CHAPTER VIII

SUMMARY AND CONCLUSION

Populations are mainly the product of three processes — fertility, mortality and migration. But fertility is the most important element in the population variables viewed from theoretical as well as from practical points of view.

'Fertility' in its general connotation refers to the reproductive performance of a woman throughout her reproductive age span, whereas the term 'natural fertility' means the reproductive performance when the births are not subjected to deliberate control and when it reaches its biological maximum. On the other hand, 'fecundity' is understood to mean the reproductive potential of a woman. However, in any sociological study of fertility, the main concern is with the socially regulated fertility which varies from society to society, yet all these concepts have heuristic value.

Since fecundity in almost all populations is said to be stable, the actual level of fertility is determined by the efficacy with which preventive checks (use of contraceptives and natural methods) are used by the couples in the reproductive age span, the rationale of which is embedded in the socio-cultural milieu.

India's population which has touched 684 million mark in 1981 (Census, 1981) is growing at the rate of 2.5 per cent per annum as against the growth rate of around one per cent in almost all developed countries of the world (Premi et al., 1983).
Needless to say that such a high growth rate is associated with a multiplicity of socio-economic and other problems.

The rapid rise in India's population has been due to a constantly widening gap between the ever decreasing death rate and almost constant birth rate. Decline in death rate is possible since its reduction is subject to the stimuli extrinsic to the people but reduction in birth rate presupposes a change in the life philosophy of the people, which may induce them to accept the norm of small family size.

A high birth rate at the national level implies a high level of fertility among the Indian couples which is proved by the data available in various fertility studies. On the other hand, evidence is also available which indicates smaller family size desires among many Indian couples.

The gap between the 'family size desires' and the 'family size achievements' is indicative of a weak motivation among the Indian couples to adopt family planning. This calls for a sociological insight into the problem.

Any study of fertility and adoption of family planning can have three different, though overlapping, perspectives - Demographic, psychological and sociological. However, the present study deals with the third factor as it studies fertility at the level of the family and views family planning as a phenomenon of family interaction.
Studying fertility at the family level and viewing family planning as a phenomenon of family interaction presupposes the adoption of a socio-psychological approach which elucidates the importance of socio-psychological and motivational variables in fertility decision making. When socio-economic variables fail to explain the variations in fertility and contraceptive acceptance it is these variables on which more reliance has to be placed.

Out of the various possible existing paradigms to a socio-psychological approach to fertility decision making, the present study accepts the 'power and influence' model on account of the non-applicability of 'rational' and 'conflict' models in the Indian settings.

'Power' in conjugal relations may be defined as the potential ability of one partner to influence the behaviour of the other. Every family has a certain power structure which means the relative influence of the two partners in allocating the resources of time, energy, money and facilities. There can be four different types of marital power structure depending on whether power is wielded equally or unequally by the two partners. These may be 'autonomous', 'syncretic', 'husband dominant' and 'wife dominant'.

Since decision-making is likely to control, initiate, change or modify the behaviour of others, an assessment of the locus of power can be made by analysing the pattern of decision-making in the family. Decision-making in its general dimension
is the central activity of every family organization. It encompasses both the conscious and the unconscious behaviour of family members as they act and react to the body of potentials available in their environment.

Fertility decisions are rational and conscious insofar as they involve awareness of the possibility of planning and controlling their fertility and the selection of the best possible means to achieve their logically perceived ends.

Plenty of evidence is available which suggests a close relationship between the marital power structure and fertility decision making both in terms of family size and contraceptive acceptance. It may be argued that equal participation of the spouses in the family decision making gives the two partners a sense of responsibility for putting the decisions into action. But wife's participation in fertility decision making is a resultant of the balance of power between the two partners.

Since fertility decisions are rational and conscious they require a free flow of communication between the spouses. Inter-spouse communication regarding family planning in its operational sense means the extent to which the couples discuss the goals of fertility and the means to achieve them. It not only facilitates fertility decision making but also serves as a pre-requisite for joint decision making because individual intentions of the two partners turn into a joint decision only through communication.
But the extent of inter-spouse communication regarding family planning is likely to be determined by the type of marital power structure, since dominance of either partner impedes frequent and free flow of communication between them while equality in power-wielding promotes it.

