

**FERTILITY BEHAVIOUR OF THARU COMMUNITY**  
**(A Case Study of Joshipur VDC in Kailali, District)**

**Submitted By**  
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**CENTRAL DEPARTMENT OF POPULATION STUDIES**

**FACULTY OF HUMANITIES AND SOCIAL SCIENCES**

**TRIBHUVAN UNIVERSITY**

**KIRTIPUR, KATHMANDU, NEPAL**

## **RECOMMENDATION LETTER**

The dissertation work entitled "**Fertility Behaviour of Tharu Community: A Case Study of Joshipur VDC in Kailali District**", by Ram Raja Badayak has completed under my supervision and guidance for the partial fulfillment of the requirement for the Masters of Arts in population studies. To the best of my knowledge, the study is original and carries out useful information on fertility behaviour of Tharu community. Therefore, I recommend to forward this dissertation for evaluation to Dissertation Committee.

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**APPROVAL LETTER**

This dissertation entitled "**Fertility Behaviour of Tharu Community: A Case Study of Joshipur VDC in Kailali District**", by Ram Raja Badayak has been approved for the partial fulfillment of the requirement for the Degree of Arts in Population Studies.

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Date: June, 2009

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Ram Raja Badayak

## ABSTRACT

This study "Fertility Behaviour of Tharu Community" was carried out by using primary data of Joshipur VDC in Kailali District. The main objective of the study was to examine the fertility behaviour of Tharu Community in the study area. The study included 120 current married women of reproductive age group from 120 households which was selected from 360 households by using systematic random sampling method. The total sampled population of the study area was 909. Out of the total population 53.1 percent were male and 46.9 percent were female.

Out of 844 population aged 5 years and above in the study area, 59.2 percent population were literate and 40.8 percent population were illiterate. Out of 120 respondents (eligible women), 12.5 percent were literate and 87.5 percent were illiterate.

Out of 734 population aged 10 years and above, 44.4 percent population involved in agriculture followed by 29.7 percent of student. But, out of 120 respondents (eligible women) 72.5 percent were engaged in the agriculture sector followed by 13.3 percent of household workers. Majority of the respondents (eligible women) found married in age group 15-17 whose percentage was 84.2. Majority of the respondents were not using FP methods due to side effects i.e. 47.2 percent followed by 17.6 percent due to want another child.

The overall mean CEB of the respondent was found to be 3.3 in the Tharu community. The mean CEB was found to be lowest 1.3 and highest 6.7 in age group of 15-19 and 45-49 years respectively. According to age group of respondents were found positively associated with CEB (fertility). Literacy Status of respondents were found to be inversely (negatively) associated with the number of CEB (fertility). Occupation status of respondents were found positively associated with CEB (fertility). Age at marriage of respondents was found negatively associated with CEB (fertility). Similarly, child loss experience was positively associated with CEB (fertility) in the study area.

## ACRONYMS

AAM	- Age at Marriage
AAFMM	- Age at First Menstruation
CBS	- Central Bureau of Statistics
CDPS	- Central Department of Population Studies
CEB	- Children Ever Born
FP	- Family Planning
FPMs	- Family Planning Methods
ICPD	- International Conference of Population and Development
IUD	- Intra Uterine Device
INGOs	- International Non-Government Organizations
LS	- Literacy Status
MOPE	- Ministry of Population and Environment
MOHP	- Ministry of Health and Population
NDHS	- Nepal Demographic and Health Survey
NGO	- Non-Government Organization
NPC	- National Planning Commission
PRB	- Population Reference Bureau
PCL	- Proficiency Certificate Level
SLC	- School Leaving Certificate
SPSS	- Statistical Package for Social Science
SAARC	- South Asian Association for Regional Corporation
T.U.	- Tribhuvan University
T.V.	- Television
UN	- United Nations
UNFPA	- United Nations Fund for Population Activities
VDC	- Village Development Committee

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# CHAPTER-I

## INTRODUCTION

### 1.1 General Background

Fertility is one of the major components of population change. It is biological process, which is determined by socio-cultural and economic factors such as proper health facilities status of women literacy rate, level of income age at marriage and contraceptive prevalence (Bongaarts, 1983).

Fertility behaviour is the process of giving birth, which is interacted with ambient environment, is different in different societies. Besides, the degree of interaction of the environmental variables is different with the biological limits of human fertilities. Several societies, cultural, psychological as well as economic and political factors are found to operate and these are responsible for determining the levels and differentials of fertility (Bhende and Kantikar, 1994).

