 3 months and vitamin D from 2 months to 2 years. 83% of breast-fed babies receive vitamin K from the start and only one out of three breast-fed babies is given vitamin D. At 3 months almost 44% of breast-fed babies receive vitamin D. Figure 6.8 includes giving vitamin K and D to breast-fed children.

About 13% of babies are given vitamin AD from the start and this falls after the age of three months. These vitamins are increasingly replaced by other vitamin preparations, multivitamins. At the age of 12 months, almost 13% of babies are given other vitamin preparations.

Iron supplementation remains constant over all ages. Fluoride on the other hand shows an enormous increase after three, and particularly after six months, when the teeth are developing (see Figure 6.8).

Vitamin supplements (1)





6.8 Vitamin K, vitamin D, vitamin AD, iron, fluoride and other vitamin preparations added to the food of young babies (percentages)

Source: * Lenaers St., Goffin I., Survey into the nutrition situation of young children, SEIN, Limburg University

Centre, November 2002

(1) Not included: babies in underprivileged families and from ethnic minorities

(2) Only breast-fed babies

(3) Supplements in the form of tablets or drops not recommended

1.7. Additional foods and snacks

Frequent consumption of additional foods and snacks, even though unnecessary

In addition to milk parents sometimes also give very young babies additional foods. This is however unnecessary. In most cases they are giving tea or water (see Table 6.9) Table 6.9 also includes snacks eaten between meals at the age of 24 months. Unhealthy snacks are very limited, except for sweets. Usually a piece of fruit or a biscuit is given.

Additional foods and snacks (1)

Additional foods in the age group up to 3 months

Tea for infants	12.5
Water	9.9
Fruit juice	2.3
Sugar water	2.0
Other drinks	1.6

Snacks at 24 months	Non-weekly	Weekly	Daily
Cake	87.7	12.3	0.0
Ice cream	80.2	19.3	0.5
Crisps	76.8	22.9	0.3
Fruit puree	74.3	15.5	10.1
Fromage frais	40.3	42.8	16.9
Sandwich	39.9	35.6	24.5
Sweets	38.4	45.5	16.1
Yoghurt	22.1	56.7	21.3
Piece of fruit	5.5	37.8	56.7
Biscuit	3.9	50.2	45.9

6.9 Additional foods in the age group 0 to 3 months and snacks at 24 months - 2002 (percentages)

Source: * Lenaers St., Goffin I., Survey into the nutrition situation of young children, SEIN, Limburg University Centre, November 2002

(1) Not included: babies in underprivileged families and from ethnic minorities

2. Nutrition after the first year

Not always very healthy

What is the situation with eating habits of children from 1 to 12 years? Healthy eating habits are measured by the incidence of breakfasting and the consumption of food products such as meat, fish, vegetables, fruit, milk, brown bread and the type of fat and the non-consumption of snacks, sugary sandwich fillings and sugary drinks.

In 5% of children aged 3-6, *breakfast every day* is not the norm. In the age group from 6-12 years, this is over 11% (see Table 6.10).

Breakfast (1)

	1 to 3 years	3 to 6 years	6 to 12 years
Once a week or less	0.6	2.0	1.6
2 to 4 times per week	0.6	2.0	6.5
5 to 6 times per week	0.0	1.1	3.2
Every day	97.4	94.9	88.5
Not known	1.5	0.0	0.2
Total	100.0	100.0	100.0

6.10 Children aged 1-12 years in the Region of Flanders by the number of times per week that they eat breakfast – 2001 (percentages)

Source: 2001 Health Survey Belgium, Department of Epidemiology, Scientific Institute of Public Health
(1) Information provided by the parents

Table 6.11 shows the consumption of a number of food products.

The consumption of *fruit and vegetables* could certainly be improved. Depending on the age, around 18 to 27% of children do not eat prepared or raw vegetables every day. A lot of children above the age of 3 do not eat fruit every day. For children aged over 6 this is even more than 40%.

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 4, and semi-skimmed milk for children over 4. Daily consumption by 56.7% of children aged 1-3 of milk with a reduced fat content is unhealthy; nor does the consumption by 25.6% of children aged 6-12 of full-cream milk accord with the guidelines on healthy nutrition. We also note that 42.9% of children under 3 eat low-fat spread or semi-skimmed butter, which is not recommended.

