

THE DEMOGRAPHIC SITUATION IN HUNGARY IN INTERNATIONAL PERSPECTIVE

GYÖRGY VUKOVICH

How has the demographic crisis taken shape, what are its characteristic features and does it also exist anywhere else? The economic and social consequences of the demographic situation begin to become obvious in these days. However, the anxiety concerning the demographic situation emerges in many respects in another way than the reactions to other crisis phenomena. Consciously or not, presumably this difference is due to two reasons. One of them is the fact that according to the opinion of a number of people, in the long run it is about the biological survival of the nation, the Hungarian ethnic group; the other reason is that as a matter of fact the conscious influencing of the unfavourable processes has not been successful so far and observing the matter in its reality, even a consequent demographic policy can only have very limited effects for the future. The question has also arisen whether such a policy is needed at all. All these make it clear why, for a long time, many people have observed the demographic situation with anxiety, why they express their anxiety in various forms and try to find the reasons for the present situation, though the opinions in this respect are not unanimous at all. There are people who also look for others to blame, they sometimes think to have found some culpables. The well-grounded anxiety also produces signs of impatience. I think that owing to the more and more worsening situation even more conflicts are to be expected in the future. The disputes are in many respects aggravated, often burdened by the differences in the professional background of the participants, first of all their imperfect knowledge of the subject, as it has turned out in several cases in the recent years.

This is why it seems to be reasonable to summarize in brief the most important elements of the main features of the present demographic situation in Hungary as well as the demographic processes.

THE COMPOSITION OF THE POPULATION

Hungary's population was 10 174 thousand persons on 1st January, 1997, 535 thousand less than that of the 1980 census of population. The decrease in the number of the population is not an extraordinary phenomenon at all in Europe, the number of the population of the United Kingdom, Germany, Roumania and several other countries has

also decreased in that period while in several countries it is stagnant. Moreover, the demographic situation of some countries is such that the number of their population may soon be stagnant or decreasing.

It is also characteristic for that period that the proportion of the age group of 14 years or under is decreasing (from 21.9 per cent to 18.0 per cent), that the younger age groups of the economically active population (between 15 and 39 years) has been practically unchanged (35.8 per cent to 35.6 per cent) and that of the older economically active population (between 40 and 59 years) has increased to a smaller extent (25.3 per cent to 27.0 per cent). The proportion of the persons over 60 years has increased to a larger extent, in 1980 they constituted 17.1 per cent, in 1996 19.4 per cent of the total population. These proportions originate mainly from the changes of vital events i.e. from the changes and trends of the number of births and deaths, because the role of the external migrations has been felt in Hungary since 1989 only but has not become decisive. It should also be noted that looking back for a longer period these proportions are shifting even more sharply in the case of the youngest and the old age groups as it can be seen in Table 1.¹

Table 1

Age composition of the population (male and female together)
(1st January, per cent)

Age Group (years)	1949	1960	1970	1980	1990	1996
0–14	24.9	25.4	21.1	21.8	20.5	18.0
15–39	38.8	36.8	37.0	35.8	35.5	35.6
40–59	24.7	24.0	24.8	25.3	25.0	27.0
60–X	11.6	13.8	17.1	17.1	18.9	19.4

In 1960, for example, people aged under 15 years made out still one quarter of the population, now it is only 18 per cent and their proportion in the population is gradually approximated by that of the persons aged over 60. Thirty years ago these rates differed very much from each other. So the Hungarian population is definitely growing old. The oldest population lives in Budapest where the proportion of the age group over 60 years is already nearing one quarter of the population. The most favourable age composition can still be observed in the provincial cities.

