

Five-Year Review of the implementation of the International Conference on Population and Development's Action Program (Cairo 1994) in Switzerland and through Swiss-sponsored actions abroad.

NATIONAL REPORT Submitted by the Government of Switzerland European Regional Conference on Population Budapest (Hungary), 7-9 December 1998

PDF version: <http://www.unece.org/ead/pau/rpm/cespau23.pdf>

Federal Office of Statistics Ministry of the Interior 2010 Neuchâtel (Switzerland)

Swiss Agency for development and Cooperation Ministry of Foreign Affairs 3003 Bern (Switzerland)

Document drawn up by the Laboratory for Economic and Social Demography, University of Geneva, as part of the joint mandate of the Federal Office of Statistics and the Swiss Agency for Development and Cooperation October 5, 1998 CSD/BS

- [Section 1. The Family, Fertility, and Reproductive Health](#)
- [Section 2. Mortality and Health](#)
- [Section 3. Age Structure and Population Aging](#)
- [Section 4. International Migration](#)
- [Conclusions. Towards an Integrated Approach Focused on the Person](#)

FOREWORD: THE CONTEXT OF PROGRESS SINCE THE ICPD

The general impression is that the questions arising from demographic evolution are drawing more attention in Switzerland today than five years ago. It has become the object of an increasing number of statistical analyses, national research programs have been launched in the main areas concerned, legislation has undergone some quite considerable changes and finally the character of the debate on the most sensitive topics has evolved. In 1996 the administration drew up a first report for the government on the challenge posed by demographic trends.

There is no doubt that the ICPD has played a catalytic role but current developments are mainly a reflection of the transformation of Swiss society as well as the national and European context. The five years since the ICPD have witnessed a dramatic change from prosperity to an economic recession which has brought with it a considerable increase in unemployment. A general policy aimed at reducing the national deficit has restricted the government's room to manoeuvre and 'structural adjustment' changes have been instigated. This has been reflected in particular in the climate of renegotiation between partners (division of responsibilities between the Confederation, the cantons and the municipalities; complementarity between the public sector, the private sector and civil society; the role played by mutual aid networks). Fears have been voiced with regard to the potential reduction of social benefits, which would affect women in particular, and to the transfer of certain tasks from the State to the family. Since it is not a member of the European Union, Switzerland needs to develop compensatory strategies in order to avoid a certain degree of marginalization (harmonization of legislative measures, bilateral agreements, increased participation in major international debate).

Through the federal structure and multi-level democracy national policy necessarily takes into account cultural pluralism and local diversity. By the same token, new measures are only introduced gradually. This is the case at present as regards social security, immigration policy and legislation concerning abortion. An in-depth process, change is in fact rarely dramatic and Swiss society sometimes appears to the outside observer to be relatively traditionalist. This is especially reflected in matters concerning the family and gender relations. Since this area is basically considered to be private it is also a sector where public commitment is limited.

The present report comprises four sections which deal with major issues in Switzerland today. Specific chapters have not been devoted to the other fields to be covered at the Regional Conference on Population. Data collection and research are dealt with in each section. It has not been considered pertinent to refer to population growth per se. In effect, as it emphasized in its report to the ICPD, the Swiss government is not planning to take any measures aimed at directly influencing demographic developments; the challenges arising from demographic trends are dealt with in a transversal dimension. Switzerland's international commitments are also included in each section to provide an overview of the country's internal as well as external policy.

Section 1. THE FAMILY, FERTILITY, AND REPRODUCTIVE HEALTH

The demographic changes of the past few years and the simultaneous rise in individual expectations are reflected in increasingly complex family histories and a greater variation of family life-styles. In view of these changes, efforts have been made to gain more detailed knowledge of current trends, to develop or consolidate national lines of action and to adapt legislation. Since policy concerning the family and reproductive health is essentially a matter for the cantons, and since action relies largely on private initiatives, developments in this respect vary from one region of Switzerland to another.

A. Adapting current legislation

The main changes in legislation have been in the field of gender equality and marriage. Discussions are also being held in most of the areas affected by current developments. In particular the debate relating to two highly sensitive topics - legislation concerning maternity insurance and decriminalizing abortion - has apparently reached a turning point.