Thus the relationship between the level of fertility and the type of marital power structure may be through the influence of the latter on the couples' extent of inter-spouse communication regarding family planning, their desired family size and family planning acceptance. Nevertheless, the importance of socio-economic and demographic variables in explaining fertility differentials cannot be denied altogether, since these variables have been widely found to influence all these three dimensions of fertility behaviour.

Many fertility studies around the dimension of socio-psychological perspective have been conducted in other countries (Liv, Rube and Pato, 1970; Michel, 1967; Mitchel, 1972; Rosen and Simon, 1971; Scanzoni, 1976; Weller, 1968). These studies subscribe to the view that the variables of positive interaction are more closely related to the success of the family planning programme than the socio-economic variables, and also the wife's equality or dominance in family decision making is associated both with the smaller family size desires and a greater family planning acceptance.

In the Indian context, such studies are rare. Most of the so-called decision making studies are post-service
surveys which only seek to answer the question as to who decided about the adoption of a particular method (Dubey and Choldin, 1967; Mathen, 1954; Rao, 1959; Vasanthani, 1957).

There is hardly any study which has ventured to examine the dynamics of relationship between the adoption of family planning and the couples' level of fertility. Such an analysis becomes imperative in the Indian context where a low level of fertility cannot be taken for granted with the adoption of family planning methods (Gandotra, 1981, Sud, 1979).

Moreover, the fertility decision making studies conducted in India do not explain the inter-play of socio-economic, demographic and socio-psychological variables in influencing the adoption of family planning and the level of fertility. An understanding of the relative strength of the influence of these different types of variables on the couples' fertility behaviour is very important both from the theoretical as well as the strategic point of view.

Therefore the present study is a stride to fill in this gap.

The major objective of the present study is to find out the relationship between the type of marital power structure in the family and the couples' fertility in all its dimensions - the extent of communication the couples have regarding family planning, their desired family size and adoption of family planning.
The study also attempts to examine whether the type of marital power structure is more closely related to the couples' level of inter-spouse communication regarding family planning, their family size desires and the eventual adoption of family planning than the variables of their socio-economic syndrome and demographic attributes. Another important objective of the present study is to examine the correspondence between the couples' level of fertility, their family size desires and the adoption of family planning by them.

Research Methodology

The analytical plan of the study envisages 'marital power structure' in the family as the independent variable, fertility and family planning in all its dimensions as the dependent variables and various socio-economic and demographic variables as the intervening variables.

In order to identify the respondents in terms of the type of marital power structure they had, preparation of an index, based on each spouse's relative involvement in the family decision making was viewed as essential, as no single response could determine the degree of power enjoyed by each spouse.

In all, there were as many as 17 decision-making situations, 12 relating to all aspects of family life (excluding family planning) and 5 relating to family planning only. Because the situation syndrome included two different aspects of family life, though equally important, preparation of two
different indexes, one exclusively for each aspect, was preferred at the initial stage. Since both these indexes reflected a very high degree of association ($\rho = .73$), a composite index was prepared for identification of the respondents in terms of the type of marital power structure they had.

Finally, only two categories of marital power structure, namely, 'equalitarian' and 'husband dominant', were identified. Before these categories were finally accepted for further analysis, correspondence between the composite index of 'decision making' and the index of 'conflict resolution' was examined by working out the degree of association between these two. However, the degree of association was found to be high ($\rho = .52$). Therefore, the adoption of 'decision making' as an index of power wielding in marriage was well justified. Hence the two marital power structure categories - 'equalitarian' and 'husband dominant' were finally accepted as independent variable categories for further analysis.

Simple random sampling technique was adopted for the selection of sample for the study. Since the study was proposed to be conducted on currently married women within the age limits of 15-45, it necessitated a prior knowledge of the universe which comprised the eligible couples (with wives of 15-45 years of age) living in a small town, Manimajra, of the Union Territory of Chandigarh. The list of eligible couples
with their identification variables was obtained from the Primary Health Centre and was reframed alphabetically. With a random start every 11th female partner of the couples was selected for the interview.