The process of the population's general aging can also be felt in the age composition of the active earners. Among the active earners the proportion of the young persons aged under 30 years decreased to some extent (by 1 per cent) in the 70s, but it has decreased more considerably since 1980 while that of the persons aged 30 to 39 years as well as of the active earners aged 40 or over has gradually increased in the last 15 years. Namely, at the end of the 70s and mainly in the first half of the 80s the young persons born in the 60s and belonging to the small-numbered generations started work who could not entirely replace those getting to an older age group. Since then opposite processes have

¹ The sources of the data presented in the article are: International Statistical Handbook. Hungarian Central Statistical Office, Budapest, 1995. (For Hungary: Data of the 1996 Microcensus); Demographic Yearbooks of the Hungarian Central Statistical Office.

also been observed, since the mid-80s the age distribution of the active earners has only changed to a smaller extent, the proportion of the persons aged 60 or over has increased considerably. As a result of this process the proportion of the persons aged 30 to 39 years is now much higher than that of those aged 14 to 29 years as contrasted with the observations in 1980 when the proportion of the younger age group exceeded very much that of the people aged 30 to 39 years. The persons in working age – aged 40 or over – constitute today a much larger proportion of the active earners than 17 years ago.

Table 2

The distribution of the population by age group
(per cent)

Country	Year	(per cent)		Aged 65 or over
		0-14	15-64	
years				
Austria	1992	17.5	67.3	15.2
Belgium	1992	18.2	66.5	15.3
Bulgaria	1992	20.1	66.8	13.1
Denmark	1993	17.1	67.5	15.4
United Kingdom	1993	19.4	64.8	15.8
Finland	1993	19.1	67.0	13.9
France	1993	19.8	65.5	14.7
Greece	1993	17.4	67.8	14.8
Netherlands	1993	18.3	68.7	13.0
Yugoslavia (former)	1992	22.5	67.7	9.8
Poland	1994	23.1	66.0	10.9
<i>Hungary</i>	<i>1996</i>	<i>18.0</i>	<i>67.8</i>	<i>14.2</i>
Germany	1992	16.3	68.6	15.1
Norway	1993	19.2	64.6	16.2
Italy	1993	16.5	68.9	14.6
Russian Federation	1994	21.5	66.7	11.8
Portugal	1993	18.4	67.3	14.3
Spain	1993	17.7	67.9	14.4
Switzerland	1993	17.0	68.0	15.0
Sweden	1993	18.7	63.7	17.6
India	1992	35.8	60.2	4.0
Japan	1993	16.8	69.8	13.4
China	1994	26.8	67.0	6.2
Turkey	1993	33.7	62.0	4.3
Egypt	1992	39.1	57.5	3.4
Brazil	1992	34.2	62.8	3.0
Canada	1993	20.7	67.5	11.8
Mexico	1992	37.6	60.0	2.4
USA	1993	22.0	65.3	12.7
Australia	1993	21.7	66.7	11.6

In almost the half of the European countries the proportion of persons belonging to the young age group (aged under 15 years) is smaller or much smaller than the same in Hungary. These countries are mainly the most developed of the region. At the same time, in these countries the proportion of the old-aged people is more or less higher than it is in Hungary. Nevertheless, their age structure has formed similarly to that in Hungary, the

minor differences are mainly due to the fact that in the majority of these countries the fertility trends are to some extent different and the mortality indicators are much more favourable than those in Hungary. On the other hand the population of the East-European countries is much younger than that of Hungary.

The composition of the population by marital status has also changed to a large extent in the recent period. The proportion of the widowed and the divorced has increased, that of the married people has decreased considerably in both sexes. This tendency is to a lesser extent due to the mortality rate, but it became decisive mainly as a consequence of the latest developments taking shape in nuptiality trends. The essence of this is the fact that the number of marriages and marriage rates have decreased to a large extent and the divorce rate is permanently high.

As a joint consequence of the demographic phenomena, with the marriages in the first place, the composition of the families has also changed.

DEMOGRAPHIC PROCESSES

In the recent 40 years, though with considerable fluctuations, the trend of births has been decreasing in Hungary. In this respect, i. e. in the decrease, the situation in Hungary is identical to the majority of the developed countries, though in several European countries the more perceptible decrease of fertility has started later than in Hungary. However, the great fluctuations in the number of births can mainly be considered as a Hungarian speciality.