Fertility is affected by socio-economic and demographic variables. It is influenced by educational, occupation, age at marriage, child loss experience and use and non use of family planning methods. The theory of demographic transition shows fertility is high in poor, traditional societies because of high mortality lack of opportunities for individuals and higher economic value of children (Caldwell, 1982).

In the global context, fertility differs in develop and developing countries. Total fertility rate is higher in developing countries. Total fertility rate is higher in developing countries such as Niger (7.1%), Sierra Leone (6.1%), Ethiopia (5.4%), Gautamala (4.4%). Similarly total fertility rate in some developed countries are below replacement revel like in Sweden (1.8%), Narway (1.9%), Japan (1.3%), Romania (1.3%), Poland (1.3%) (PRB, 2007).

The following factors affect in increase fertility such factors are educational status, economic status, lack of awareness towards fertility,

contraceptive users, religious superstition, child marriage, remarriage, illegal abortion, contraceptive failure, unwanted pregnancy. In case of fertility rate development facilities can not easily reach to all people. So people are going to be poorer day by day. Where the people are poor, the fertility rate is found automatically high. In the process of development the higher level of occupation are associated with lower level of fertility (Tuladhar, 1997, NPC 1988, Bhende, 1991).

Nepal is a country of multi-lingual, multi religious and multi-ethnic society (Dahal, 2003). According to the 2001 census has identified 101 caste/ethnic groups. And, there were 92 language as a mother tongue. Similarly, the total fertility rate (TFR) in Nepal was 6.3 percent in 1981 and reached 5.6 percent in 1991 (CBS, 1995). Fertility declined from 4.6 births per women in the 1996 NDHS to 3.1 births in the 2006 NDHS. This decrease in fertility in terms of the TFR is unprecedented in Nepal. As mentioned earlier, the TFR has decreased from 4.1 births per women in 2001 to 3.1 births per women in 2006 (NDHS, 2006). The TFR of Nepal is higher while compared to other SAARC countries India (2.9), Paskistan (4.1), Sri Lanka (2.0), Bangladesh (3.0) and Bhutan (2.9) PRB (2007). In 1991 the CBR for the country was estimated at 38.7 which declined to 30.5 by 2001 (CBS, 2001). However, the CBR declined in 2001 compared to 1991. It is higher than in India 24, Bangladesh 27, Maldives 19, Sri Lanka 18 in this period (PRB, 2007).

According to 2001 census, 101 caste/ethnic groups are listed. Out of total population, Tharu population is covered by 6.75 percent. Tharu people are living various parts of the country. But their major habitat is Terai region. According to census 2001, Tharu people are mostly living in fifteen district of Nepal. They are living in Morang (7.6%) of 37.2%, Sunsari (14.0%) of 41.3%, Udayapur (7.8%) of 59.1%, Saptari (12.8%) of 44.0%, Bara (11.3%) of 40.1%, Parsa (8.2%) of 38.2%, Chitwan (12.7%) of 60.4%, Nawalparasi (16.5%) of 56.3%, Rupandehi (10.6%) of 43.5%, Kapilavastu (12.6%) of 50.1%, Dang

Deokhari (31.9%) of 77.4%, Banke (16.4%) of 55.8%, Bardiya (52.6%) of 76.0%, Kailali (43.7%) of 78.0%, Kanchanpur (23.3%) of 70.8%, (CBS, 2003).

Kailali district lies in Far Western Development Region of Nepal. There are 44 VDC and 2 Municipalities in Kailali District. According to 2001 census, the total population of Kailali was recorded 616, 697. Out of this population, Tharu population is 269, 521 which is 43.7 percent of the total population of Kailali district.

Joshiapur VDC is one of the forty four VDC of the Kailali district. In this VDC, here are living different caste/ethnic groups Brahmin, Chhetri, Tharu, Magar etc. and are also living at minority Dalit caste such as Sarki, Damai, Lohar, Kami etc. But there are living in big number of Tharu tribes. So, this VDC is made up mixed culture society. But, Tharu tribe has its own mother tongue and traditional culture.

## **1.2 Statement of the Problem**

One of the major causes of the population growth is higher rate of fertility and declining rate of mortality rates. This type of characteristics creates rapid population growth. This also leads to face many problem in developing countries like Nepal i.e. low level of living standard, unemployment, migration, education and socio-economic problems.

Rapid population growth in the present day has been a world wide problem. It has also been treated as a major global issue (Tuladhar, 1989). Fertility rate in Nepal is one of the highest in Asia. In many developing countries high fertility is associated with the level of income, education, child survivors, cultural and religious factors. In addition planning is general has an important role to play in reducing marital fertility (UNFPA, 1989: 73).