- **New legislation:**
 - The law on equality between men and women came into force in 1996;

- Implementation of the new marriage law (which came into force in 1988) along with changes in certain aspects of jurisprudence towards increased gender equality;
 - Total revision of the law on divorce, approved by parliament in June 1998, to include the principle of divorce by mutual agreement;
 - The inclusion of an allowance for educational tasks and assistance in the calculation of pensions for old-age and invalidity and the adoption of a clause relating to the protection of children in the federal constitution. The application of the federal law to aid crime victims (1993) provides new legislative tools to combat violence against women.
- **Changes currently under consideration:**
 - The Swiss parliament is working on a maternity insurance bill proposed by the Federal Council and based on norms in force in most European countries. Changes in tax laws concerning the family and family allowances are also being discussed.
 - As far as concerns voluntary abortion, the gulf between restrictive legislation and increasing tolerance in its application has widened even more. Parliament is at present examining a motion for legalizing abortion within the first 14 weeks of pregnancy and the Federal Council's recent statement in this respect. The latter recognizes the fact that present legislation in this area is out-of-date and advocates a so-called protective course combining authorization with medical advice or opinion.
 - Legislation concerning medically assisted fertilisation is also being discussed; in addition, the question of reimbursing contraceptives has been raised.

B. Increased awareness of the specificity of different members of the family and of their needs

- **The cost of motherhood.**
Today we know more about the specific aspects of women's professional activities as well as about the various consequences of motherhood on women's careers and on family budgets. This new information has led to recognition of the fact that the birth of a child implies considerable economic change within the family. On the one hand, for the woman it is difficult to combine a professional career with motherhood and, on the other, the burden of child-bearing is only partly offset by institutional support. The gender equality law and its implementation prioritize employment conditions for women and the division of tasks between men and women. Swiss development cooperation has also been characterized by a major commitment to promoting a balanced development between men and women. Following the adoption of a corresponding policy in 1993, efforts have been made in Swiss-supported programs to take into account inequality resulting from the distribution of tasks and resources available to men and women to assume their family and community responsibilities. A good many NGOs involved in development programs are very active in the field of promoting women.
- **Vulnerable groups.**
It has been observed that poverty is becoming an increasingly feminine problem as a result of the difficulties women encounter as single mothers or older widows. This is the consequence of a combination of women being penalized in the labor market, a social insurance system linked to professional activity and a concept of the family as a private unit where it is essentially the mother who bears the burden of bringing up children. Recent studies have underlined the fact that young families are facing increasing economic problems. ° Children's problems. The publication in 1992 of a report entitled *Mistreatment of Children in Switzerland* led to a parliamentary debate. Concrete informative and preventive measures aimed at combatting violence against and sexual exploitation of children have been taken. Support has been given to various preventive projects and private initiatives. Efforts have been made to eliminate all discrimination against girls in education. Switzerland is also active in this respect at the international level. In particular it has been involved in ILO activities relating to child labor.

The duty of public institutions to take the necessary measures to ensure the wellness of the family and to protect it is confirmed in the draft of the new Federal Constitution. Since 1996 the coordination and information activities of the Office for Family Matters have been extended by the work of the Federal Commission for Coordinating Family Questions.

C. Progress in the field of reproductive and sexual health

In this field a large number of new initiatives have been developed and the quality of existing services has been recognized; there is still, however, a degree of inequality in the range of services available in different regions. Young people have free access to contraceptives which, however, are not reimbursed by the health insurance system. Awareness of remaining needs is improving due to national health and family surveys and various small-scale studies.

The efforts being made to deal with current challenges are concentrated in three main areas:

- **The fight against the principal diseases linked with reproduction and sexuality:**
Major efforts have been made to prevent cancer of the breast and the uterus. As far as concerns HIV, Switzerland has the fourth highest rate of infection per inhabitant in Europe, which is in part due to the efficiency of the system of registration. This is part of a national policy to fight AIDS adopted at the end of the 1980s. The comprehensive national information and prevention campaigns launched over the past few years have been highly effective among high-risk groups, where the number of new cases has been falling. Following problems of infection through blood transfusions, legislation was passed and a blood/AIDS working group has been set up.
- **Promotion of reproductive and sexual health:**
With the creation in 1993 of the Swiss Association for Family Planning and Sex Education (ASPFES), affiliated to the International Planned Parenthood Federation (IPPF), Switzerland is now benefiting from a national body supplying other organizations which have been active in certain sectors for some time. The ASPFES is planning to carry out cooperation projects in the southern hemisphere.
- **Violence against women:**
This type of violence is still considered essentially a private matter since it occurs more often than not within the family. Initiatives to prevent domestic violence come mainly from women's welfare groups. Thanks to better statistics in this respect

and major efforts to create awareness of the problem, marital violence as well as sexual harassment in the work-place are starting to gain official recognition.