DETERMINANTS OF MARITAL POWER STRUCTURE

Variations among the couples as to the type of marital power structure they had, could be explained in terms of various socio-economic, demographic and socio-cultural variables. However, the theory of 'comparative resources' as propounded by Blood and Wolf (1960) was not accepted in explaining these variations, as the 'comparative resources' had no relevance in the present context owing to the fact that as many as 84 per cent of the respondents were non-working and hence had no income of their own.

The variables identified as determinants of the pattern of marital power structure (other than normative authority) were as under:

(i) Respondents' level of education.
(ii) SES of the respondents' husbands.
(iii) Religion followed by the couples.
(iv) The respondents' age at marriage.
(v) The age difference between the spouses.

The extent of equalitarian marital power structure was found to have a positive association both with the respondents'
level of education ($X^2 = 22.4, df = 2, p > .001$) and SES of the respondents' husbands ($X^2 = 77.9, df = 2, p > .001$). However, the latter turned out to be a better determinant of the marital power structure than the former, since the degree of association in its case was fairly higher ($\gamma = .27$) than that found in the case of the former ($\gamma_h = .08$). The extent of equalitarian marital power structure was found to be higher among the Hindus and the Sikhs as compared to that among the Muslims. The association, besides being significant ($X^2 = 28.9, df = 2, p > .001$) also had a moderate degree ($\gamma_h = .11$). It remained so even when the SES of the husbands was controlled within each category of religion ($\gamma_h = .09$).

The extent of equalitarian marital power structure had a direct association with the respondents' age at marriage. Though the association was statistically significant ($X^2 = 18.6, df = 3, p > .001$) yet the degree of association came out to be low ($\gamma_h = .07$).

On the contrary, the equalitarian marital power structure was found to have an inverse association with 'the age difference' between the spouses. The association was not only found to be statistically significant ($X^2 = 33.6, df = 2, p > .001$) but also of a moderate degree ($\gamma_h = .11$). Therefore, the 'age difference between the two spouses' was considered to be a better predictor of the pattern of marital power structure than the respondents' marriage duration ($\gamma_h = .07$).
Within this variable syndrome, the socio-economic variables in general and the SES of the respondents' husband in particular was identified as the better determinant of the type of marital power structure in the family. This finding was in consonance with the findings of Szinovcy (1978) who, while trying the normative resource theory on some Australian couples, had established that the social status difference and not the spouses' relative social status influenced the spouses' relative participation in marital decision making.

**INTER-SPOUSE COMMUNICATION REGARDING FAMILY PLANNING AND MARITAL POWER STRUCTURE IN THE FAMILY**

Inter-spouse communication regarding family planning implies the extent to which the couples discuss the goals of their family size and the means to achieve them. Hence it is a pre-requisite of fertility decision making both in terms of family size desires and family planning acceptance. When the respondents' desired family size was related to the inter-spouse communication regarding family planning, they were found to have an association which was not only significant ($X^2 = 59.3, df = 2, p < .001$) but also had a moderate degree ($\rho = .21$). The adoption of family planning, too, was found to be significantly associated with the extent of inter-spouse communication ($X^2 = 124.4, df = 1, p < .001$). In this case the degree of association was sufficiently high ($\rho = .37$).
But the extent of inter-spouse communication regarding family planning itself was found to have a positive association with the equalitarian marital power structure in the family. Not only the association between these two variables was significant ($X^2 = 194.4$, df = 1, $p > .001$) but also reflected a very high degree as 67 per cent of the error was reduced in predicting the extent of inter-spouse communication with the knowledge of the pattern of marital power structure in the family ($\gamma_b = .67$). Since the extent of inter-spouse communication regarding family planning is also likely to be influenced by some socio-economic and demographic variables, it was considered necessary to study the impact of these variables on the extent of inter-spouse communication the couples had and to examine the association of the latter with the type of marital power structure in the family sans the effect of these intervening variables.

