CHAPTER VI

SUMMARY AND CONCLUSION
Fertility is a demographic process for replacement of population. Among the human being fertility behaviour is a very complex process, which is responsible for continuation of not only the species but also the human society. Though in general, the process of fertility is influenced by different social and biological factors, it is observed that at times, these variables fail to determine the direction of fertility trend in any population and fertility becomes an unpredictable phenomenon. Therefore, at present fertility behaviour constitute an important aspect of the studies in modern sociology and demography. Some of the countries in the western world like West Germany and Sweden have experienced "Zero" population growth and the demographers expect decrease in population in these countries in near future. On the other hand, the developing countries with less resources are experiencing high rate of population growth - which is often described as "Population Explosion".

The study of different factors contributing to high fertility levels is of great importance in view of the high rate of increase in population growth experienced in
most of the developing countries in recent past and the wide variations in the level of fertility observed within many high fertility countries. A thorough understanding of the differentials and determinants of fertility at all levels is essential for initiating many planned efforts for fertility control programmes and for economic development of the country.

The knowledge of various determinants of differential fertility contributes to the advancement of a precise theoretical conceptualisation in the sociology of fertility. There still remains a considerable gap in understanding the determinants of fertility in many countries, including India. A variety of factors have been identified as directly or indirectly responsible for the differences in fertility at different levels. A recent UN (1973) report observes - "within the limits established by physiological factors, a multitude of economic, social and cultural factors are the ultimate determinants of fertility levels and of the variations in different societies". The countries of the world have been broadly classified into 'low fertility' and 'high fertility' countries. A crude birth rate below '30', a gross reproductive rate below '2' is considered as low fertility and the rest high fertility. Most of the low fertility countries
are developed nations have high fertility rate.

Most of the studies have been conducted in different parts of the world. U.S.A., Latin America and a few Asian countries, have taken one or the other of the stratification variables or cultural variables or cultural units as the basis of study and have generated a certain amount of knowledge to explain the cause of differential fertility.

It is very important that in India population studies should be made more meaningful and result oriented. In case these are not done, there is every possibility that the planners and the administrators might not become quite conscious of the magnitude of the problem, and the nation might be taken by surprise at some stage or the other. So many workers have so far undertaken fertility study in different parts of India. But in the state of Orissa, studies on fertility differentials are very scanty.

In this research work, the fertility variation has been studied among the Hindu urban women of Orissa, mainly from two cities. The report describes the demographic structure and relation of different variables on the fertility
pattern of the Hindu women of the urban areas of Bhubaneswar and Cuttack, where no study has been so far undertaken. The present study was carried out during 1977 - 81. Data were collected in 1978 - 79 from 1500 couples from each city, through personal interview and canvassing schedules from door to door.

The objective of this study was to observe why and how the couples living in the same place and availing the same facilities of the urban area differ in their fertility rate, which could be mainly due to the influence of different biological, social and cultural variables.

The general demographic structure of the couples of Bhubaneswar and Cuttack shows that, as the members of the other urban areas, most of these people are educated. Only 1.2% and 2.1% males at Bhubaneswar and Cuttack are illiterates. Though the people are getting all the facilities for education, 11.5% and 12.5% women of Bhubaneswar and Cuttack are still illiterate. The younger generations though are literate according to the census definition, are not educated sufficiently, to change their life pattern. Only 9.3% and 11.4% women have the college education; but 26.2% and 27.2% passed matriculation at Bhubaneswar and Cuttack respectively. Of course
the literate percentage is more than average literate percentage in Orissa according to 1971 census.

The main occupation of the people is service of different types in both the places. 75.5% and 68.2% are service holders at Bhubaneswar and Cuttack. Very few women are employed. They are only 6.2% and 7.5% at Bhubaneswar and Cuttack respectively. Most of the younger mass (female) are interested in employment to have higher standard of living.

The economic condition of the people in both the places is not very satisfactory. 21.5% and 14.9% families belong to lowest economic group having the monthly income of less than Rs.300/-. Highest percentage belong to the category with monthly income of Rs.300/- to Rs.500/-. 32.9% and 34.6% families belong to the middle income group with an income of Rs.500/- to Rs.1000/- per month.

The family structure of these two places shows that though the people are urbanized, the joint family system is not totally extinct. Majority of the families live in nuclear family. Only 9.3% and 13.0% couples at Bhubaneswar and Cuttack respectively live in joint families.