The fertility rate of Nepal is declining still, it can be considered high, which is through due to the universal marriage system, early age at marriage, son preference, demand of children. Around 86 percent of people are living in

rural area in Nepal (CBS, 2002). But, majority of the Tharu community are living in rural area. Because Tharu are basically agricultural peasant and they are backward than others.

Tharus are one of the indigenous people who settle in Terai region. Tharus are basically agriculture peasant. Tharus are found mostly one the foothills of Chure and Siwalik two lower Himalaya ranges. This region used to be densely forested area stretching from eastern to western Nepal with only scattered patches of cultivated land. The whole region is also known as the Terai, meaning the plain areas. Thus, Tharus are found along the Terai of Nepal and also some part of India. The Tharus along with the Darai, Majhi and Chepang are indigenous to the Terai region of Nepal. Vast majority of the Tharu population is backward and deprived of main stream of development.

Tharu are innocent, shy and relatively timid people. Some of the earliest settlements of Tharu were deep in the forest isolated from other ethnic groups. They have been exploited by government authorities in the past and still to a lesser degree are exploited by the surrounding non Tharus. Due to poverty they are forced to work as indentured labourers. Though the government has announced their liberation from this state, it is not implemented in practice. Tharus are not good in the business or home economics. They are in debt since the grain they produce is frequently used to brew alcoholic drinks. The clever person from the hills will lend them money to purchase food and then continue to compound the interest eventually the hill man acquires the Tharus land and Tharu is relegated to land less status. (Pyakural, 1982)

The kinds of problems led to study about fertility behaviour of Tharu community.

Tharu population was 6.46 percent and was 6.75 percent in census 1991 and 2001 respectively (CBS, 2003). According to census 1991 and 2001, we can consider that Tharu population is increased in Nepal. It can be due to poorest condition of Tharu community. But, Tharu community is one of the

poorest ethnic groups within the inner Terai. They are suffering from different kinds of problems. Because of the socially and economically condition of the Tharu ethnic groups, they are experiencing high fertility. There are several reasons which are provoking women to bear more children. The main socio-economic factors such as low educational status, occupational status, health status and other religious and cultural aspects as well as demographic factors such as age at marriage, child loss experience, age at first birth, knowledge about family plainning are closely related with fertility behaviour of the study area.

So, the main focus of this study is to examine the relationship between the socio-economic and demographic factors for fertility experience of Tharu community.

### **1.3 Objective of the Study**

The general objective of the study is to analyze the fertility behaviour of Tharu women in Joshipur VDC of Kailali district. The main objectives are as follows:

- a) To identify the socio-economic and demographic characteristics of Tharu women in Joshipur VDC, Kailali.
- b) To examine the relationship between children ever born (CEB) and demographic and socio-economic characteristics of Tharu community.
- c) To study the relationship between fertility and socio-economic variables as education, occupation and other related variables like age at marriage, child loss experience and contraceptive prevalence by the status of women.

### **1.4 Significance of the Study**

This study is concentrated to analyze the fertility behaviour of Tharu community in Joshipur VDC ward no. 8, Kailali. The main purpose of the study is to find out the relation between fertility and socio-economic variables



and other related variables like age at marriage, child loss experience and contraceptive prevalence etc.

This study is very important for the concerned people and agencies, NGO/INGOs, planner and policy maker, for formulating other plans for the developing activities. Besides, this study will be more fruitful for future researchers both foreign and natives, social workers and politicians of the country in relation to their interest such as demographic and national integration. Hence this study is timely and appropriate.

### **1.5 Limitation of the Study**

This study has some limitations mentioned as follows:

- a) This study is limited to fertility behaviour of Tharu community only in Joshipur VDC, Kailali.
- b) This study is limited to the general socio-economic study of the sample population and age group of people specially to the currently married women aged 15-49 women.
- c) The study has based on limited demographic and socio-economic variables is in consideration while explain the fertility behaviour in terms to CEB (fertility).

### **1.6 Organization of the Study**

This study is organized into six chapters. The first chapter deals with introduction which includes background of the study, statement of the problem, objective of the study, significance of the study, limitation of the study and organization of the study. The second chapter deals with literature review and conceptual framework for the study in which theoretical literature, empirical literature and conceptual framework are included. The third chapter describes the methodology. It includes selection of the study area, sample design, sources of data, questionnaire design, procedure of data collection and data analysis.

The fourth chapter deals with socio-economic and demographic characteristics of the population and respondents (eligible women). The fifth chapter deals with fertility behaviour of the respondents. At last chapter presents the summary, conclusion and recommendations.