The respondents' level of education was found to have a direct association with the extent of inter-spouse communication regarding family planning. When controlled, it was found that the type of marital power structure in the family had influenced the extent of inter-spouse communication when the respondents were either illiterates ($p > .001$, $\gamma_b = .69$) or had a low level of education ($p > .001$, $\gamma_b = .37$) but it had influenced only marginally when they had a moderate level of education (Non-significant, $\gamma_b = .02$). Gainful employment of women also made a strong positive impact on the extent of inter-spouse communication regarding family planning since the latter was found to be
much greater among the working women as compared to that among the non-working.

SES of the respondents' husbands was another variable which was found to have a direct association with the extent of inter-spouse communication.

So far as the over-all impact of these two variables on the association between the extent of inter-spouse communication and the type of marital power structure is concerned, the SES of the husbands has more strongly influenced this association than the employment status of women. It was well evidenced by the relative strength of the after-control association which turned out to be much greater in the case of the employment status of women ($\gamma_b = .64$) as compared to that of the SES of the husbands ($\gamma_b = .48$).

No definite trend of relationship was observed between the respondents' present age and the extent of inter-spouse communication.

However, the extent of inter-spouse communication was found to have a direct association with the number of living children in the family. But the degree of after-control association being slightly higher ($\gamma_b = .69$) than the degree of pre-control association ($\gamma_b = .67$), the number of total living children in the family had negatively influenced the association between the extent of inter-spouse communication regarding
family planning and the pattern of marital power structure.

Therefore, the hypothesis that the extent of inter-spouse communication regarding family-planning would be greater with the equalitarian marital power structure in the family and lesser with the husband dominant power structure was substantiated even when the effect of various intervening variables was controlled.

Marital Power Structure and Desired Family Size

Fertility decision-making involves the couples' decisions about the desired family size and also decisions about 'contraceptive acceptance'. Hence an analysis of the couples' 'desired family size' in relation to the 'type of marital power structure' in the family was considered imperative. When related, these two variables were found to be associated since the desired family size turned out to be smaller with the equalitarian marital power structure and larger with the husband dominant. The association between these two variables was significant ($X^2 = 30.4$, df = 2, $p > .001$) but was of a low degree ($\eta^2 = .06$).

However, the desired family size of the respondents was also related to some socio-economic and demographic variables.

It was found to be inversely associated with the respondents' level of education and the SES of the respondents' husbands.
The desired family size was also found to have a direct association both with the respondents' present age, and the number of total living children in the family. However, within this direct association between the desired family size and the number of total living children they had, the former turned out to be higher than the latter, when women had only 1 to 2 living children, but smaller when they had 5 to 6 children. Both these almost corresponded when women had 3 to 4 living children.

However, when all these variables were controlled individually, the women with equalitarian marital power structure still exhibited smaller family size desires than their counterparts with the husband dominant power structure.

Insofar as family planning acceptance implies innovation acceptance, it involves various stages (Bogue, 1963; Lionberger, 1960; Roger and Bettinghouse, 1966). Therefore the family planning acceptance was analysed in terms of four stages - awareness and information, approval, decision making regarding adoption of family planning, and adoption of family planning.
Although the degree of awareness regarding birth control was very high among our sample population, yet it was much higher in the case of equalitarian marital power structure than in the case of husband dominant power structure. The association between the awareness regarding birth control and the type of marital power structure was not only statistically significant ($X^2 = 36.1$, $df = 2$, $p > .001$) but also had a moderate degree ($\gamma_b = .13$).

As far as the actual information about the different methods of birth control was concerned, it was found to be much greater among the women with the equalitarian marital power structure than that found among those with a husband dominant power structure. The association between these two variables, though statistically significant ($X^2 = 11.7$, $df = 1$, $p > .001$), was very low ($\gamma_b = .04$).

The approval stage implies both the respondents' general approval of controlling one's family size, and their approval of adoption of family planning methods to control their family size. In both these cases the extent of approval was higher with the equalitarian marital power structure as compared to that with the husband dominant power structure. The general approval as well as the approval of adoption of family planning methods had a statistically significant
association with the type of marital power structure in the family \((p > .001\) in both the cases). However the strength of association was comparatively much higher in the case of the latter \((\gamma_b = .16)\) than that found in the case of the former \((\gamma_b = .10)\).

