Population explosion has been considered as a serious problem in the world especially in the developing countries. Most of the countries of the world experienced rapid population growth after World War II, not as result of an increase in the birth rate but as a result of decline in the death rate. While the latter is continuing to come down, birth rates in the majority of the developing countries remain very high. Thus, fertility and mortality are considered to be the primary force behind the population growth. Besides this, migration is another component which influence population growth of a country. Hence, the study of the levels, trends and differentials of these components are fundamental towards rectification of population problems.
North East India is the homeland of numerous populations of various ethnic origins having different cultural heritages and social structures. Assam, a state in North East India, shows strikingly demographic diversity. Besides the disparate demographic profiles, the levels of development also vary substantially within the state because of different factors like biological, socio-cultural, environmental and economic which influence the population growth. Therefore, there should be situation-specific study at the micro level.

A review of the earlier research works pertaining to the problem revealed that not much works seems to have been done so far in the field in Assam, especially in urban areas. Most of the works undertaken by different scholars were conducted primarily in rural areas. The present study, therefore, has been undertaken in Guwahati city, the largest urban centre of Assam. However, it stands to reason that it is not possible to cover the entire city within a limited period of time by a single researcher. Therefore, two linguistic groups, i.e., the Assamese and the Bengali, have been chosen for the present study. Again, there are lots of variations in terms of the way of living, economy and other basic amenities available to people. In order to have a control at least on basic amenities, the railway colony of Maligaon area, which is also the headquarters of NF Railway, has been selected as the universe of our study. In the railway colony, employees of different categories avail themselves of more or less the same facilities provided by the railway, living under the same environmental conditions. However, they do react to different conditions of the socio-economic reality in terms of their native genius.
A total of 752 households, 394 from the Assamese and 358 from the Bengalis, comprise the sample of the present study. From these households, altogether 827 (427 from the Assamese and 400 from the Bengalis) ever-married women were interviewed following the questionnaire method.

Three comprehensive structured schedules were designed to collect data on:

(I) General demographic composition;
(II) Fertility and mortality; and
(III) Cultural values related to fertility and family planning.

To understand the population in details, a profile of the demographic and socio-economic characteristics of the household population has been studied. This includes age-sex composition, household size, as well as educational and occupational characterisation of two populations.

Fertility of the women in both the populations has been studied in relation to various bio-social correlates, such as, age at menarche, age at marriage, age at first delivery, age-specific fertility, fertility based on education, occupation, age at last delivery, age at menopause and fertility in completed families.
An attempt has also been made to explore the various family planning methods used by the married couples in both the population groups. It has also been intended to examine the various cultural dimensions affecting fertility as well as mortality.

Finally, an attempt has been made, to study the infant and child mortality. This includes sex wise infant and child mortality in various age groups of women, mortality at different ages, mortality according to birth order, mortality according to educational and occupational status of couples, causes of mortality, and relationship between fertility and mortality. Apart from these, pregnancy wastage including still birth and abortion have also been investigated.

CONCLUSION

The findings of the present work may be concluded as follows:

DEMOGRAPHIC COMPOSITION

1. Among the Assamese, the percentage of males (50.08) is found to be slightly higher than that of the females (49.92). On the other hand, among the Bengalis, the percentage of the females (50.60) is higher than that of the males (49.40).
2. The child population (below 15 years) among the Assamese (39.16 per cent) is found to be much higher than that of the Bengalis (28.31 per cent), whereas the old population (60 years and above) among the Bengalis (4.75 per cent) is higher than that of the Assamese (2.33 per cent).

3. The sex ratio (females per 1000 males) of the Bengalis (1024) is found to be higher than that of the Assamese (996).

4. The child dependency ratio among the Assamese (66.94) is much higher than that of the Bengalis (42.29), whereas, the old dependency ratio among the Bengalis (7.09) is higher than that of the Assamese (3.98).

5. In both the Assamese and the Bengali population groups, the number of medium size (4-6 members) households is much higher.

6. The literacy percentage (population aged 7 years and above) of the Bengalis (98.04) is found to be slightly higher than that of the Assamese (98.03).

7. The male literacy among the Assamese (99.41 per cent) is found to be higher than that of the Bengalis (98.87 per cent). However, the female literacy among the Bengalis (97.30 per cent) is found to be higher than that of the Assamese (94.72 per cent).
8. In both the population groups, the percentage of male literacy is found to be higher than the female literacy.

9. The percentage of working population (excluding age below 19 years) among the Assamese (51.63 per cent) is found to be higher than that among the Bengalis (48.89 per cent).

10. The working population of the Assamese males (78.76 per cent) and the females (23.34 per cent) is found to be higher than that of the Bengali males (75.98 per cent) and the females (21.94 per cent).

FERTILITY

1. The mean age at menarche of the Assamese (12.37 ± 0.07 years) is slightly higher than that of the Bengalis (12.26 ± 0.07 years); however, the difference is not statistically significant.

When, the women are divided into three broad age-groups, i.e., 15-34, 35-54, and 55 years above, it is observed that there is not any generational change.

2. Though the mean age at marriage of the Bengali women (20.75 ± 0.23 years) is slightly higher than that of the Assamese women (20.27 ± 0.19 years), the difference is not statistically significant.
It is observed that there is a distinct change from one generation to the other in both the population groups under study.