As far as reproductive health is concerned, Switzerland's international commitment has been confirmed in particular through the support it offers to multilateral organizations. Despite budgetary constraints, increased or new contributions have been granted to UNFPA, IPPF, WHO, UNAIDS, and the World Bank. Switzerland also helps to fund various international projects in the field of reproductive and adolescent health. Including projects which are part of bilateral health programs, it is estimated that Sfr. 18.3 million, or 2.4% of the total federal budget for cooperation and development (1.5% of state aid for development), was used in this way in 1997. By focusing on the improvement of the social situation of women through health and education projects, as well as in all its activities, bilateral cooperation has contributed towards a positive trend in reproductive health and sexual behaviour. The authorities concerned recognize the fact that this is an important sector where Switzerland should be more active.

Section 2. MORTALITY AND HEALTH

Life expectancy at birth is one of the highest in the world, thanks to the quality of health care and the high standard of living. Certain changes are necessary, however, in view of the present health transition. Problems related to life-style have largely replaced infectious diseases, which means that a more integrated approach with emphasis on prevention is needed today. Current debate is focused on the question of price-control and various measures have been taken or are being discussed. Ethical concerns are being increasingly voiced as new medical techniques are developed and there is a threat of 'over-medicalization', especially among geriatric patients. In Switzerland health care is essentially the responsibility of the cantons but the idea of a truly national project leading to a global health policy is being seriously considered.

Health is one of the priorities as far as concerns international cooperation which has a long tradition in this sector. New orientation towards promoting a holistic and integrated approach led to the adoption of a health policy for international cooperation in 1995. Health is also an important aspect of cooperation programs in Central and Eastern Europe.

A. Adapting current legislation

- **New legislation:**
Implementation of two new laws:
 - Federal sickness insurance law, came into force in 1996, instrument for controlling the cost of health and defining the benefits offered (whose range is among the broadest in Europe). Since basic insurance is now compulsory, conditions related to acceptance by health insurance companies have been lifted; this law is based on the double principle of solidarity between the sick and the healthy, ages, and sexes and subsidiarity (individual funding but state subsidies for people with low incomes). The implementation of this law is still having to overcome a certain number of problems.
 - Law on federal statistics (1993): this provides a legal framework for setting up a national health information system (quinquennial surveys since 1992/93; a Swiss public health observatory is planned).
- **Changes currently under consideration:**
Revision of the narcotics law, discussions concerning the harmonization of different laws relating to addictive substances (narcotics, medication, alcohol, and tobacco) and preventive measures. New laws on therapeutic substances and organ transplants are being drawn up.

B. Current trends

There are national programs notably in the fields of epidemiological monitoring, cancer, drug-abuse, alcoholism, nicotine addiction, environmental health, food hygiene, and the control of medicines. New efforts include in particular coordination, a better knowledge of the health status of the population, the development of a new concept for medical research, and the revision of medical training at university.

As far as concerns international cooperation, the holistic approach is applied in particular through the support of national health systems (sector-wide approach). Synergies have also been set up with the internal policy in domains such as promoting breast-feeding, notably through the implementation of UNICEF 'baby-friendly hospitals' in Switzerland, as well as participation in the European Network of Health-Promoting Schools launched by WHO, the Council of Europe, and the European Commission.

Main progress made in the Swiss health system over the past few years:

- **Increased recognition of the variety of needs, identification of high-risk groups:**
Thanks to recent surveys, the national-wide health status is better known as well as disparities and new high-risk groups. It is becoming increasingly clear that the same logic does not apply to women's health as to men's health and that the needs of each evolve differently with advancing age. New health problems are arising among women, such as a growing rate of lung cancer and underweight in the young. Long-term consequences of traumatism are becoming more frequent. The mortality rate among adolescents has dropped only marginally and has even risen slightly among young adults. In addition there are disparities between different socio-professional groups.
- **The fight against cancer:**
A general strategy was adopted in 1993 which is based notably on WHO recommendations.
- **Prevention of consumption of addictive substances:**
Alcoholism and nicotine addiction have apparently played an important role in the general deterioration of health shown in the results of the 1997 national survey. Prevention campaigns have been organized in close collaboration with various NGOs. In 1995 the Federal Council approved a global nicotine addiction prevention program. Special mention should be made of the dramatic evolution in strategy against drug-abuse. Current policy is based on four aspects: prevention, therapy, risk reduction and repression (of consumption and dealing). The measures taken include in particular a syringe exchange program and, since 1996, an experiment involving medically prescribed narcotics.
- **Health and the environment:**
As part of the follow-up from the Rio summit a health and environment service was set up in 1996 and a plan of action was tabled in 1997. This plan covers three fields: nature, mobility, and habitat. As far as concerns international cooperation,