Given the knowledge of different methods of family planning and the approval of their use, the next stage in the family planning acceptance is to take an overt and conscious decision as to the use or non-use of family planning methods.

The extent of decision making regarding the adoption/non-adoption of family planning methods also came out to be greater with the equalitarian marital power structure. The association between these two variables was not only statistically significant \((X^2 = 135.2; \ df = 1; p > .001)\) but also had a high degree \((\gamma_b = .47)\).

Therefore, the type of marital power structure in the family was proved to be a good predictor of the extent of decision making in favour of the adoption/non-adoption of family planning methods \((\gamma_b = .47)\), whereas it remained a moderate and poor predictor at the 'approval stage' and the 'awareness and information stage' respectively.

Adoption of family planning methods involves the transformation of the respondents' decision in favour of adoption of family planning methods into concrete action. Adoption of family planning methods was taken in terms of
their continued use.

Not being an exception to the stages preceding this, the adoption of family planning, too, turned out to be associated with the type of marital power structure. The extent of adoption was found to be much higher with the equalitarian marital power structure as compared to that with the husband dominant power structure. The association, besides being significant (\(X^2 = 150.4, \text{ df} = 1, p > .001\)), had a high degree (\(\tau_b = .52\)). Therefore, out of all the four stages of family planning acceptance, the 'adoption of family planning' was best predicted by the type of marital power structure in the family.

Adoption of family planning being the net outcome of the whole process of family planning acceptance, it was proposed to examine it further with a view to find out as to how far it was also influenced by various socio-economic and demographic variables. Therefore, an effort was made to identify such variables, examine their association with the adoption of family planning and further evaluate the association between the latter as the dependent variable and the type of marital power structure as the independent variable sans the impact of various intervening variables identified in the process.

The adoption of family planning was found to have a direct association both with the respondents' level of education and the SES of their husbands. The extent of adoption of family planning was also greater among the
working women as compared to that found among their counterparts with the husband dominant power structure.

However, out of all these SES variables, the SES of the respondents' husbands was most strongly associated with the adoption of family planning ($\phi = 0.34$), immediately followed by the respondents' level of education ($\phi = 0.44$). The gainful employment of the respondents came in between ($\phi = 0.48$).

The adoption of family planning also exhibited a direct association with the respondents' present age and the number of total living children in the family. The adoption of family planning was also much higher among the women who had at least one living male child when compared with that found among their counterparts with no living male child.

The SES variables had markedly influenced the association between the adoption of family planning and the pattern of marital power structure in the family, since the difference between the pre-control value of Tau ($\phi = 0.52$) and after-control value of tau in each case (after control value of Tau varying from $\phi = 0.48$ to $\phi = 0.34$) was well marked. But the demographic variables only marginally influenced the association between these two variables (after control value of tau varying from 0.50 to 0.51). Nevertheless, the pattern of marital power structure in the family came out to be
a good predictor of the extent of adoption of family planning even if all the intervening variables were controlled individually.

Therefore, the hypothesis that the extent of family planning adoption would be greater with the equalitarian marital power structure and lesser with the husband dominant power structure was substantiated even when all the socio-economic and demographic variables were controlled.

**Marital Power Structure and Fertility**

The respondents' level of fertility could logically be viewed as the outcome of the couples' family size desires and the family planning acceptance by them. The equalitarian marital power structure in the family being associated both with the lower family size desires and the extent of adoption of family planning could be expected to be a correlate also of lower level of fertility among the couples.

But initially the hypothesis that the level of fertility would be lower with the equalitarian marital power structure and higher with the husband dominant power structure was not supported by the data.