## CHAPTER-II

### LITERATURE REVIEW AND CONCEPTUAL FRAMEWORK

#### 2.1 Theoretical Literature

The demographic transition theory, a most popular model defined in detail by Notestein (1946) has summarized the various steps of fertility and mortality. It explains from the state of high fertility and mortality to a state of low fertility and low mortality with the improved socio-economic and demographic status of any country. That demographic transition theory is generally based on European countries and some well developed countries. It explains as that such evolution occurs due to evolution in industrialization and urbanization.

Davis and Blake (1956) developed an analytical framework for the comparative sociology of fertility in which they defined a set of eleven variables that they called the "Intermediate variables." This framework provides a classification of the intermediate variables through which any social factor influencing the level of fertility must operate. The proposed eleven "Intermediate variables" are centered around intercourse, conception and gestation. These eleven intermediate variables are:

- i) Age into sexual union
- ii) Permanent celibacy
- iii) Contraception
- iv) Sterilization
- v) Time between unstable unions
- vi) Post widowhood celibacy

- vii) Fetal mortality from voluntary cases
- viii) Fetal involuntary mortality
- ix) Voluntary assistance
- x) Involuntary assistance
- xi) Frequency and coitus and involuntary sterility.

According to John Bongaarts, the proximate determinants of fertility are the biological and behavioural factors through social, economic, psychological and environmental variables affect fertility. Bongaarts (1983) has identified seven sets of proximate determining variables affecting fertility which are age at marriage and marital disruption of post-partum infecundability, fecundability, use and effectiveness of contraception, spontaneous intra-uterine mortality and induced abortion. Later he proposed only four proximate variables that affect directly in determining the fertility levels. They are proportion married, contractipn, post-partum in fecundability and abortion. These four proximate determinants are main determinant to reduce the fertility in Nepal (MOPE, 2000:27).

The model of Easterlin (1976) about fertility is related to the economic cost benefit analysis of the children. It uses natural fertility desired fertility and optional fertility. Natural fertility is that number of birth of a family that is entirely depending on health and sexual behaviour of family members. The number of children are as desired by a couple in which cost of fertility remains zero is the desired fertility. Optional fertility is the result of maximization of utility with budget remaining (Easterlin, 1976:57-133).

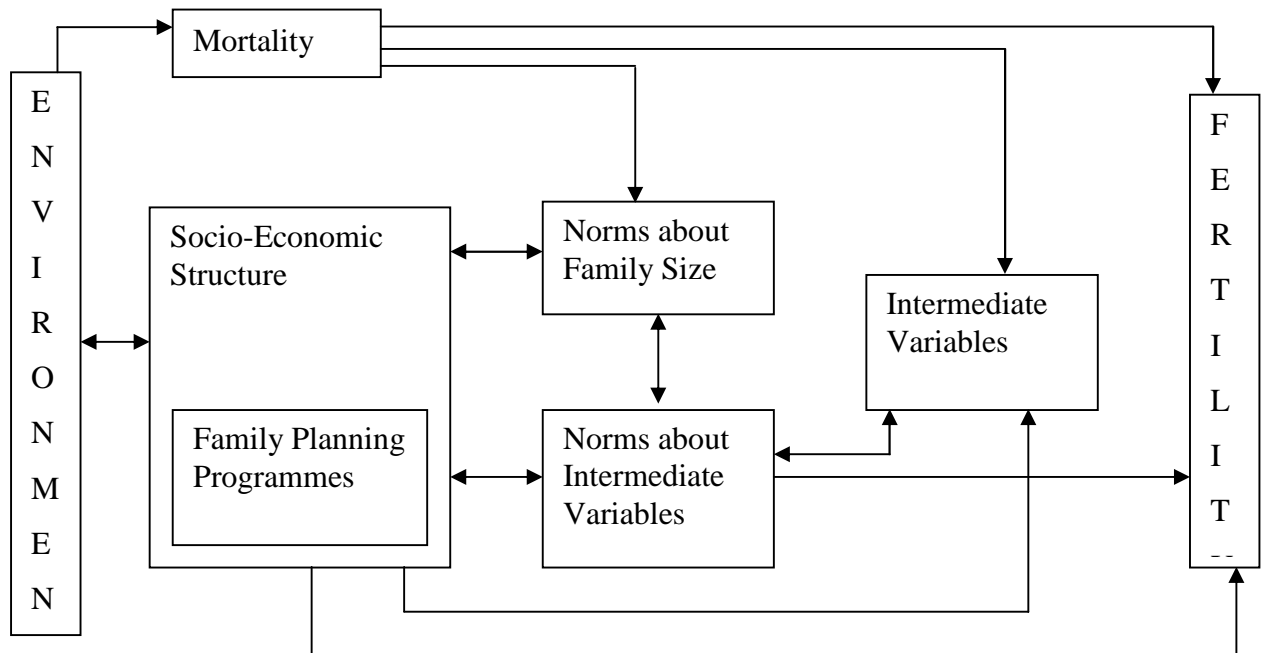
The threshold hypothesis developed by united Nation (UN) in the year 1963 indicates that there is an interrelationship between fertility rate and the general socio-economic development of the society. According to this