Switzerland has been involved for some time in environmental hygiene, in particular safe drinking-water and sanitation, and has recently adopted a broader approach to include hygiene and health education.

Section 3. AGE STRUCTURE AND POPULATION AGING

With its low birth rate and particularly high life expectancy the Swiss population is typical of the western trend of aging. People live longer, and stay healthy to a riper age. The challenge here is therefore to create a society which fulfils the needs of the population at the various stages of their post-retirement lives and at the same time guarantees a role for young people. Current changes in the population structure represent a special challenge for public institutions due to the background of mutation in the economic system and the fact that the transformation of labor markets affects in particular the beginning and end of the professional career. In any case, it is only when the baby-boom generation reaches retirement that the consequences of population aging will really be felt. The integration of demographic issues is therefore a very delicate matter because, being a medium-term problem, they at times conflict with solutions for more urgent economic questions.

Detailed knowledge of current trends is necessary for changes in population structure to be taken into account in drawing up policies. In this connection the past few years stand out with a consequent Federal Office of Statistics publication program and Swiss participation in international projects. Despite the lack of a policy concerning international cooperation in statistics, Switzerland has in particular supported population censuses in Macedonia, Palestine, and Kirgistan.

A. Changing current legislation

It is in the field of social insurance that laws have been adapted to take into account the evolution in population structure. As far as concerns integration of young people the only major change has been the lowering of the age of majority to 18. The social security system is the focus of a far-reaching debate; in particular, various possible ways of increasing funding to meet future needs are being studied. The rise in total benefits paid out is linked to the growing proportion of pensioners but this trend will depend to a great extent on socio-economic changes and future policies concerning health and the pension system.

Apart from the problem of demographic trends, the system has to adapt to societal changes, notably the emergence of new working patterns and the precariousness which results in some cases, the application of principles of equal opportunities for men and women and the reorganization of public finances.

- **New legislation:**
Two types of measures are specifically aimed at dealing with future demographic trends:
 1. The 10th revision of the old-age and invalidity pensions law, which came into force in 1997, foresees the gradual raising of the retirement age for women to 64. This change has been contested by three popular initiatives; the first has just been rejected by the electorate and the two others are yet to be voted on.
 2. From 1999 onwards it is planned to apply a clause approved by the electorate in 1993 to increase VAT by 1% in order to meet the increasing social burden linked to demographic trends.
- **Changes currently under consideration:**
As part of the 11th revision of the old-age and invalidity pensions law, the government has proposed a flexible retirement age between 62 and 65 for men and women. At the same time the laws on occupation benefit plans and invalidity benefits are also being revised.

B. Improved awareness of the needs of different age-groups as a basis for new strategy

People's needs change as they grow older and, as a consequence, the increasing proportion of older people brings with it new demands on the health services, housing, consumer goods, public facilities, transportation, and cultural life. Various national studies, notably as part of a national research program, have concentrated on this question and new research and educational institutions have been set up. Discussions have been initiated to achieve a new pact between the generations, to promote solidarity among pensioners and to review the role played by them in the working world. A great number of initiatives have been taken to set up programs for preparing people for retirement, accident prevention and providing socio-cultural activities.

Over the past few years people have become more aware of the fact that an aging population requires a different type of health service. In effect, it is more a question of qualitative change rather than a quantitative increase in the demand for health care. In this connection, various projects have been set up to extend home-help and home-care systems and, on a more general scale, to make the immediate environment more 'aged-friendly', as well as ensuring high quality care for the dying. Nevertheless, such projects are mostly local in scope and there is still no true national policy in this respect.

