CHAPTER V

SUMMARY AND CONCLUSIONS
India, the most populous country in the world, is experiencing the early stages of fertility transition. The unprecedented acceleration in the rate of growth of India's population has been arrested due to declining fertility, as revealed by the 1981 census. To bring about further decline in fertility, contraceptive practice, the principal means of birth control, will have to be more propagated. There is substantial demographic variation across the nation. Birth control practices were not spread properly due to illiteracy, low level of living, and traditional practices and beliefs. Important social differences between urban and rural people are still reflected in the persisting demographic differences.

Information on fertility is available from a number of surveys, but these studies do not give an all India picture. There are very few surveys on fertility and mortality in Andhra Pradesh, particularly in coastal areas. The present study is an attempt in this direction.

The study sought to investigate the fertility and mortality trends in different castes, occupational, income, and literacy groups in the sample village. The important objectives of the study are:
1. To examine the socio-economic conditions of the village.
2. To examine the trends of fertility and mortality in different socio-economic groups.
3. To examine the attitude towards and practice of family planning methods and the preferences therein, and
4. To know the reasons for the approval or disapproval of family planning methods.

METHODOLOGY

The selection of the village, R.V.Palem, is by purposive selection. Sampling technique is adopted to fulfil the objectives. It is primarily an agricultural village, like most of the villages in India. There are different caste groups as well as economic groups.

The primary data pertaining to fertility, mortality and family planning was collected from the respondents. Census reports, village records were also consulted, whereever necessary. Interview schedule was used for the purpose of collecting the required information.
The village can be considered as a representative village in the coastal region. Different caste groups practise residential segregation and Harijans are not included in the village as they live separately in another colony with a different name. Most of the socio-economic conditions prevailing in the village are similar to those in other villages in that mandal.

During the past two decades vast changes have occurred in many aspects of life. It is recognised that the rate of population growth influences every sector of economic and social development. Population explosion is a major problem in India. India's population increased from 236 million in 1891 to 251 in 1921 with a slight increase of 15 million in 30 years. But in the next 60 years 404 millions were added, increasing the numbers to 685 millions in 1981.

With the increase in medical and health facilities, mortality rate began declining considerably. The tremendous advances in the control of communicable diseases and the maintenance of near constant fertility has contributed to the rapid decline of mortality, confronting India with an exploding population.
FACTORS ACCOUNTING FOR HIGH POPULATION GROWTH IN INDIA

The existing population of India, by itself, is very large and a nominal rate of increase results in impressive additions from decade to decade. Another important factor is the declining mortality, having several implications with respect to fertility. Universality of marriage and early marriages are a common feature in India. High percentage of young and fecund people are also one of the reasons for high growth rate in India. Literacy level, socio-cultural and economic factors also contribute to the population growth affecting fertility and mortality trends of the population.

Though various factors affect fertility, the present study is confined to know the fertility and mortality trends in different caste, occupational, income and educational groups. The selected village is purely an agricultural village with 250 households and a population of 1,139 people. It is neither a remote village nor nearer the city. There is a very good irrigation facility in the village. The land is fertile and water from river Krishna is available for both the crops. For the first crop they grow paddy and for the second crop they grow all types of pulses.
Hinduism is the main religion of the village. Brahmin, Vysya and Kamma are the forward castes of the village and Rajaka and Gowda are the backward castes of the village. Jajmani relations are still seen in the village in their deteriorating form. Though agriculture is the main occupation, other traditional occupations like priesthood, toddy tapping, dhobi work are also there. New occupations like grain merchants, rickshaw pulling and other kinds of employments in the service sector are also there in the village. Though agriculture, is the main economy of the village, small scale industries like poultry, dairy, rice mills, work contracts are taken up by the villagers to improve their economy. 36 per cent of the people are having the income of Rs.>0-10,000 rupees. 51 per cent of the population is in the income group ranging between 10,000 to 30,000 rupees. Only 13 per cent of the population is in the income group having an income of Rs.30,000 and above.

Among the respondents 31 per cent are illiterates and 11 per cent are with collegiate education and the 58 per cent are either with elementary or high school education. Out of 31 per cent illiterates 18 per cent are from backward castes. Conditions of health
and sanitation are good in the village. There are very good transportation facilities in the village. Communication facilities are also well developed in the village. There are five telephone connections in the village. The post office is situated 1 kilometer away from the village. One community television set and radio are available for the recreation of the villagers. The villagers celebrate all festivals and rituals. 15 per cent of the houses are pucca buildings. 75 per cent are semi-pucca with well built walls, tiled roofs. The village welfare and administration are looked after by village panchayats. The village has a co-operative society and a co-operative milk society. The population of the village in 1951 was 496, and in 1981 it was 799 and in 1989 it came to 1,008. With a continuous increase the population was doubled in 38 years.

The age structure of the sample population is typical of India, with a very broad base and a tapering top with high percentage of young and fecund people. The fecund women in different castes, occupations, income groups and literacy groups are more or less the same as the number of respondents in these groups. The crude birth rate of the sample population
is 27.98 per thousand. To compare the fertility trends among different socio-economic groups child-woman ratio was taken as the index of fertility.

Among the different caste groups, Kammass had the lowest fertility rate of 1.92 and Brahmins had the highest with 2.9 child per woman. In the remaining castes the fertility rates were almost the same with 2.4 children per woman.

Among the different occupational groups, respondents with agriculture as the main occupation had the lowest fertility rate of 1.86 children per woman in which most of the respondents are from Kamma community. The highest fertility rate of 3.2 children per woman is in the occupational group represented by the occupation of priesthood from the Brahmin community. Among the other occupational groups the fertility rates are nearly the same or there is a slight difference.

The different income groups show different levels of fertility. The fertility rate of the highest income groups is the lowest with 1.4 and 1.6 children per woman in the two income groups of 30,000 to 40,000 and above 40,000 respectively. Most of the respondents
in these two income groups are also Kammas with high social and economic status.

Respondents with collegiate education have 1.9 children per woman, whereas illiterates have 2.3 children per woman. Among the respondents with elementary education and high school education, there is not much difference with the number of children being 2.04 and 2.1 per woman.

The crude death rate of the sample population is 13.05 which is lower than the death rate of the state and the country. 7 cases of abortions took place in the sample population. Out of them 43 per cent are induced abortions. There is a decreasing trend in the infant mortality rates. Out of 126 women, 10 women or 7.9 per cent of women experienced child deaths in the family. There are 12 deaths per 271 live births or 4.4 per cent mortality among the children.

50 per cent of these deaths were due to infectious diseases. 8.3 per cent were due to accident and the reason was not known in the case of 41.7 per cent of deaths. There was not much difference in the death rates or infant mortality rates of different socio-economic groups.
100 per cent of the women are aware of family planning and they expressed their positive attitude towards family planning. 10 per cent of the women respondents used contraceptives for spacing and 90 per cent did not use any contraceptives. Post-Partum abstinence is the main reason for their spacing in between children. 35.9 per cent of the women have 1 to 2 years of spacing, 41 per cent with 2 to 3 years of spacing and only 5.9 per cent have more than 4 years of spacing.

90 per cent of the women preferred permanent method of family planning. 100 per cent of the women expressed that the desired number of children is 2. They preferred permanent method only after getting the desired number of children. There is a strong belief among the women, that if they do not conceive immediately after marriage there are very few or no chances of getting children later. Further they had the same opinion in adopting temporary methods of family planning. They expressed that if they use temporary methods they may not get the desired number of children afterwards. These strong beliefs are an obstacle for the implementation of family planning in the sample population.