CONCLUSION
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The theme of the present exploration is centered around the effect of socio-economic development on human fertility behaviour. The relationship between them is conceptualized and tested taking Aligarh district of Uttar Pradesh as a case study. During the course of investigation it is thought to be vital to examine the nature of human fertility under different socio-economic conditions in the Aligarh district. In connection with the fertility differentials and determinants it is theorized that fertility is not merely a biological outcome of sexual relations, it is a social phenomena as well. The theory that fertility is just an expression of sex desire does not apply to human population as it applies to animals. People are social animals who actively concerned in the creation of the society in which they live. Fertility or human reproduction is so important to the society that attempts to influence in one way or other. It is determined to a large extent by social factors, human perceptions, economic and political considerations. Human communities generally differ with each other in terms of norms of sex, family size and reproduction. There are certain social and economic circumstances which bear heavily on these norms about fertility. Fertility therefore should be treated primarily as a social artifact, taking in view complex phenomena, as the social and economic factors highly influence the nature of human fertility.

After the analysis of social (religion and caste, sex composition, family life, educational status, amenities & facilities) and economic (income and occupational structure) factors, and the fertility status (child woman ratio, age specific fertility rate, total fertility rate and general
marital fertility rate), it is concluded that in almost all the blocks of Aligarh district the proportion of Hindu population is high as compared to Muslim population. In the blockwise variation of population according to religion and caste it is analyzed that Hindus of high castes (24.6%) and scheduled castes (26.3) are more dominant in almost all the blocks of study area. When sex composition is concerned, majority of blocks register large proportion of males as compared to females. According to family size, most of the blocks of study area have families with members of 6 to 10, while other categories are analyzed as 1-5 family members (28.4%), 16 and above (18.7% households) and 11 to 15 members (12.1% households). Regarding educational status, literacy among males is high (62.8%) as compared to females (46.8%). About the level of education, fraction of primary education is higher (49.1%) than high school (30.6%) and intermediate and above (20.3%). When blockwise amenities and facilities are concerned, it is analyzed that almost all the rural government hospitals are not able to provide proper facilities to the people, why most of the people are dependent upon private/allopathic medical practitioners (41.6%) rather than others. Nearly half of the population uses government hand pumps for drinking water. About 25 to 30% households of study area don’t have any type of sanitization facility, they go to open fields while rest of them use different types of toilet facilities but most of them are not in proper conditions. In the study of housing conditions, it is found that almost all the blocks have high proportions of pucca houses than katcha houses. So far as sources of light are concerned, around 55% households of study area are electrified. Along with electricity, people also use gas cylinder or petromax at the time of power cutoff. In district as a whole about 85 to 95% people are aware of family planning programmes but few of them
implement such type of procedures because of their social and cultural beliefs. It is further observed that about 30% people belong to the income group of Rs.4000-8000, 25% to Rs.2000-12000, 20% to Rs.2000-4000, 18% to Rs.12000 and above, and only 5% belong to the income group of Rs. below 2000. The proportion of employment is high in almost all the blocks because most of the people have their own land for cultivation. Only a proportion of females work as marginal workers (22.2%) as compared to main workers (32.2%). It may be noted that most of the females are engaged in agriculture labour, cultivation and other work but their proportion is high only in other work.

The child woman ratio in the study area ranges from 742.62 in Atrauli block to 819.58 in Gangiri block. High levels of child woman ratio recorded in north-western and eastern parts of the district and medium in southern half of the district whereas the blocks which lie low fail to form any notable region. Fertility rate by different age groups is also found to be dissimilar in the district. Fertility rate of 25-35 age group is high as compared to 15-25 and 35-45 age groups. High fertility rate of 15-25 age group is mainly concentrated in southeastern, southwestern and extreme western parts of the district. High fertility rate of 25-35 age group is mainly found in central part of the district and the low on either side. Fertility rate of 35-45 age group also highlights the same picture as observed in early discussion of 15-25 age group. Total fertility rate ranges from 4.70 in Chandaus to 6.56 in Jawan blocks. The blocks of high total fertility rate are mainly concentrated in central and south-eastern parts of the district. High levels of general marital fertility rate found in four blocks of the study area which are concentrated in extreme western, central and eastern parts of the district whereas three blocks which lie under low fail to form any notable
region. The overall assessment of socio-economic development and child woman ratio, which is based on composite z-scores, reveals that a low level of socio-economic development with high child woman ratio is found in the north-western margin of the district, whereas a high level of socio-economic development with low child woman ratio is observed in Atrauli block. Medium level of both categories is found in the northern part of the district. A high level of socio-economic development with high fertility rate of 15-25 age group is found only in Atrauli block and both categories are low in three blocks (Chandaus, Khair and Bijauli) of the district. A high level of socio-economic development with high fertility rate of 25-35 age group is found in the northern margin and low in the north-western margin of the district. Medium level of socio-economic development with fertility rate of same age group is observed in the central and southern parts of the study area. The level of socio-economic development and fertility rate of 35-45 age group is high in the western part while low in Chandaus and Khair blocks. The high level of socio-economic development with high total fertility rate is observed in the northern part, while low levels of both are observed in Chandaus and Khair blocks of the district. The pattern of association between socio-economic development and general marital fertility rate is also found to be the same as observed in earlier discussion.