The issue of policy concerning young people has been revived through the Youth Manifesto, which was published in 1995 by the main institutions that work with young people. A few steps have since been taken towards drawing up a new policy. The Federal Commission for Youth has been given broader powers. Campaigns for the prevention of alcohol-, tobacco-, and drug-abuse have been directed particularly at young people. In the field of vocational training, new facilities are being developed. As far as regards international cooperation a working group made up of the SDC and Swiss NGOs has been set up to identify the challenges of the situation of children and young people round the world. In this domain Switzerland is mainly active through its substantial contributions to UNICEF, UNFPA and, since 1993, to IPPF. A number of bilateral projects deal specifically with young people, notably in the areas of education, health (in particular AIDS campaigns), and handicrafts.

Section 4. INTERNATIONAL MIGRATION

The proportion of foreigners living in Switzerland is higher than the European average, a situation which is partly explained by Swiss laws on naturalization. Over the past few years the rate of increase in the proportion of foreigners has dropped considerably. The composition of the foreign population has also changed: despite the fact that the majority of immigrants are still from EU and EFTA countries, a growing number come from more distant parts. Owing to the fact that Switzerland is losing its attraction for European workers, it now has to face a growing gulf between the demand for qualified workers and the supply of non-qualified labor, a sector

which is already saturated and subject to growing unemployment. Although the proportion of refugees and asylum seekers is the highest in Europe, it is still low in comparison with the size of the resident foreign population. After reaching a peak in the early 90s the number of applications for asylum has dropped somewhat. During the first six months of this year, however, figures rose sharply, due to the civil war in Kosovo. The fact that Switzerland is not party to EU agreements has led to the fear that it will become a focal point for illegal activities and clandestine migration.

A. Adapting current legislation

A global policy is being drawn up, although the idea of a new general framework law on immigration has been abandoned in favor of simultaneous revision of existing laws on aliens and asylum.

New legislation and changes currently under consideration:

- **The various measures taken over the last few years**
partial revision of laws and adaptation through enactment - are part of a new concept aimed at totally reshaping the Federal law on residence and establishment of aliens. An article concerning integration has recently been approved by parliament.
- **The total revision of the law on asylum,**
approved by parliament in June 1998, confirms in particular the provisional measures to control illegal immigration. One of the main new features of the revised law is the introduction of general regulations governing temporary protection for groups of people under particular threat. A referendum has already been launched by more than twenty NGOs which object to the restrictive nature of this law and the introduction of uncertain, temporary status for refugees from violence which could work against granting them more permanent permits on humanitarian grounds.
- Following the electorate's rejection of a referendum against the prescriptions laid down in the penal code relating to racist propaganda and racial abuse they came into force in 1995.

B. A new concept with regard to immigration

Issues concerning immigration, asylum and the presence of foreigners are sensitive topics. Like public debate, policy in this respect is divided between concerns for national security, adjusting the labor market and Switzerland's humanitarian tradition. In view of the present economic upheaval there is a strong risk of increased xenophobia and a more restrictive immigration policy.

Support for movements to limit the number of foreigners living in Switzerland is still small, however, and the popular initiatives and referendums that have been launched have either not drawn enough signatures or have been rejected by the electorate.

Immigration policy is one of the areas that has seen considerable changes over the past five years, mainly in two respects:

- **Promotion of mobility among European workers:**
The so-called three circles recruitment policy has been abandoned in favor of priority for labor from the EU and EFTA; a system of points may be adopted for workers from other countries. Special priority is being given to drawing up various agreements to achieve full participation in the free movement of labor within Europe. Moreover, two important aspects are considered: the replacement of the status of seasonal worker by a short-term residence permit, and means to stop illegal immigration. Switzerland has been able to share the experience it has gained in compensatory strategies for non-EU members with some of the new countries in Central and Eastern Europe.
- **Constructive control of the consequences of immigration:**
The efforts made to reduce the overall increase in numbers are coupled with a concern to improve integration of foreigners living in Switzerland. An experts' report has advocated consolidating measures to improve training, information and communication for foreigners, to adapt the school system, and to make naturalization easier. This trend amounts to recognition of the economic importance of foreign labor as well as multiculturalism in developing a more open society. It is also a question of avoiding social exclusion and its consequences. Many foreigners still live in poor conditions, which is particularly expressed in specific needs in reproductive health.