hypothesis, decreases in fertility begin after a society has reached a certain level of social and economic development (UN, 1973).

Caldwell (1993) developed a theory, known as "Theory of intergenerational wealth flow" explaining fertility behaviour in any type of society at any level of the development is rational. In a society, the fertility is high if children are economically useful to parents and low if children are economically not beneficial to the parents.

Freedman (1982) developed a model for the sociological framework of fertility. He introduced two types of norms about fertility, which are of norms about family size and norms about intermediate variables. Family planning programme is considered as one of the social programme that has a goal to reduce fertility that may influence the norms about family size and norms about intermediate variables, which in turn affect fertility behaviour (Tuladhar, 1989: 43-44).

**Figure 1: Sociological Framework for Study of Fertility**



Source: Freedman, 1982:279

Generally fertility determined by the psychological factors and their interplay with social, cultural economic and modernization factors also societies and population subgroups within societies categories by their socio-economic characteristics have different level of fertility. Much more fertility is determined by various socio-economic and demographic variables also caste/ethnicity, religion, cultures, women's education, occupation sex performance, use of devices age at marriage affect fertility behaviour of any group of community (Risal and Shrestha, 1989).

## **2.2 Empirical Literature**

### **2.2.1 Education and Fertility**

There is close relationship between education and fertility. Fertility is highly affected by education. Educational attainment also reflects the socio-economic status of people. Education and women's participation in decision making is better educative women than uneducated women. So we can say that higher the educational attainment lower the fertility, lower the educational status higher the fertility.

ICPD 1994, in its chapter eleven reveals that the education is a key variable in sustainable development. Education helps to reduce fertility, morbidity and mortality. The increase in the education of women and girls contributes to women unemployment to postponement of marriage and to reduction in family size (UN, 1994).

The level of fertility declines with increase in educational level of females. The same applies for literacy status. Higher the level of female literacy in a community, the lower will be fertility. This also implies that the level of fertility should be lower for the literate female compared to the illiterate females (CBS, 1994).

According to the Demographic and Health Survey 2001, there is a strong association between fertility and education with the TFR declining as

the level of education increased. The TFR of women with no education (4.8%) is more than double that of women with at least an SLC level of education (2.1%) (MOHP et al., 2001).

According to MOHP et al. (2001) the percent of illiterate women was 72 percent and the percent of illiterate men 37.7 percent. But the percent of no education men and women decrease in 2006. The percent of no education women and men was 53.1 and 21.5 respectively. Since education has opposite relation with fertility. The fertility rate was 4.1 percent in 2001 and was 3.1 in 2006. It shows as the education rate increase the fertility rate decreases (MOHP et. al 2001 and MOHP et al., 2006).

### **2.2.2 Occupation and Fertility**

Female in different occupation is found to have different fertility level. The employment of women out side the home reduces the level of fertility behaviour. UN (1987) found that in every region women with occupation in a modern sector of economic had smallest number of children ever born than women involved in traditional sector of economy. Those who had never worked had on an average likely to have more children than women involved in any of the occupational group.

In the context of Nepal, proportion of women in the non-agricultural work force has increased in all sector. Nevertheless, women's concentration in agriculture is still more than that of men. Women constitute 48 percent of the labour force in agriculture and nearly 3 percent of economically active women are still engaged in agriculturally (Acharya, 2003: 237).

The Nepalese economy is characterized by a dominant agricultural sector. A large proportion of the countries labour force is involved in agriculture. Only very small proportion is in non-agricultural sector. Most of the females are in the unproductive sector (K.C. et al., 1997: XVII).

The economic and cultural value of children may be affected by another social economic variable i.e. education. It is through education, individuals are empowered to have choices and make decisions in family size (Subedi, 2006:219).

The occupational status of women is also an important determinant of fertility. However, women's education and employment are confined within the domestic sphere of Nepalese society. The relationship between the working status of women and fertility is little known working women in rural Nepal are often poorer and less educated than non-working women. Working women in rural Nepal either work on their farm or work as agriculture or wage labour (Dahal, 1992:5).