There are high proportions of Hindu population as compared to Muslims while the other religious groups are almost negligible in rural areas. Scheduled castes and high castes of Hindus are more dominant in almost all the villages but there is a highly uneven distribution of all the categories of Hindu population. As we identify that Indian society is male dominant so the same depiction is also observed in the study area because of the high proportion of males as compared to females. A
family with 6 to 10 members is a very common phenomenon in the villages of Aligarh district. About one-third of villages record a relatively high level of family size because almost all the families depend upon agricultural activities for their source of revenue. Why they require a large number of members in their family. The education up to primary level is high in almost all the villages because schools up to primary level are found in almost all the villages. Proportion of educated males is also high as compared to females in the villages of study area. Because of the poor and limited services from rural government hospitals, almost all the population lie under medium level (-0.500 to 0.500) and depend upon private allopathic medical practitioners. Regarding drinking water facilities most of the population lies under medium and low levels because government handpump users are more than the private handpump users, while the other sources of water (wells, ponds, rivers etc.) are almost insignificant. Sanitation facilities are also very poor in district as a whole, most of the population is very close to the district average and the majority of them lie under low level because most of the villagers go to open fields rather than other constructed toilets. More than half of the households lie in and above average level because almost all the houses are made up of cement and bricks (pucca houses) and about half of the households of study area are electrified but the power supply is irregular. Awareness of family planning programmes is very common in almost all the villages of study area and almost all the people are confined to medium and high level of composite value but few of them have implemented such programmes. There is a large concentration of population in medium and high levels of income because they are getting the benefit of the proximity of city and the people are engaged in agricultural activities.
along with earnings. Medium and low levels of population are engaged in agricultural activities only while the high and very high levels are confined to those people who are engaged in agricultural activities along with other work. A small proportion of females is engaged in earning activities and set out in medium and low grades. Very high values are observed in those villages where females are educated and working in different sectors.

In the study of fertility status by sampled villages in Aligarh district, it is found that child woman ratio ranges from 662.87 in Chaupur Hauj to 957.19 in Jamuka. On the basis of z-scores it is concluded that the majority of villages are concentrated between medium and high range because of the low level of education among females and strong son preference while it is low in those villages where females are engaged in earning activities. Fertility rate of 15-25 age groups reveals that high level of fertility rate is found in those villages where early marriages take place. Fertility rate in 25-35 age group is found to be medium and high in almost all the villages and ranges from 105.3 in Gaudoli to 437.5 Khera Sattu. Fertility rate of 35-45 age group also reveals the same picture as almost examined in 15-25 age group. Total fertility rate and general marital fertility rate respectively range from 2.4 in Gaudoli to 7.2 in Jamuka blocks and 59.25 in Gaudoli to 180.32 in Jamuka blocks. The relationship between socio-economic development and child woman ratio shows that the majority of villages lie under medium level of socio-economic development with medium score of child woman ratio, whereas medium and high levels of socio-economic development with medium scores are confined to those villages where level of income is
high and people are busy in permanent work. When socio-economic development is related with fertility rate of 15-25 age group, it is concluded that the majority of villages are concentrated in medium and low levels of both the categories. Fertility rate of 25-35 age group presents an increment in trends (increasing socio-economic status with increasing fertility) because of the strong son preference. Socio-economic development and fertility rate of 35-45 age group reveal that concentration is high among the medium. When relationship of total fertility rate and general marital fertility rate is observed, it is found that both of them present the same results, means that villages are confined to low level of socio-economic development with medium score of total fertility rate and general marital fertility rate.