Future migration policy will emphasize improved coordination between internal and external policy measures. An interdepartmental working group extended with scientific experts and agents from various NGOs has drawn up a 'concept for steering migration' which emphasizes that only genuinely integrated strategies will help to control migration potential. It should also be noted that efforts have been made to better document the phenomenon, in particular through Federal Office of Statistics publications, a national research program and the founding of a research institute called Migration Forum.

C. Asylum

The complexity of questions concerning asylum - the often unclear distinction between refugees and economic migrants, the specificity of victims of violence and the need to speed up processing of applications for asylum - as well as the present rapid increase in the number of applications and the costs involved necessitate basic rethinking of the whole matter. In general terms, current policy is concentrated on preventing abuse and on the essentially temporary character of asylum. This approach is expressed notably in the measures taken to encourage voluntary repatriation (with financial aid and efforts to ensure safety through support provided on the spot by the office of humanitarian aid). From now on the emphasis is being placed on psychological and practical preparation for repatriation in collaboration with NGOs. Efforts are being made, however, to remain flexible in order to deal with exceptional cases. The repatriation of Bosnians and Kosovars, whose applications for asylum have been refused, for example, has been postponed for some months.

As far as asylum is concerned, Switzerland has played an important role in the international debate, notably in the development of concepts such as safe countries and through active participation in Intergovernmental Consulting. Bilateral agreements and cross-border collaboration have been drawn up to compensate for non-participation in the Dublin Convention and the Schengen Agreements.

Switzerland also contributes to the international effort to help countries of first asylum, in particular through its substantial contribution to UNHCR.

CONCLUSIONS

Towards an integrated approach focused on the person

The essential lesson of the ICPD, which is that the person is the central subject of population policy, has been the core of developments in Switzerland over the past five years. More integrated approaches have been conceived which take into account both the variety of individual needs and the complex relationships between the different aspects of the problems.

These developments have been evident in three different areas in particular:

- Matters which until now were essentially the responsibility of civil society have become public issues. This is specially true of gender equality, integration of aliens, and the fight against racism, as well as ethical considerations relating to the advances in medical technology.
- A more global approach stands out in policy concerning health and international migration.
- There are new convergences between concepts of international cooperation and internal policy.

The close links between demographic trends, their causes, and their consequences, the socio-economic context, and life-styles are also taken into account more than before. One step has therefore already been taken in relation to the concern expressed in the national report to the ICPD as far as regards the importance of forms of production and consumption in the ecological impact of demographic trends. Nevertheless, five years after ICPD, squandering of resources and pollution are still major concerns which the measures foreseen in the national follow-up to the Rio summit are concentrated around.

Strategic planning for the five-year period to come

Strategies for adaptation to demographic trends, to the problems which they give rise to and to the opportunities they constitute need to progress towards better use of individual potential in its specificity and greater efficiency among institutions through their adjustment to new conditions which arise.

In particular this means ensuring:

- a higher degree of compatibility between family responsibilities and professional activity for both women and men;
- a better balance between supply and demand with regard to training and employment by diversifying the economic system so that the contribution made by people of different ages is better valorized, and by setting up more flexible basic and continuous training courses; special efforts must be made with regard to training for immigrants, in particular second-generation foreigners, in order to ensure social integration;
- solutions to meet the need of young people to participate more fully in all areas of life;
- on-going adaptation of the health system to avoid the risk of 'over-medicalization' in reproductive health and geriatric care and to find a balance between state-of-the-art medicine and public health; the promotion of sensible life-styles (education in healthy living, safety at work, environmental hygiene), targeting of high-risk groups (young adults, immigrants);
- improved efficiency of the social security system to control rising costs as well as to prevent marginalization of disadvantaged individuals;
- prevention and reduction of violence as well as the protection of the most vulnerable members of society.

The principles of the options which are desirable with regard to internal policy are also desirable at the level of international cooperation, with due respect for cultural specificity and anchoring it firmly in local practice. In more concrete terms it is a question of promoting:

- actions which will allow individuals to develop a true life-project thanks to access to resources and services and empower them to enjoy their rights; projects in the area of reproductive health are of great significance in this respect;
- a concerted effort in the fields of rights, a policy of peace, humanitarian and development aid, a contribution towards a new world order through participation in the debate on free trade and good governance, and by promoting the protection of minorities, in particular to help control migration potential.

These strategies can only be implemented if Switzerland sets up a broader network of competence in the field of demography and if efforts to study demographic phenomena are consolidated through the three existing channels: statistical analysis, Swiss National Science Foundation research programs and participation in international research projects.