The extremely high wave-crest of births in the mid-50s in Hungary was followed by a never-seen wave-trough in some years, in the early 60s, then the number of births increased with minor fluctuations producing a wave-crest again in the mid-70s to bring after it first a slower, then a quicker decrease. The number of births now has touched bottom again, but it is much lower than it was in the early 60s: in 1962 there were 130 000 births in Hungary while in 1996 this figure was only 105 000 being the smallest number of births ever registered in Hungary.

Table 3

Vital rates						
Country	Year	Live-births	Deaths	Natural increase	Year	Infant mortality rate (per 1000 live-births)
		per 1000 inhabitants				
Austria	1990	11.6	10.6	1.0	1990	7.8
	1995	11.0	10.0	1.0	1995	5.5
Belgium	1990	12.6	10.6	2.0	1990	7.9
	1995	11.4	10.5	0.9	1994	7.6
Bulgaria	1990	11.7	12.1	-0.4	1990	14.8
	1995	8.1	13.4	-5.3	1993	15.5
Czech Republic	1995	9.3	11.4	-2.1	1995	7.4
Denmark	1990	12.4	11.9	0.5	1990	7.5
	1995	13.4	12.1	1.3	1993	5.4
United Kingdom	1990	13.9	11.2	2.7	1990	7.9
	1995	12.6	11.0	1.6	1994	6.2

(Continued on the next page.)

(Continuation.)

Country	Year	Live-births	Deaths	Natural increase	Year	Infant mortality rate (per 1000 live-births)
		per 1000 inhabitants				
Estonia	1990	14.2	12.4	1.8	1990	12.4
	1995	8.8	13.8	-5.0	1994	14.5
Finland	1990	13.1	10.0	3.1	1990	5.6
	1995	12.4	9.7	2.7	1994	4.7
France	1990	13.5	9.3	4.2	1990	7.3
	1995	12.5	9.1	3.4	1993	6.4
Greece	1990	10.2	9.3	0.9	1990	9.7
	1995	9.9	9.4	0.5	1995	7.9
Netherlands	1990	13.3	8.6	4.7	1990	7.1
	1995	12.3	8.8	3.5	1994	5.9
Croatia	1991	10.8	11.4	0.7	1990	10.7
	1994	10.2	10.4	-0.2	1994	10.2
Ireland	1990	15.1	9.1	6.0	1990	8.2
	1995	13.6	8.8	4.8	1994	5.9
Yugoslavia	1990	.	.	.	1990	22.8
	1995	13.2	10.2	3.0	1995	16.4
Poland	1990	14.3	10.2	4.1	1990	16.0
	1995	11.5	10.0	1.5	1995	13.5
Latvia	1990	14.2	13.1	1.1	1990	13.7
	1995	8.5	15.9	-7.4	1995	18.8
Lithuania	1990	15.3	10.7	4.6	1990	10.2
	1995	11.1	12.2	-1.1	1995	12.5
Hungary	1990	12.1	14.1	-2.0	1990	14.8
	1995	11.0	14.2	-3.2	1995	10.7
Germany	1991	11.3	11.1	0.2	1991	6.9
	1995	9.3	10.7	-1.4	1994	5.6
Norway	1990	14.3	10.7	3.6	1990	6.9
	1995	13.8	10.3	3.5	1993	5.0
Italy	1990	9.8	9.4	0.4	1990	8.6
	1994	9.2	9.6	-0.4	1994	6.7
Russia	1990	13.4	11.2	2.2	1990	17.6
	1995	9.3	14.7	-5.4	1994	18.5
Portugal	1990	11.8	10.4	1.4	1990	11.0
	1995	10.7	9.3	1.4	1993	8.7
Rumania	1990	13.6	10.6	3.0	1990	26.9
	1995	10.4	12.0	-1.6	1995	21.2
Spain	1991	9.9	8.6	1.3	1990	7.6
	1995	9.1	8.8	0.3	1995	5.6
Switzerland	1990	12.5	9.5	3.0	1990	6.8
	1995	11.6	8.6	3.0	1994	5.5
Sweden	1990	14.5	11.0	3.4	1990	6.0
	1995	11.7	11.0	0.7	1995	3.7
Slovakia	1991	14.9	10.3	4.6	1990	12.0
	1995	11.5	9.8	1.7	1995	11.0
Slovenia	1990	11.2	9.3	1.9	1990	8.4
	1995	9.6	9.6	0.0	1994	6.5
Ukraine	1991	12.1	12.9	-0.8	1990	13.0
	1993	10.7	14.2	-3.5	1993	15.1