After analyzing block level and village level study of socio-economic development and fertility status, it is found that both levels of studies reveal the same results, means that more or less all the sampled villages of study area are found to be the true representative of the total population of the blocks of Aligarh district. In the separate study of social and economic development and the fertility rate by different measures, it is observed that the high level of social development is associated with low level of child woman ratio which is mainly the result of high levels of educational attainment, better understanding about family planning programmes among people and better connectivity towards their developed surrounding. Whereas low level of social development is registered with medium child woman ratio in those villages which are far away from main towns or city. Fertility rate of young age group (15-25) is noted to be higher where low level of social development is observed. This may be the result of early marriages and low level of education especially among females.
The medium level of fertility rate of 25-35 age group coincides with a relatively high level of social development. This direction of association is found in those villages where amenities and facilities in terms of education, health, sanitation and drinking water facilities, are more or less developed and people benefit from them. Relationship social development and fertility rate of 35-45 age group reveals that low level of social development with medium score of fertility rate is found in those villages where proportion of Muslim population is high as compared to Hindus. Total fertility rates are inversely proportional to social development particularly education. Social development versus general marital fertility rate also presents the same results. It may be noted that high level of education among females, religion and castes, religious mythologies, early marriages, different attitudes of parents for girls and boys, health status and awareness about family planning are the most prominent factors of human fertility differentials.

As far as economic factors are concerned, it is found that high level of economic development is associated with medium and low levels of child woman ratio. It is the consequence of nearness of the towns or city because they acquire the advantage of their locations in terms of part time jobs and other work. Fertility rate of 15-25 age group is found to be high in those villages where people are engaged in temporary or marginal work, while it is low in the villages where people are engaged in permanent work or living outside the home for their earnings. Effect of economic development on fertility rate of 25-35 age group is found to be moderate. Low level of economic conditions with high fertility rate is recorded in small number of villages where proportion of Muslim population is high because they want more children to complete their economic desires and tiny jobs. Low level of
economic development with high fertility rate in 35-45 age group is found among those people who are engaged in seasonal or temporary work rather than those who are engaged in permanent work. It may be pointed that low level of economic development is inversely proportional to total fertility rate and general marital fertility rate in the villages where people depend on agricultural activities only. In this regard, they want more helping hands in agricultural fields in terms of male child, and therefore, fertility rate tends to increase. It may also be inferred that early marriage, low level of education among females, and orthodox ideas about family planning programmes are the main reasons behind the high rate of general marital fertility. After the foregoing analysis of socio-economic development and fertility status, it may be concluded that the effect of social development is high on human fertility as compared to economic development because in overall concern it is observed that social factors are responsible for changing human perceptions towards fertility.

The analysis of t-test reveals that unawareness about family planning programmes is the major factor, which has substantial impact on child woman ratio in Aligarh district and significant at 95 percent level of confidence. Fertility rate of 15-25 age group is mainly affected by religion and caste, sex composition, family size, level of education, family planning, electricity, health, drinking and sanitation facilities, income and permanent employment, but the scale of their effects is dissimilar. High level of income is the chief variant which affects the fertility rate of 25-35 age group and significant at 95 percent level of confidence, whereas fertility rate of 35-45 age group and the selected socio-economic variables reveal that almost all the variables are found to be similar in case of the degree of relationship with fertility rate of
The overall evaluation of the variables of socio-economic development and their relationships with total fertility rate, leads to the conclusion that the variables of socio-economic development are the chief factors of fertility differentials of 15-25 age group but the degree of effects is different. The t-test leads to a broad conclusion that religion and castes, sex composition, educational level, family planning, various amenities and facilities availed by people, their income and occupations are found to be the chief factors of general marital fertility differentials but their course and stage are different.

Finally the results of the hypothesis test are noted briefly. Religion and castes are the cause of fertility differentials in the villages of Aligarh district. Higher the educational status lesser is the fertility rate. Fertility declines with increasing level of income. People who are working as agricultural labours have a high fertility rate because they want more helping hands in their work, but in female occupations it is analyzed that females who are engaged in permanent work have a low fertility rate as compared to temporary workers. Increase in socio-economic conditions initiates a decline in human fertility rate. Increasing rate of awareness of family planning programmes among people helps to decline fertility rate. The awareness of family planning programmes is not responsible for lowering fertility rate; their implementation is also necessary. In study area most of the people are aware of such programmes but the overwhelming majority of them are not curious to adopt such programmes.

Based upon the present research work the author suggests that various programmes should be initiated by government and non-governmental organizations to increase the awareness of people towards small family size. Female volunteers should also be appointed to
provide basic information about various family planning programmes and the importance of small family size. Along with this, some general information should be extended at school level. In this outlook, it is recognized that these are the good steps to increase the awareness of people towards family planning programmes and small family size because it is realized that prosperity or better understanding is the contraceptive. The problems identified in the above discussion and their remedial measures may provide potential guidelines for planners and policy makers. In the light of these, family planners, policy makers and the government are suggested to get the existing problems reviewed and conduct further research at household level in different areas of varying physical and socio-economic conditions.