### **2.2.3 Age at Marriage and Fertility**

Age at marriage is also one of the determinants of fertility. There is inverse relationship between age at marriage and fertility.

Nepalese society does not allow the sexual union of unmarried people. Therefore, marriage is the most essential event in our society. Conception outside marriage is not accepted. Family formation is started after marriage on the one hand on the other hand religions belief and practices in Nepal provoke individuals to marry early. Thus marriage plays a vital role for determining fertility level. Higher the age at marriage is directly related, to the low fertility of an individual as well as social level (Acharya, 1993: 74).

The increase in age at marriage has a negative impact on fertility for two basic reasons first, women who marry later have a shorter reproductive life span and second the factors that the age at marriage also affect the desired family size norms there by reducing fertility. For example, if a woman marries later because she is studying than her fertility will also be lower as her desired family size is smaller (MOPE, 2002).



Singulate mean age at marriage for Nepalese women was 19.5 in 2001. But the singulate women marriage was 19.9 and men was 27.5 in 2006. Similarly the fertility rate in 2001 was 4.1 and it decreased in 2006 remaining 3.1 (MOHP et al., 2006).

Age at marriage in most of the societies is the beginning a women's exposure to the risk of child bearing, age at marriage is a main determinants of the duration and marriage proportion of women never married are important of proximate determinants of fertility (Bongaarts and Potter, 1983).

Thus, age at marriage has been proved as one of the important factors responsible to determine the level of fertility. Therefore, the examination of fertility by age at marriage provides much clear ways to arrest the problem of high fertility to Nepal.

#### **2.2.4 Child Loss and Fertility**

There is a strong relationship between health status of mother and survival of children. High level of infant and child mortality have an impact on the level of fertility. Adhikari (1992) found a positive relationship between infant mortality and fertility. The mean CEB by age and marital duration of mother were with child loss experience compared to women without such experiences compared to women without such experience. As the number of child loss increases the number of children ever born (CEB) is also very likely to increase irrespective of the age and child. The CEB of 2.5 to those women with zero child loss was found to increase to 4.4 with one, 5.8 with 2 and 7.6 with 3 and more child loss (Adhikari, 1996).

New Era (1986:90) found a close relationship between infant mortality and number of children ever born. The study concluded the existence of strong child replacement effect in Nepal.

The complex association between infant and child mortality and reproductive behaviour has long been recognized in demographic literature and

research is involving a two way process. On the one hand, high infant and child mortality has implication for the level of fertility in all societies with operate through biological as well as social mechanism. In the other direction, high levels of fertility contribute, once again through biological as well as social process to maintain high levels of infant and child mortality. Although this relationship is complex, mortality reduction may be prerequisite to a decline in fertility (UN, 1973).

Fertility decline is most affected by mortality decline, broad social and economic fertility decline is development and family planning decline Freedman (1995). High fertility is fundamental adjustment to high mortality and that high fertility is necessary for group survival where mortality is high (Bhende and Kantikar, 2004).

#### **2.2.5 Contraceptive Use and Fertility**

Contraceptive use was considered as one of the four most important "proximate determinants" of aggregate level of fertility. Furthermore, it generally assumes the principle role in transition to lower fertility (Bongaarts and Potter, 1983).

There are several reasons for the low rate of retention of family planning, method in Nepal. Methods are not available to a large number of couples and even where they exists family planning workers have not been affective in motivating couples to use contraceptives. The practices of family planning is culturally on a contraception (Subedi, 1996).

Acharya (1999) found in early conjugal ages did not practice contraception and those who practiced. The already had 3 to or 5 and more children family planning programme of Nepal is basically unsuccessful to attract younger women in it's programme. Those who use contraception after 4 or 5 children. It is obvious that they prefer methods of imitating rather than spacing. The lunch of temporary method in has been successful.