As regards the number of births Hungary is not ranking unfavourably among the European countries (see Table 3). In the first half of the 90s in a considerable part of the highly-developed countries of the world one could observe similar or even lower birth

rates. In 1995 the crude birth rate was 11.0 per thousand in Hungary. At that time one could observe rates lower than that in 14 European countries, among them Italy, Portugal or Rumania. In a great part of the highly-developed countries of the European region birth rates are, similarly to that of Hungary, very low and in the remaining ones you cannot observe much higher rates, either.

Though the low and the higher rates do indicate important differences between the countries, the crude birth rate, while influenced by various factors, often hides the real demographic processes. The same relates to the temporal comparison of the rates within a country. The fluctuations of the crude birth rates in Hungary do not follow exactly the trends in fertility, because besides the level of fertility the age-composition of the female population (whether the proportion of persons of childbearing age is high or not) as well as to some extent the marriages too, have influence on the yearly number of births, only to mention the most important factors.

In the recent 20 years the reason of the fluctuation of the number of births has mainly been the fact that at the time of the wave-crests the number of the young and propagative-aged women was large, the members of the large-numbered age-groups born in the early and mid-50s reached the childbearing age.

The recession in the recent decades has only partially been caused by the decrease of the number of the young childbearing-aged women because in the meantime the unfavourable fertility tendencies have been strengthening, principally in case of the women aged under 25. Therefore in the recent years only very few children have been born even by the larger-numbered age groups of women, this is why the expected small increase in the number of births has not taken place either.

As the number of births mainly depends on fertility let us try to follow up the trends of this factor. In this respect the use of the Total Fertility Rate (TFR) seems to be the most reasonable. The index shows the average of the total number of children born by one woman during her whole propagative period, calculated on the basis of the fertility pattern of the given year or period.

This rate has considerably decreased in the highly-developed countries in the recent 2 or 3 decades and this process has even accelerated in this decade.

In Hungary the index has shown the following figures in the past four decades:

Period	TFR	Year	TFR
1950 to 1955	2.72	1991	1.86
1955 to 1960	2.21	1992	1.77
1960 to 1965	1.82	1993	1.69
1965 to 1970	1.97	1994	1.64
1970 to 1975	2.08	1995	1.57
1975 to 1980	2.11		
1980 to 1985	1.81		
1985 to 1990	1.81		

In a part of the highly-developed countries one can observe the fact that the decrease in fertility has begun later but it has been much more considerable. The average figure of TFR has been 2.7 to 1.8 in the 50s and the early 60s, now the same is about 1.6 to 1.5 thus a woman bears, on the average one child less than 30 years ago.

In the recent years fertility has gone on decreasing or it has been stagnant at a very low level. The decrease is characteristic first of all for Southern-Europe. The fertility rate of Spain, Portugal, Greece or Italy, former countries of characteristically high rates of fertility, has fallen under the level of Hungary.

On the basis of international comparisons it can be stated that low rates of fertility are not extraordinary phenomena in Europe at all. In fact, in the highly-developed countries women tend to give birth to fewer children than in Hungary. Depending on the demographic features, to keep the reproduction level of the population, an average of 2.2 to 2.3 children are needed. At present such high TFR values can nowhere be observed, nor could be ten years ago except for Poland, Ireland and in some Asian republics of the former Soviet Union only.

The rate of fertility in Hungary has been for 4 decades lower than the level necessary for the simple reproduction of the population. This has forecast for long the fact of the decrease of the population which could still be held up by the age structure, the sometimes advanced births etc. until the 80s which, however, took place then as a rule. The long-lasting decrease of fertility which started much earlier, can be seen also from the fact that the completed fertility of the female cohort born in 1930 is the lowest in Hungary among 23 European countries (2.03) and in those countries where the TFR value calculated for calendar years is similar to that of Hungary or less, the data relating to the generation of 1930 are higher or much higher. Let us add that the completed fertility of the Hungarian female cohort born in 1920 was also only 2.22.