3. A higher proportion of the Assamese women (26 per cent) is found to marry before reaching the age of 18 years than the Bengali women (24.50 per cent).

4. The average number of conceptions is found to be a little higher among the Assamese (3.32) than the Bengalis (3.01).

5. The mean age at first delivery of the Bengali women (22.66 ± 0.22 years) is slightly higher than that of the Assamese women (22.10 ± 0.20 years). However, the difference is not statistically significant.

6. The average number of live births among the Assamese (2.95) is slightly higher than among the Bengalis (2.61).

7. In both the population groups, the women of the younger age groups have lower fertility than the older age groups.

8. The mean age at last delivery among the Bengali women (29.54 ± 0.45 years) is found to be slightly higher than that of the Assamese women (29.37 ± 0.53 years). However, the difference is not statistically significant.
9. Though the mean age at menopause among the Assamese women \((45.13 \pm 0.40 \text{ years})\) is found to be slightly higher than that of the Bengali women \((44.13 \pm 0.40 \text{ years})\), the difference is not statistically significant.

10. The average number of live births in completed families among the Assamese \((4.33)\) is found to be higher than that of the Bengalis \((3.70)\).

11. In both the population groups, there is an inverse relationship between education of the couples and fertility. The illiterate couples show the highest average number of children compared to the literate ones.

12. The average number of live births decreases with the increase of the educational level of the couples; though wives' education has stronger influence in fertility control than that of the husbands' education.

13. The average number of live birth is found to be higher among the non-worker couples than among the worker couples in both the population groups.

14. In both the population groups, the service holder employed wives show the lower average fertility than the non-employed wives.
15. Fertility is also found to be inversely related to the employment status of the couples. The higher is the employment status the lower is the average number of live births.

FAMILY PLANNING AND CULTURAL VALUES RELATED TO FERTILITY

1. The knowledge of Family planning methods is nearly universal in the study area, since 97.55 per cent of women seem to have knowledge of at least one method of family planning. It is 97.41 per cent among the Assamese women and 97.69 per cent among the Bengali women.

2. In both the population groups, the main source of knowledge of family planning methods is found to be the mass media, mainly, television, radio and newspaper.

3. A higher proportion of the Bengali women (68.24 per cent) than the Assamese women (66.18 per cent) is found to adopt various family planning methods.

4. Female sterilization is the most popular method in both the population groups under study. It is 36.54 per cent among the Bengalis and 33.94 per cent among the Assamese women.

5. The largest proportion of women use family planning methods for limiting the family size.
6. In both the population groups, a higher proportion of women do not have any preference for the sex of the children.

7. A higher proportion of the Bengali women (36.50 per cent) desire two children as against three children by the Assamese women (49.41 per cent).

8. The percentage of women having more than desired number of children is found to be much higher among the Assamese compared to that of the Bengalis.

9. Women having the desired and less than desired number of children is found to be much higher among the Bengalis than that of the Assamese.

10. Majority of the women having desired number of children are found in the age group of 30-44 years; majority of the women having less than their desired number of children are found in the age group of 15-29 year; and higher number of women having more than the desired number of children are found in the age group of 45+ years.

MORTALITY

1. The infant mortality rate is much higher than the child mortality rate in both the population groups.
2. The infant mortality rate among the Assamese (20.77) is found to be lower than that of the Bengalis (23.53).

3. In both the population groups, post-neonatal mortality is much higher than the neonatal mortality.

4. Among the Assamese, the female neonatal mortality rate (4.79) is higher than the male neonatal mortality rate (3.19). On the other hand, among the Bengalis, neonatal mortality rate is exactly the same for both the males (1.96) and the females (1.96).

5. In post-neonatal stage, the male mortality rate (11.76) is higher than the female mortality rate (7.84) among the Bengalis whereas the rate is the same for the males (6.39) and the females (6.39) among the Assamese.

6. The infant and child mortality increases with the increase of birth order, with the exception in the second and the fifth birth orders in the present study.

7. In both the population groups, mortality of children below 5 years of age is much higher than that of the children of 5-9 years and 10-14 years of age.
8. The child mortality rate among the Assamese (19.17) is found to be much higher than that of the Bengalis (8.82).

9. The infant and child mortality among the Assamese (3.99 per cent) is found to be higher than that of Bengalis (3.23 per cent).

10. Fever and cough and diarrhoea are the major causes of infant and child mortality in both the population groups.

11. In both the population groups, the infant and child mortality is found to increase with the increase in the number of live births.

12. The percentage of infant and child mortality to the illiterate couples are found to be comparatively much higher than that of the educated couples. However, wife's education is more relevant to lower the mortality level than the husband's education.

13. In both the population groups, employed women show higher mortality than the non-employed women.

14. The working couples show lower mortality than the non-working couples.

15. The total pregnancy wastage among the Bengalis (15.14 per cent) is found to be higher than that among the Assamese (11.70 per cent).
16. In both the population groups, abortion is comparatively much higher than still birth.

17. Among the Assamese, the spontaneous abortion (7.74 per cent) is much higher than the induced abortion (2.2 per cent). On the other hand, among the Bengalis, induced abortion (6.24 per cent) is higher than spontaneous abortion (5.99 per cent).