The respondents' 'present age' and their 'marriage duration' were identified as the intervening variables which had negated the association between the marital power structure and the level of fertility.
Both these variables were found to have a direct association with the respondents' level of fertility. Since women with the equalitarian marital power structure in the family were older in age (average age = 29.1 yrs.) than their counterparts with a husband dominant power structure (average age = 27.7 yrs.) and had a longer marriage duration (average marriage duration = 12 yrs.) than them (average marriage duration = 11.1 years), the former could not have a markedly lower level of fertility (average No. of live births = 3.4) than the latter (average No. of live births = 3.7). Had they been of the same age and also had the same duration of marriage as that of the women with a husband dominant power structure, their level of fertility would have been lower. The assumption was, however, proved when both these intervening variables were controlled as in both these cases and almost within each control variable category, the average number of live births to the women with an equalitarian marital power structure in the family turned out to be lower than that found among the women with a husband dominant power structure.

The Desired Family Size and Fertility

The couples' family size desires, insofar as they are based on an effective communication between the spouses, may influence the couples' level of fertility. Smaller family size desires are likely to result into a lower level of fertility and larger family size desires into a higher level of fertility. Moreover, within a given desired family size the
women with equalitarian marital power structure were expected to have a lower level of fertility than their counterparts with a husband dominant power structure.

The respondents' desired family size exhibited a direct association with their level of fertility. However, within a given desired family size, the level of fertility, at the initial stage, was found to be higher for the women with the equalitarian marital power structure as compared to that found among the women with the husband dominant power structure. Since the respondents' level of fertility had been found to have a direct association also with the respondents' present age and their marriage duration, a simultaneous control for the respondents' desired family size and these two intervening variables (the two variables being controlled individually with the desired family size) was exercised. It revealed a positive association between the equalitarian marital power structure in the family and a lower level of fertility within each level of the desired family size.

Therefore a comparatively higher present age coupled with a longer marriage duration in case of the women with an equalitarian marital power structure than that found among the women with a husband dominant power structure within each level of desired family size account for the comparatively higher level of fertility initially found among them.
Since the association of the respondents' desired family size with the level of their fertility can be better understood in terms of their 'family size achievements' which implies their completed fertility, an effort was also made to relate the couples desired family size to their completed fertility.

The analysis revealed not only a direct association between the 'family size desires' and the 'family size achievements', but it also showed that the family size achievement in terms of completed fertility was lower with the equalitarian marital power structure and higher with that of the husband dominant, even when the couples' desired family size was controlled.

**Adoption of Family Planning and Fertility**

Adoption of family planning, through averting potential births, could logically be expected to lead to a lower level of fertility. But the data initially provided no proof in support of this contention, since, in the case of the women with the equalitarian marital power structure, the average number of live births was just the same for the adopters as for the non-adopters (3.6) and the adopters registered even a higher average number of live births (4.0) than the non-adopters (3.7) within the category of husband dominant power structure.

However, the level of fertility turned out to be lower with the adoption of family planning when the women's present age and their marriage duration were controlled individually.
The adopters of family planning methods turned out to be older in age and they also had a longer marriage duration. Since the level of fertility was found to have a direct association both with the present age of the respondents and their duration of marriage, the absence of the expected association between the level of fertility and adoption of family planning at the initial stage may be explained in terms of the higher average and longer marriage duration of the adopters.

Moreover, women with the equalitarian marital power structure could also be expected to have a greater efficacy in the adoption of family planning than the women with a husband dominant power structure, the degree of efficacy, however, being measured in terms of the average number of live births to the adopters. The data did provide some proof to support this contention.

Fertility may also be influenced by the type of method preferred to be used. Permanent methods being irreversible are generally adopted when the family size goals have been realized and the number of children born is sufficiently large to cover every risk of child mortality. Contrarily, temporary methods which are reversible and can be used both for spacing the children and for family size control may be adopted much earlier. Therefore, it was contended that the respondents' level of fertility would be higher with permanent methods and lower with temporary methods.
The data provided ample evidence in support of the above assumption, since, within both the categories of marital power structure, the average number of live births turned out to be much smaller with temporary methods as compared to that with permanent methods, the exact figures being 2.9 and 4.3 respectively within the first category of marital power structure and 3.6 and 6.0 within the second category.

The degree of efficacy in the adoption of family planning with each type of methods adopted was higher with the equalitarian marital power structure and lower with that of the husband dominant as was clearly indicated by the comparatively smaller average number of live births to the adopters of both the types of methods in the first category of marital power structure than that found in the case of the second category.

