Chapter VIII

IMPACT OF INDIAN POPULATION POLICY
IMPACT OF INDIAN POPULATION POLICY IN NORTH EAST BIHAR

The impact of Indian population policy brought about some commendable improvement in the general health condition of Bihar. The fertility and mortality rates declined respectively, from 37.9 to 7.9, and, from 23.5 to 4.75, in 1981 (Table No. 5.2). The infant mortality rate in the state also fell to 19.97, in 1981 from a high of 87.01, in 1961. Not only was there a noticeable improvement in this, the marriage age also rose. In fact since 1951, there has been a constant rise in the age of marriage among the educated class and also, among urban dwellers. The Indian Censuses also show the impact of the population policy, on the age of marriage in the region of north east Bihar, depictry it to be constantly on the rise since 1951. The Censuses also reveal that the mean age at marriage, in urban areas is higher than that in rural areas, the only reason for which is that urban areas have better education facilities than rural areas. The population policy has not only discouraged child marriage it has also lowered the number of children, in the reproductive age group 15-44. See Table No. 3.4. Also, according to the 1981 Census, it has
reduced the span of the reproductive age group from 15-44 to 20-45, among the educated, and even among urban dwellers (Table No. 4.3).

Again, the policy has also affected the age structure of Bihar. It brought about some improvement in the working population, and also the dependency ratio. This, the proportion of infants, in the age group 0-4 declined in 1981. The number of children in the age group 0-14 also declined. But the proportion of aged persons in the age group 60 plus, rose through the proportion of the working population, in the age group 15-59, went down. The dependency-ratio of children, in the age group 0-14 too declined but the proportion of these who were 60 plus, increased (Table No. 3.2 and 3.4)

**Impact of Population Policy in the District of Purnia:**

The population policy also brought about note-worthy improvements in the north east of Bihar. It caused both the fertility and mortality rates to fall, and so did the infant mortality rate, the latter coming down to 17.53, in 1981. Thus, in the district of Purnia significant improvement became apparent, in the health condition of the people, and the age of marriage constantly rose, showing a remarkable town for the better, which even bettered the mean age of marriage, as is clear from the 1981 Census. And since 1951, urban areas have a reduced proportion of infant children in
the reproductive age group 15-44 (Table No. 3.5). The policy has also shortened the span of the reproductive age-group among the educated and urban inhabitants. (Table No. 4.6).

In addition to this, the age-structure of Purnia district was also affected by the policy, which brought about a remarkable improvement in the working population and dependency ratio (Table No. 3.6). The proportion of infant in the age-group 0-4 declined, though the proportion of aged persons, in the age-group 60 plus increased in 1981. The proportion of children in the age group 0-14 also increased. But then, the proportion of the working population in the age group 15-59, too rose, and the dependency ratio of children, in the age group 0-14 declined. (Table No. 3.6).

**Impact of Indian Population Policy in the District of Saharsa:**

The district of Saharsa also felt the impact of the national population policy. The birth and death rates improved for the better since 1961 (Table No. 5.4). And the infant mortality also declined to 8.29, in 1981.

Legislation significantly improved the age at marriage making it rise. Atleast, among the educated it did witness a raise, as is evident from the 1981 Census. This Census also shows that the mean age at marriage in Saharsa district, also rose, and was rising ever since 1951, among the educated and urban dwellers (Table Nos. 4.7 and 4.8).
Further, the family planning programme since 1961, also reduced the proportion of infants, in the reproductive age group (Table No. 3.7). Again it also reduced the span of the reproductive age-group 15-44, among educated people and Urban dwellers. (Table No. 4.8).

And besides all this, the age-structure of the district of Saharsa was also influenced. It brought about a significant improvement in the working population, and even in its dependency ratio. The proportion of infant babies in the age group 0-4 declined (Table No. 3.7). Though those in the 60 plus category rose. Also, the proportion of the children in the age group 0-14 declined, and the proportion of working population rose since 1961. The dependency ratio of children, in the age group 0-14, declined but those aged people, in the 60 plus category increased (Table No. 3.8).