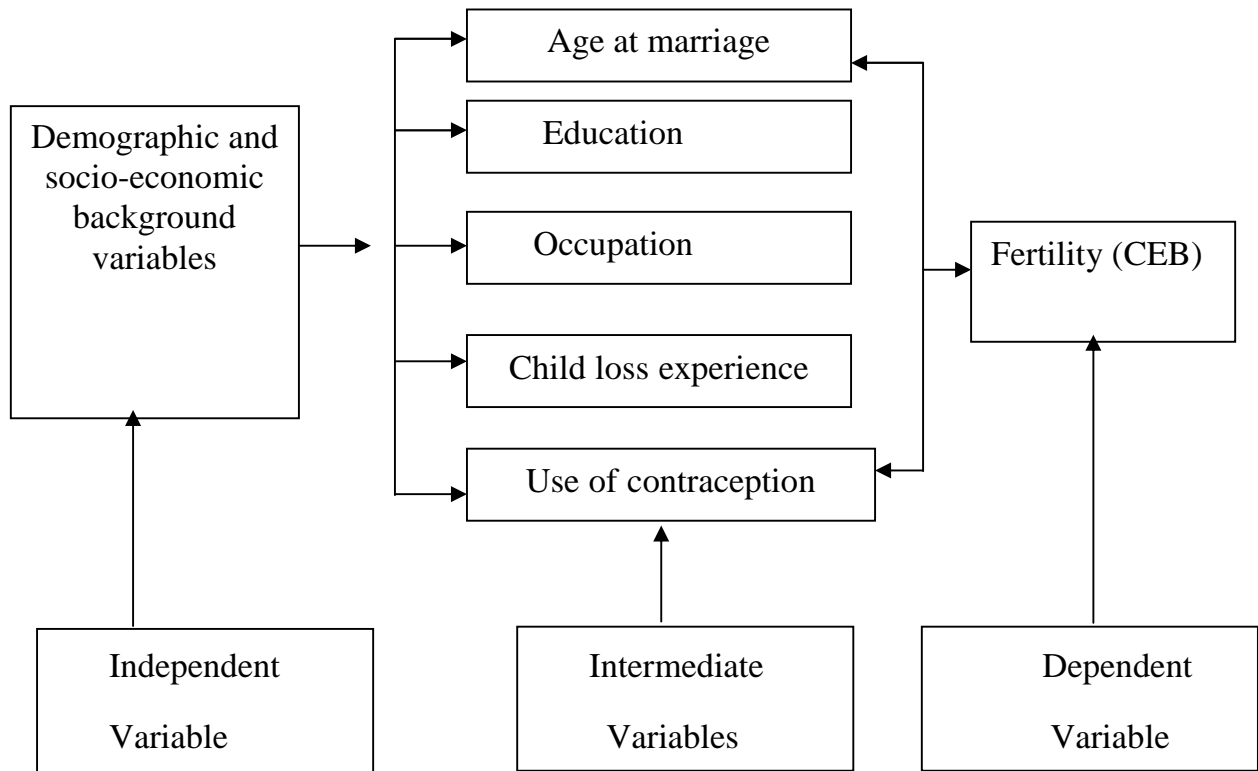
Various studies in the past have shown that use of contraception has a strong negative association with fertility. It is accepted that contraceptive was the principal intermediate variables responsible for the shift of high fertility to low fertility during the late nineteenth and early twentieth century (UN, 1973).

In Nepalese context, growth rate of population is 2.25 percent (MOPE, 2004:5) and total fertility rate is 4.1 (MOHP et al. 2001). The level of current use in the mist widely used and valuable measure of the success of the family planning programme. The conventional measure is that higher the strength of family planning programme effort and vice versa (Pathak, 2002:129).

### **2.3 Conceptual Framework**

The literature review provides sufficient background to conceive a conceptual framework of the study by establishing relationships among various socio-economic and demographic variables responsible for variation in fertility of currently married women in Joshipur Village Development Committee. In order to avoid complexity only selected socio-economic variables (education and occupation) and demographic variables (age at marriage, child loss experience and contraceptive prevalence) which have direct influence in fertility are considered for this study purpose. The framework includes occupation and education as independent socio-economic variables and age at marriage, child loss experience and contraceptive prevalence as intermediate demographic variables which have direct or indirect influence on dependent variables as fertility.

**Figure 2: Conceptual Framework for Analysis of Fertility**



But in this study, demographic and socio-economic background variables are independent variable. Age at marriage, education, occupation, child loss experience and use of contraception are intermediate variables which they have direct or indirect influence on dependent variables as fertility (CEB).

) Higher the age at marriage, education, occupation and use of contraception decrease the fertility.

Lower the age at marriage, education, occupation, and use of contraception increases the fertility.

Than, there is negative relationship between age at marriage and fertility, education and fertility, occupation and fertility, use of contraception and fertility.

) Higher the child loss have higher the fertility.

So, there is positive relationship between child loss and fertility.

## **CHAPTER-III**

### **METHODOLOGY**

#### **3.1 Selection of the Study**

The area of study has been selected a Tharu community in Joshipur VDC, Kailali district. This VDC is bordered by Thapapur VDC in the South, Kota Tulsipur in the north, Bauniya VDC and Munuwa VDC in the east. It is located at about 20 K.M. south form the Mahendra Highway.