The average age at menarche for the women at
Bhubaneswar and Cuttack lies between 13 to 14 years and the mean age at menopause at both the places lies between 49 to 50 years. The average age at marriage increased from the average age at marriage of males and females according to 1971 census. For men it is within 25 to 26 years and for females, it lies between 17 to 18 years. It is less than the average age at marriage found in other states of India, like Kerala, Punjab, Assam and West Bengal etc. The child marriage is in very negligible percent, found only among the oldest age group.

The demographic structure of the population of the two cities do not differ very much, though there are slight variation observed in some characters.

The average fertility rate at Bhubaneswar and Cuttack is 3.1 and 3.4 respectively, which is more than the ideal fertility rate (less than '2') to reduce population growth. But the fertility rate of the younger generations has been reduced from the older generations. This suggests that the small family size norm is now being appreciated by a large majority of the urban couples. The difference in fertility rate between Bhubaneswar and Cuttack can be attributed to better medical facilities available at Bhubaneswar. Though big
hospitals and family planning centres are established at Cuttack, it is difficult for the women to go there and seek advice at the time of need. But at Bhubaneswar there are maternity centres in different units, where the lady staffs and lady doctors are appointed and they visit the different houses to provide required advice and contraceptives etc. These facilities are lacking at Cuttack. Secondly, the people of Bhubaneswar are mostly Government servants, and their attitude is different from the permanent settlers, traditional and orthodox families of Cuttack.

Urbanization produces changes in occupational structure by increasing non-agricultural occupations; increases the rates of literacy and rural-urban migration, provides the medical facilities and effects improvement in the level of living. All these changes create a new orientation in goals and values favourable to lower fertility. But within the urban area also the fertility rate varies among different socio-economic groups. The major objective of this research work is to study the variation rate due to the influence of these variables, or whether the changes due to urbanization in social structure have any bearing on the general fertility rate.
By studying the fertility pattern in socio-economic strata, it is found that some differ in their fertility patterns, whereas others do not.

Variables like couples sharing the same bed have got no influence on fertility rate. The Hindus in general are religious people and they observe some days in a week and some important festivals as taboos for cohabitation but in the present study, the observation of taboos could not be related with fertility. The birth spacing and prolonged lactation have also no influence on fertility pattern of the couples. The biological and social variables like age at menarche and age at marriage (females) are considered as important possible explanation for the variation in fertility rate. Age at menarche shows negative relation with the fertility rate. Higher age at menarche is associated with low fertility rate. But in younger generation this difference vanishes as the influence of age at menarche is associated with age at marriage. The age at marriage is considered as an important explanation of fertility variation. The women who have married earlier have higher number of live births, than those who have married late i.e. after 30 or 25 years. The average live birth decreases with the increase of female age at marriage. Male age
at marriage does not have direct influence on fertility, but it indirectly helps by increasing of female marriage age, where the male age at marriage is higher. The duration of conjugal life also has direct influence on fertility rate.

In both the urban areas the joint families demonstrate lower fertility rate (3.7 at Bhubaneswar and 3.2 at Cuttack), than the nuclear families (3.1 and 3.5 respectively).

The caste structure could not be correlated with fertility variation in the two cities.

The occupation status of women shows direct influence on the fertility rate of the couples. The employed women of Bhubaneswar and Cuttack have the average life births of 2.5 and 2.4 respectively whereas the unemployed women averaged at 3.2 and 3.5 respectively.

The inequality in economic status also affects the fertility performance of different economic groups. The economic condition of the family shows inverse relation with the fertility rate. The higher income groups have lower fertility rate than the low income group couples.
The occupation does not show any relation with fertility. The higher occupational groups at Bhubaneswar and Cuttack have either higher fertility rate than the lower occupational groups or the same. The middle class occupants have low fertility rate. The fertility distribution becomes 'U' shaped when correlated with occupation.

Education is an important parameter which has considerable influence on fertility. Education has positive relation with mean age at marriage of both males and females. It also helps in having higher economic condition (not always). It changes the attitude of the couples regarding the number of children they should have; it also increases the proportion in favour of liberalization of abortion laws. At Bhubaneswar and Cuttack a strong relationship is found between the fertility and educational status of the couples and particularly educational achievement of the females. In the higher educated groups, fertility is low. But impact of education is not visible in the lower degree of education. A minimum of matriculation standard of education of women demonstrate slight lowering of the fertility.

Modernization quickly and decisively depressed the mortality rate through the improvement of sanitation,
nutrition and medical care. In the developing countries, mortality rate is declining faster than the fertility rate (though fertility rate has also declined), thereby increasing the population quantity. The infant mortality rate is rather high in the developing countries. In India, the infant mortality rate shows a downward trend during the past two decades which is certainly a most welcome sign, but compared with conditions in other countries, the situation is still far from satisfactory. High degree of infant mortality may lead to high rate of fertility.