The great changes in the fertility behaviour have been rather well indicated by the data of representative surveys concerning family planning as well. The surveys – carried out during the recent decades – show that fewer and fewer children have been planned and that a considerable, though smaller, proportion of the married couples would be inclined to create a larger family if the financial situation and the conditions of accepting children improved. Among them usually the women in intellectual occupations and higher educational attainments, living in cities are in a majority. This shows that in more favourable conditions the number of children would probably increase in a part of the families, though one can never tell if the further worsening of the micro-economic situation will not undermine this inclination.

The great majority of the births usually takes place in the family, in marriages. Therefore the number of marriages continues to influence indirectly the number of births though to an ever smaller extent.

In Hungary the number (and rate) of marriages has considerably diminished. In the second half of the 50s there were over 95 000 marriages yearly, in 1980 their number was a little over 80 000 and in 1995 less than 53 000 marriages took place. At the same time the number of divorces increased nearly to 25 000 by the middle of the 90s. The decrease of the number of marriages is almost exclusively due to the fall-back in the propensity to marry, particularly in the case of the first marriages. The number of re-marriages was rather stagnant in that period. It is not our aim to set forth the social, the sociological and the more and more perceivable economic concerns of this issue but reference should be made to the fact that the diminishing marriage propensity and the decrease of fertility rates are the outward forms of the same social phenomenon to be observed all over the world and no doubt that they are in connection with each other.

The 5 decades after the end of World War II can be characterized by the increasing predominance of chronic and degenerative diseases influencing the morbidity conditions. These almost 50 years can be divided into two periods: between 1945 and 1964 and between 1965 and 1995. By the early 60s mortality decreased to a never-experienced low level while in the recent 3 decades the rate of mortality has increased, at present it is about the same as in the 20s.

In the period between 1949 and 1964 the average expectation of life of the two sexes together increased from 61.9 years to 69.4 years. As compared both to the previous period and to the data observed in other countries in the period of the reconstruction after World War II, it was by far a good result, it corresponded to the average of the highly-developed countries and it was higher than that e.g. in Austria.

The considerable lengthening of life expectancies was due to the fact that in all ages, but particularly in the early ages and among the adults aged 35 or under the frequency of deaths had considerably decreased. The infant mortality decreased from 106.0 per thousand of 1947 to 40.0 per thousand. Measured by absolute measure it was the most considerable improvement, but relatively, the mortality rates of some child and young age groups were even better.

The considerable decrease of mortality rates by age groups can be explained by the fact that the mortality caused by infectious diseases decreased by 1964 to one quarter of the level of 1947. In fact, the processes mainly took place by the middle of the 50s which resulted striking improvement in relation to some very important causes of death.

It should be mentioned, however, that the increase of the mortality originating from the degenerative diseases and malignant neoplasms already cast its shadow to that period. The decrease of mortality due to the infectious diseases, however, did not only equalize this increase but it also exceeded it. In this way the unfavourable phenomena remained provisionally hidden.

The increase in mortality is mainly caused by higher age specific mortality, but is also influenced by demographic aging. The increase in age specific mortality rates has accelerated over time.

The worsening of death rates can be observed first of all among the males. While the expectation of life at birth of males has become shorter, that of females has increased even if to a lesser extent, and it has become stagnant, respectively. At present a small improvement is shown for both sexes. In 1995 the expectation of life at birth of males was 65.25 years, that of females 74.50 years.

The worsening of the mortality rates could be observed first of all in the age interval between 30 and 59 years. The values of the life tables on the expectation of life at the age of 30 are well presenting this process. The figure in 1960 was still 41.38 years, in 1980 it was only 38.54 and 37.53 in 1990 thus it worsened almost by 3 years. This figure increased to some extent in 1990 but even by this it only corresponded to the data of the years of 1930/31 (37.02 and 37.09 years, respectively) and it is by two years lower than that in 1949! Among the women a stagnation with smaller fluctuations can be observed in this field. They showed a value of 44.40 years in 1960, 45.28 in 1970, 45.41 in 1990 and 45.74 years in 1995.