The consumption of *brown bread* should certainly be increased. Less than half of children eat brown bread

daily.

Consumption of *sweet sandwich fillings* is high: 46.1% of children aged 1-3 consume these every day, and the figure is actually around 65% for children aged 3-6.

Fried potatoes are frequently consumed: 60.6% of children aged 1-3 years eat these once a week or more. For children aged over 3 this amounts to over 80%.

Food (1) (2)

	1 to 3 years	3 to 6 years	6 to 12 years
<u>Consumption of meat, poultry or game</u>			
Less than once a week	9.3	1.8	4.1
At least once a week, but not daily	50.5	51.9	49.6
Every day	38.7	46.3	46.3
<u>Consumption of fish, shell-fish or crustaceans</u>			
Less than once a week	33.8	40.6	44.3
Once a week	49.2	50.0	40.8
More than once a week	15.5	9.4	15.0
<u>Consumption of fruit (fresh fruit or fresh fruit juice, canned or frozen, dried, ...)</u>			
Less than once a week	7.6	5.6	3.3
At least once a week, but not daily	13.7	38.0	38.6
Every day	77.2	56.4	57.5
<u>Consumption of prepared or raw vegetables</u>			
Less than once a week	3.1	2.2	0.4
At least once a week, but not daily	14.8	24.8	22.2
Every day	80.8	73.0	77.4
<u>Consumption of lean or semi-skimmed milk products without added sugars</u>			
Less than once a week	10.0	35.1	19.0
At least once a week, but not daily	30.7	15.4	28.1
Every day	56.7	49.0	52.3
<u>Consumption of full or sugared milk products</u>			
Less than once a week	29.6	36.4	46.1
At least once a week, but not daily	14.0	22.1	27.8
Every day	54.9	40.9	25.6
<u>Consumption of brown bread</u>			

Less than once a week	29.0	25.7	30.8
At least once a week, but not daily	21.2	25.9	23.0
Every day	48.4	47.3	46.2
<u>Consumption of low-fat spread</u>			
<u>or semi-skimmed butter</u>			
Less than once a week	47.5	50.0	48.8
At least once a week, but not daily	6.0	11.0	11.2
Every day	42.9	37.4	38.8
<u>Consumption of sweet sandwich fillings</u>			
Less than once a week	14.1	5.5	6.0
At least once a week, but not daily	38.3	29.5	43.6
Every day	46.1	64.9	50.4
<u>Consumption of fried potato products</u>			
Less than once a week	38.0	18.5	13.1
Once a week	50.6	64.4	70.8
More than once a week	10.0	17.1	16.1
<u>Consumption of sweet or savoury snacks</u>			
Less than once a week	30.8	8.0	4.8
At least once a week, but not daily	48.7	50.6	53.2
Every day	19.0	40.3	41.6

6.11 Children aged between 1 and 12 by the consumption of a number of food products, Region of Flanders – 2001 (percentages)

Source: 2001 Health Survey Belgium, Department of Epidemiology, Scientific Institute of Public Health

(1) Not included: not known

(2) Information provided by the parents

3. Safe sleeping habits

The advice aimed at preventing cot deaths is being pretty widely followed

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 6).

The recommendations are followed very well in Flanders. 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 during the day is not good, with over half of the babies 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 babies in their own bedroom, whereas the recommendation is that they should sleep in the parents' bedroom (see Table 6.12).

Sleeping situation

Sleeping position

Always on back	61.2
Always on side	10.0
Always on tummy	4.3
Other	24.5

Use of duvet at night

Never use a duvet	77.9
-------------------	------

Use of pillow

Never use a pillow	91.6
--------------------	------

Temperature of room baby sleeps in during the day

Below ideal temperature	3.2
Ideal temperature	45.4
Above ideal temperature	51.4

Place where baby sleeps during the day

Living room	55.9
Own bedroom	33.5

Place where baby sleeps at night

Own bedroom	64.6
Parents' bedroom	29.8
Other	5.7

Supervision

Parent always checks if baby cries hard	73.3
---	------

Smoking

Someone in the house smokes	14.6
Someone in the house smokes in the child's presence	7.5