The child mortality rate at Bhubaneswar and Cuttack shows that, the 3000 couples gave birth to (4666 + 5126 respectively) 9802 offspring, but at the time of survey only 8807 children were living and 995 (10.15%) children were dead. The exact age at death has not been recorded but all of them died before adulthood and within 14 years. The death rate among the different age groups of mothers show that the child mortality rate has decreased to a remarkable extent among the younger generation. The average number of living children are also more among the older generations. In the older generations the child mortality is more, therefore the fertility rate is also high. Due to mortality the average number of children in
The rate of child mortality varies considerably among the different socio-economic groups. The more fertile groups have excessive amount of mortality and they usually belong to the lower socio-economic classes. The average living births among those who have high fertility is not considerably more than the average living children among the couples having low fertility. Child mortality is expected to decline gradually because of public health and sanitation programmes, introduced by the Government.

Mortality plays an important role as an independent variable. Society's problem is not fertility but the replacement. Higher the level of mortality, the greater the social emphasis on fertility, but as mortality declines, such emphasis has also become less. The present study shows that the mortality rate has been reduced in general, but as the male child mortality rate is high, to have at least one or two (in some cases) sons, the couples take some chances and as the result, they have more issues.

The child loss has been reduced to some extent.
but reduction of fertility rate is not satisfactory. The fertility rate has not reduced only due to the reduction in child death rate but more due to loss of pregnancies, through abortion, still birth and moreover through the induced abortion. Still births are very few. The normal abortions are very less in comparison to induced abortion. The induced abortions are also more among the younger couples. In total 22.6% and 27.9% pregnancies are wasted at Bhubaneswar and Cuttack through child death, normal abortion, induced abortion and still births.

The population growth in India is quite like that experienced by other developing countries. It is now at the phase where child mortality rate has been declined sharply, while fertility rate still remains high and this results in high population growth.

The family planning programme is very much accepted by the couples of the two cities. 72.3% and 60.7% couples of Bhubaneswar and Cuttack respectively have the knowledge of one or more birth control techniques, and 58.5% and 82.9% couples have used different techniques. Only 6.7% and 12.7% couples oppose the birth control techniques at Bhubaneswar and Cuttack. So in both the places, now-a-days almost all the couples are
in support of birth control or family limitation. Because the concept of small family is taking root in the minds of the couples, especially among young people, and the family norm is ' 2 ' or maximum ' 3 ' children. They like to have small families because of economic condition and health ground.

Now-a-days most of the people prefer fertility control, but considerable variation is found among different socio-economic groups in their knowledge of birth control techniques and also in their interest in family limitation. The percentage of couples having knowledge about birth control techniques and interest in family limitation is more among the higher professional classes, higher educational groups and also in higher economic groups, than the socially or economically lower classes, though in some cases, deviations are found.

Men in both tribal and civilized societies has been long engaged in customary practices, that keep their numbers below the biological maximum of reproduction; as Steven Polgar has shown (1972). But at present the Government is trying to protect and improve the peoples standard of living by checking the population growth, through "Family Planning Programme ". But the variation is found in knowledge and acceptance of fertility control measures among the people
of different socio-economic classes. So in the introduction of family planning programme more emphasis should be given to the social condition of the particular groups and categories. Men and women who are inclined towards fertility control for traditional reasons should receive special attention.

Fertility behaviour is a complex process, which is not the effect of any single variable. A number of different related and unrelated factors bring about the desired results, like increase or decrease of fertility rate. The small family norm is though now universal, but within the desire and fulfilment there are some barriers like socio-economic condition, desire for a son, lack of education etc. The fertility pattern of Bhubaneswar and Cuttack is independent of influence of certain socio-economic variables and influenced by some other factors. Fertility rate can not be controlled without changing the socio-economic status. This result is applicable only to the couples of Bhubaneswar and Cuttack and it agrees with the findings of studies of different workers at different places of India. At the same time it also shows no similarity with some other urban people. In general like all areas of India, the fertility rate of the couples of Bhubaneswar and Cuttack show
no uniform relationship with some of the socio-economic factors. But as a whole urbanization and education are two most important factors among various socio-economic and demographic factors in explaining the fertility variations. Education includes the new outlook, the freedom from tradition, the willingness to analyse institutions, values and patterns behaviour and the growth of rationalism that come with education. It is, with this new outlook, which affect the fertility rate among the educated class. Though employed women are very few in number, but they showed considerably low fertility. Hence, one of the methods of controlling fertility may be improving the status of women.