Without entering into further detailed analyses it is also well shown by these data how dramatic has been the worsening of the mortality rate of the middle-aged male

population while the improvement of the female mortality rate has stopped short in the recent two and a half decades. Within these data the female mortality rate at the age group of 30 to 59 years has become worse to some extent, mainly among those aged between 40 and 44 and to a less extent between 50 and 54 years. In the male population aged over 30 years the mortality rate has increased in each 5-year age group.

As compared to the mortality rates of infants, the children and the adults aged under 30 years have improved. The former relatively high rate of infant mortality has mainly been reduced to a problem related to premature births for now.

In the recent decades, under the effect of the changes in the morbidity and mortality conditions the developed countries could be divided into two relatively well-separable groups in this respect. Given from the nature of things, the difference between the two groups regarding the level of mortality rate lies in the quantity. This quantitative difference expresses, however, a fundamental qualitative difference.

In the majority of the highly-developed countries the symptoms of the degenerative diseases appear later and the pathological processes lead to death later than 25 years ago. The life expectations of aged people have improved for the first time in the history of mankind. This unexpected result is due to the changes in the way of life on the one hand and to the very expensive measures taken in health and social policy on the other. Owing to these facts the expectation of life at birth reached 75 to 77 years (calculated for both sexes combined) in this group of the countries in the mid-80s.

In several countries, however, and these are particularly the former communist ones, the symptoms of the degenerative diseases appear in an earlier phase of the course of life and the pathologic processes lead to death at a younger age than in the early 60s. Hungary's status is unfavourable even in this group.

Table 4

*The expectation of life at birth in industrial countries
with highly-developed health culture, 1964–1995*

Country	Period	Male	Female	Country	Period	Male	Female
Austria	1993	72.9	79.5	Latvia	1993	61.6	73.8
Belgium	1990	72.4	79.1	Lithuania	1993	63.3	75.0
Bosnia-Herzegovina	1990–1995	69.5	75.1	Macedonia	1990–1995	68.8	75.0
Bulgaria	1993	67.5	75.0	Hungary	1995	65.3	74.5
Czech Republic	1995	69.5	76.6	Moldavia	1991	64.3	71.0
Denmark	1993	72.7	77.9	Germany	1993	72.8	79.3
United Kingdom	1992	73.7	79.2	Norway	1992	74.2	80.5
Estonia	1992	64.1	75.0	Italy	1991	73.7	80.5
Belorussia	1992	64.9	75.5	Russia	1994	58.0	71.0
Finland	1993	72.1	79.6	Portugal	1993	70.6	77.9
France	1992	73.8	82.3	Rumania	1992	66.0	73.3
Greece	1993	75.0	80.4	Spain	1991	73.4	80.7
Netherlands	1992	74.3	80.5	Switzerland	1993	75.0	81.7
Croatia	1990–1995	67.1	75.7	Sweden	1994	78.3	83.7
Ireland	1992	72.6	78.2	Slovakia	1995	68.4	76.3
Yugoslavia (former)	1990	69.5	75.7	Slovenia	1993	69.4	77.6
Poland	1995	67.6	76.4	Ukraine	1989–1990	65.9	75.0

The mortality rate of the population of Hungary, supposing equal age distribution, is by 5 to 6 per cent higher than that of the Czech Republic where the situation is similar as in Hungary. As compared to the mortality rates of Austria and Sweden, the rate of Hungary was by 42.0 and 70.7 per cent higher, respectively in 1985 (based on a standardized age distribution).

The extremely unfavourable level of the mortality rate is probably due to several factors being partly in connection with each other. They can practically be divided into three groups:

1. the unhealthy (noxious) elements of the way of life, affected by the formerly large-scale territorial mobility, worsening economic situation and former traditions of the population which subserve the premature evolution of the degenerative diseases in larger numbers, first of all the heart and circulatory diseases and the neoplasms are to be mentioned. This phenomenon was a consequence of the intensive work having been done by a great number of people mainly under compulsion in the second economy during the last one and a half decade of the Kádár-regime;
2. a rather wide stratum of the society being unconscious of health as a value partly caused by the way of life and meagre education;
3. the insufficient infrastructure of health and its increasing arrears behind the increasing demands and the international standard.