6.12 Sleeping situation of babies under 10 months (first-borns only; percentages) - 2000

Source: *Child and Family - Survey into the sleeping situation of the young child, 2000*

4. Sleep

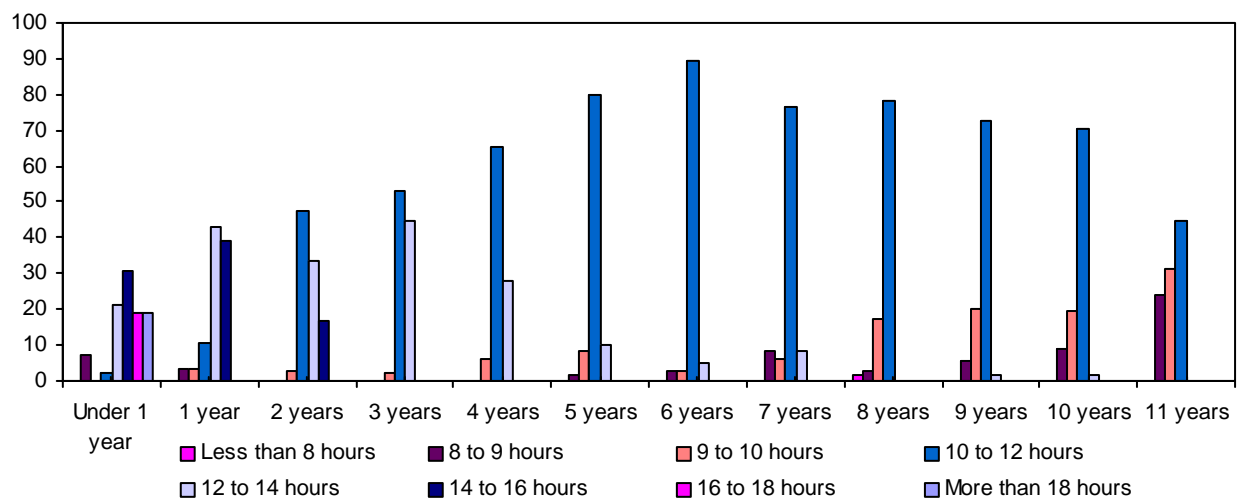
Do children get enough sleep? The figures point to some young children not getting enough sleep

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 14 hours. From the age of 3, the majority of children sleep for between 10 and 12 hours (see Figure 6.13).

Babies under the age of 12 months need over 14 hours' sleep*. Almost 31% of children under the age of 1 are sleeping for less than 14 hours. Children need 13 hours' sleep or more in their second year of life. Almost 18% 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 about 2% of the three-year-olds, increasing to 22% of the eight-year-olds and almost 26% 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

Sleep



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

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

5. Use of therapeutic drugs

Considerable and increasing

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

Considerable use is also made of therapeutic drugs for young children. 24% of children under the age of 12 (Region of Flanders) took *prescribed medication* in the 2-week period surveyed. This percentage falls as the child grows up, from 36.8% of children under 12 months to 19.2% of children aged 6-12 (see Table 6.14). Compared with 1997 the use of prescribed medication increased slightly.

Use of therapeutic drugs (1)

	1997	2001
Children under 1	32.3	36.8
Children aged 1-3	27.3	30.9
Children aged 3-6	23.1	23.3
Children aged 6-12	18.4	19.2
Total	22.6	24.0

6.14 Percentages of children taking prescribed medication in a 2-week period - Region of Flanders

Source: 1997 and 2001 Health Survey Belgium, Department of Epidemiology, Scientific Institute of Public Health

(1) In a 2-week period

6. 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 obvious effects on respiration.

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

20% of very young children smoke passively, usually because of people smoking in their presence outside their home but sometimes because their parents smoke

A random sample of 2 000 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 6.15).

Fathers smoke in the presence of their child rather more often than mothers (see Table 6.16).

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. 7.7% of mothers and 10.3% of fathers smoke in the home (see Tables 6.17 and 6.18).