CONCLUSION

In any sociological study of fertility, the main concern is with the socially regulated fertility the rates of which vary from society to society. The socially regulated fertility, insofar as it is determined by the efficacy with which preventive checks are used by the couples in the reproductive age-span, is a very complex phenomenon and is subject to the inter-play of various socio-economic, cultural and socio-psychological factors in a given population.
However, not denying the importance of socio-economic variables, the socio-psychological variables that characterize the family organization are of vital importance in determining the fertility behaviour of the couples. It may be argued that reduction in the fertility level of the individual couple and in the fertility rates at the national level is possible when a substantial proportion of the couples in the reproductive age-span perceive the family planning messages given and the family planning services provided to them as cogent and reasonable. This would further depend on the ways in which individual families are organised in terms of the relative power and influence and the amount of communication between the spouses.

The equalitarian marital power structure which implies equal participation of the spouses in all matters of family life in general and in matters relating to fertility in particular, gives the two partners a sense of shared responsibility for further involvement in putting the decisions into practice. The husband's use of coercive or reward power may not be effective in this situation because the wife has the means to subvert his wishes through her effective or non-effective use of contraceptives which may not be easily noted by the other partner. Therefore, her equal or dominant participation in fertility decision making ensures the adoption of family planning as the surest means to achieve the couple's rationally perceived goal of small family size.
Inter-spouse communication regarding fertility and family planning is not only conducive to smaller family size desires and family planning acceptance, but also serves as a prerequisite of joint decision-making. This is because individual intentions of the spouses turn into joint decision-making only through mutual communication. Lack of communication may thwart goal getting. Stycos (1968) has maintained that lack of communication between the spouses often obstructs the awareness of common ideals. Moreover, in the absence of any specific communication, people make assumptions on the desired family size based on cultural stereotypes and norms, which, in traditional societies, are in favour of large family size.

However, the extent of inter-spouse communication depends on the pattern of power structure within the marital dyad. This is how the socio-psychological factors that characterise the organization of a family are important and can have primacy over the variables of socio-economic syndrome and demographic attributes of the couples in providing explanation for the fertility behaviour of the couples both in terms of family size desires and family planning acceptance.

It may be stated in conclusion that as compared to the socio-economic and demographic variables syndrome, the socio-psychological variable of power structure that characterizes the family organization is a better determinant of the couples' fertility behaviour insofar as it governs the decision-making
process which involves the couples' communication regarding family planning, their family size desires and family planning acceptance by them. Therefore, it can be more relied upon than the former in providing an explanation for the fertility differentials that exist in the couples' fertility behaviour.

It may be added further that the adoption of family planning per se cannot bring down the couples' level of fertility since it is also influenced by the demographic attributes of the women, namely, their present age, and the duration of marriage. If the adoption of family-planning takes place at a higher age and in the later years of their married life, it would not avert many potential births, and thus reduce the impact of family planning adoption to just a nominal level.

These findings have the following strategic implications for the programme of Family Planning:

(1) Though not denying the importance of economic and technological developments in bringing about a spontaneous decline in the fertility level of the couples, yet it may be asserted that the programme of family planning and fertility control can be made more popular and effective among the target groups without waiting for a substantial improvement in the socio-economic status of the people at large.
This can be done through focussing on the section of the target group who have a low motivation for the adoption of family planning owing to a less congenial family organization characterized by a husband dominant power structure and a low level of communication between the spouses.

(ii) The planners should adopt a more rational approach in the matter of family planning, making it more qualitative rather than merely expanding it quantitatively through making it target-oriented. Therefore, more emphasis should be laid on the educational and motivation aspect of the family planning programme so that individual couples accept family planning as their personal necessity and a way of life and not as a constraint exacted by the government on their purely personal and private behaviour.

However, all these generalizations are being made with the full realization of the fact that these are based on a small micro-level study and that the human fertility is a complex phenomenon. More insight into the problem can result only from a multiplicity of research efforts both at the micro and macro level.