We are not in a position here to examine the effects of these factors in every detail but it is a fact that such factors exert and have exerted an influence on the morbidity and mortality rates of the population also in other countries. These influences, however, as it has briefly been mentioned above, have partly decreased or ceased in the highly-developed countries earlier: the negative attitudes have become positive, the amounts expended on health have been much larger than those in Hungary and there, where their relative effect still exists, their intensity is less strong.

The above-said and the age distribution of the population present the number of the annual deaths and the crude death rate. In 1959/60 the crude death rate was 10.31 per thousand, in 1995 14.22 per thousand. The number of deaths was then 103 thousand, today it is 145 thousand. The mortality rate was the highest in 1993 so far with 150 thousand deaths and a crude death rate of 14.6 per thousand.

On the basis of the above said it may well be stated that the de facto decrease of the number of the population which started in 1981 is principally due to the high rate of mortality. As it was mentioned above, though for several decades the fertility trends have not ensured the long-term simple reproduction either, the worsening of the mortality rate in the recent 3 decades (while it further improved considerably in the more developed countries) has resulted in the fact that the population reproduction has been negative since 1981. If the mortality rate in Hungary were of a level as it is in the more developed European and overseas countries, the natural increase would still be positive. In this way, however, the degree of the natural decrease lasting for one and a half decade has more than twice surpassed the decrease observed during World War I.

*

The above brief analysis offers a conclusion that the situation of the population of Hungary gives cause for anxiety due to long and unfavourable processes first of all

because of the fact that the inherent reserves of the population have exhausted by the mid-80s. Hungary has reached a point where only a considerable change in the outside environment can improve fertility and, particularly, the mortality rates which have a fundamental influence on the number and age composition of the population.

It can also be stated that the present acute crisis could probably have been partly prevented by a consequent and well-chosen population policy as the analyses (not detailed here) show that the introduction of the child-care allowance as well as the 1973 decrees on the demographic policy had an influence on the fertility rate, to be more precise on the cohort indices thereof even if only temporarily and not to a marked degree. It seems that without these measures the number of births would be even more unfavourable in those years.

As since the decrees of 1973, however, the demographic processes have basically remained unfavourable, in 1984, following a longer preparatory work a government decree was adopted on a new strategy of demographic policy. This was the most precisely elaborated governmental document establishing the basis for a complex demographic policy including several factors which, recognizing the role of mortality in the short and medium term development of the unfavourable situation, are also dealing with the possibilities of the improvement of health. Due to the worsening economic situation, however, the further development and in great part the execution of the decrees of 1984 have failed, moreover the population has been affected by several measures such as particularly the introduction of the personal income tax, the various price-building measures which neither have had a good influence on fertility nor on mortality rates.

After 1990, because of transition to democratic structures, the economic and social situation went on worsening and so did the population indices. Many people are of the opinion that the situation was not proper for the establishment of the demographic policy but some measures might have been taken. In March, 1994 the government declared in a decree that the demographic situation should be a fundamental matter of the nation and the intention of the government was to influence the processes aiming at a progress in a favourable direction. Since then there has not been formed any further opinion by the government in that issue. Under the present demographic conditions in Hungary the standpoint of non-intervention cannot be held any longer. Not only the expected further fast decrease of the population but also the unfavourable structural changes make it worth considering the attempt for exerting a favourable influence on the situation.

Concerning the basic change of the demographic trends one cannot be optimistic as, in my opinion, even a demographic policy probably to be introduced again cannot have any effect without a proper, family-friendly economic and social environment. For this there will be no chance for a long time. Naturally, endeavours should be made anyway to decrease at least or to stop the further worsening. In this respect most hopes may be in the field of mortality, but of course, it can be expected only in the long run.