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
Total	100.0

6.15 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
<i>Total smoking mothers</i>	3.3
<i>Total smoking fathers</i>	4.5
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

6.16 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 (1)

Yes	14.6
No	85.4
<hr/>	
Total	100.0

6.17 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*

(1) Somewhere in the home

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
<i>Total smoking mothers</i>	<i>7.7</i>
<i>Total smoking fathers</i>	<i>10.3</i>
Only other residents in the home	0.4
Visitors or other persons in the home	1.8

6.18 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*

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

Children up to the age of 12 years probably more subjected to passive smoking than babies in the first months of life: quite a lot of mothers and fathers smoke every day

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. 24% of children under the age of 12 have a mother who smokes every day and 30% have a father who smokes every day. Table 6.19 shows that about 16% of mothers and about 19% of fathers have stopped smoking.

Smoking patterns of parents

	Children under 3	Children aged 3-7	Children aged 7-12	Total
Mother				
Smokes every day	24.7	22.8	24.7	24.1
Smokes occasionally	7.8	3.7	7.9	6.6
Does not smoke but used to smoke	15.6	17.3	15.8	16.2
Does not smoke and has never smoked	52.0	56.2	51.7	53.1
Total	100.0	100.0	100.0	100.0
Father				
Smokes every day	21.7	28.5	32.8	30.0
Smokes occasionally	7.3	4.6	4.1	4.7
Does not smoke but used to smoke	18.8	17.7	19.2	18.7
Does not smoke and has never smoked	52.2	49.2	43.9	46.6
Total	100.0	100.0	100.0	100.0

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

Source: Panel Study of Belgian Households - year of observation 2002. Processed on behalf of Child and Family

7. The European context

7.1. Breast-feeding

Flanders certainly does not lead the field as far as breast-feeding is concerned. The percentage of babies who are initially exclusively breast-fed is significantly to very much lower than in Italy and Sweden (see Table 6.20). The percentage of babies who are still being breast-fed at six months is remarkably high in Sweden.

Breast-feeding

	At birth	On discharge	At 3 months	At 6 months
Region of Flanders (2004)	NA	63***	NA	NA
Belgium (1998/00)	63-72*	NA	30-37*	10*
Germany (1997/98)	96*	86*/73**	60*/33** (4 m)	48*/10*
France (2000)	NA	53*	15*	NA
United Kingdom (2000)	69*	NA	28* (4 m)	21*
Italy (2000)	89*	78**	NA	62*/45**
The Netherlands	80***	72***	47*/35***	34*/17***
Sweden	NA	98*/93**	83*/68** (4 m)	72*/33**

6.20 Percentage of babies being breast-fed at birth, on discharge from the maternity hospital, at 3 months and at 6 months around 2000

Source: IRCCS Burlo Garofolo (WHO Collaborating Centre), *Protection, promotion and support of breastfeeding in Europe: current situation, Dec. 2003, Trieste, Italy*

* Any form of breast-feeding

** Mainly or exclusively breast-feeding

*** Exclusively breast-feeding

NA: not available

7.2. Vaccination rates

Rates of vaccination against polio and DTP are good in most EU-15 countries. In Germany the rate is slightly below 90% for DTP 3, and in Greece, Austria and Ireland for both polio 3 and DTP 3. The situation with regard to hepatitis B is less good, with very low rates in France, Luxembourg and Belgium and low rates (below 90%) in Germany, Greece, Spain and Austria. There is no information available for Hep B 3 for some countries. Furthermore, the vaccination rate for measles is rather lower than the rate for polio and DTP (see Table 6.21).

Vaccination rates

	Polio 3	DTP 3	Hep B 3	Measles
Belgium	95	90	50	75
<i>Neighbouring countries</i>				
Germany	94	89	81	92

France	97	97	29	86
Luxembourg	98	98	49	91
The Netherlands	98	98	NA	96
<i>Nordic countries</i>				
Finland	96	98	NA	97
Denmark	96	96	NA	96
Sweden	99	98	NA	94
<i>Mediterranean countries</i>				
Greece	87	88	88	88
Italy	97	96	97	83
Portugal	96	99	94	96
Spain	98	98	83	97
Austria	84	84	83	79
The United Kingdom	91	91	NA	80
Ireland	86	85	NA	78

6.21 Percentages of children who have had polio 3, DTP3, Hep B 3 or measles vaccinations – 2003

Source: Unicef, *The state of the world's children 2005, Statistical Tables* (<http://www.Unicef.org>)

NA: not available