Tharu is an indigenou ethnic group of the Terai region. They have been living in this region since long year before. They are ancient residents of Terai region. There are people from different ethnic and religious group having different socio-economic characteristics of Joshipur VDC. The fertility behaviour of this Tharu community was not studied earlier in this VDC. This study has been conducted among Tharu community, as they are economically backward.

#### **3.2 Sample Design**

This study is based on primary and secondary data but the analysis mainly depends on primary data of Tharu ethnic group of Joshipur VDC in Kailali district. There are nine wards in Joshipur VDC numbered 1- 9 and only ward no. 8 has been randomly selected the ward counts of 360 households. Out of 360 households, 120 households have been selected by using systematic random sampling method from sampling frame.

## Sampling Frame

Serial Number (S.N.)	Name of the Household Head	Tole	Selected Household No.
①	D.B. Kathariya	South	1
2	L.R. Dangaura		
3	S. Dangaura		
④	G.P. Kathariya	South	2
5	R. Dangaura		
6	C.R. Dangaura		
⑦	J. Dangaura	East	3
8	B.P. Dangaura		
9	R.P. Chaudhari		
⑩	M.L. Kathariya	South	4
.....	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....
③58	M.S. Dangaura	East	120
359	U.P. Dangaura		
360	A.S. Chaudhari		

From above the sampling frame

Total household size No. (N) = 360

Sample household size no. (n) =120

Sampling interval ,  $I = \frac{N}{n} \times \frac{360}{120} \times 3$

..Sampling Interval = 3

Now, first house was selected from the house of serial number 1 to 3.

Serial number was 1, 2, 3

So, let the selected S.N. is 1.

Now, for 1<sup>st</sup> selection, 2<sup>nd</sup> selection, 3<sup>rd</sup> selection and so on.

According to following method,

$$1^{\text{st}} \text{ selection} = 1\Gamma 3 = 4$$

$$2^{\text{nd}} \text{ selection} = 4\Gamma 3 = 7$$

$$3^{\text{rd}} \text{ selection} = 7+3 = 10 \text{ and so on.}$$

.....

.....

This study is based on field survey in order to fulfill the specific objectives of the study. To the need of the household have administered the household questionnaire and individual questionnaire have been administrated to the eligible (15-49 currently married) women. Although there were more respondents in a selected household, yet only one respondent has been taken from one household for interview.

### **3.3 Sources of Data**

There were mainly two sources of data: primary data and secondary data, but the analysis mainly depends upon the primary data. So, the study is based on primary data collected from field survey by interview with the respondents (each of selected eligible women 15-49 years) on the basis of structured and semi structured questionnaire. Secondary data from CBS were also used in this study.

### **3.4 Questionnaire Design**

Two type of questionnaires were used based on the objectives of this study.

1. Household questionnaires
2. Individual questionnaires

The household questionnaires designed to collect the information on socio-economic and demographic measures of each member of the household. The objective of the household questionnaire was also to identify the eligible respondents for individuals interview.

The individual questionnaire was used to collect the information on currently married women aged 15 to 49 years. The information like age at marriage, child loss experience, educational background, knowledge of family planning, marital status and CEB were collected to find out of the fertility behaviour of Tharu community people.

### **3.5 Procedure of Data Collection**

The procedure of data collection was door-to door visit of households in the study area. The questionnaires were originally prepared English language for interview, but to respondents were asked by Nepali language. There were total 360 household in the ward no. 8 of Joshipur VDC, Kailali. Out of the 360 household, only 120 respondents were selected from 120 sample household which was eligible women aged 15 to 49 years. But the purpose of visit was to collect required information regarding fertility. The eligible respondents were required to provide information.

### **3.6 Data Analysis**

After collection of data, the data were entered into Computer using SPSS (Statistical Package for Social Science) software. The analysis of data collected during fieldwork period was done mainly as per research design. The collected data were for this crude data collected, checked and coded before tabulated.



## CHAPTER-IV

### DEMOGRAPHIC AND SOCIO-ECONOMIC CHARACTERISTICS

#### 4.1 Socio-Economic Characteristics of Population

It is important to understand clearly the overall background situation of the population as well as respondents being considered in the study. Background situation includes socio-economic and demographic characteristics.

##### 4.1.1 Age-Sex Structure

Age structure provides the information of population in different age groups at particular period. Age-sex structure of population is the important variable in study of population dynamic. The age-sex structure of the study population is presented in Table 1.

**Table No. 1: Distribution of Study Population by Age-Sex Composition**

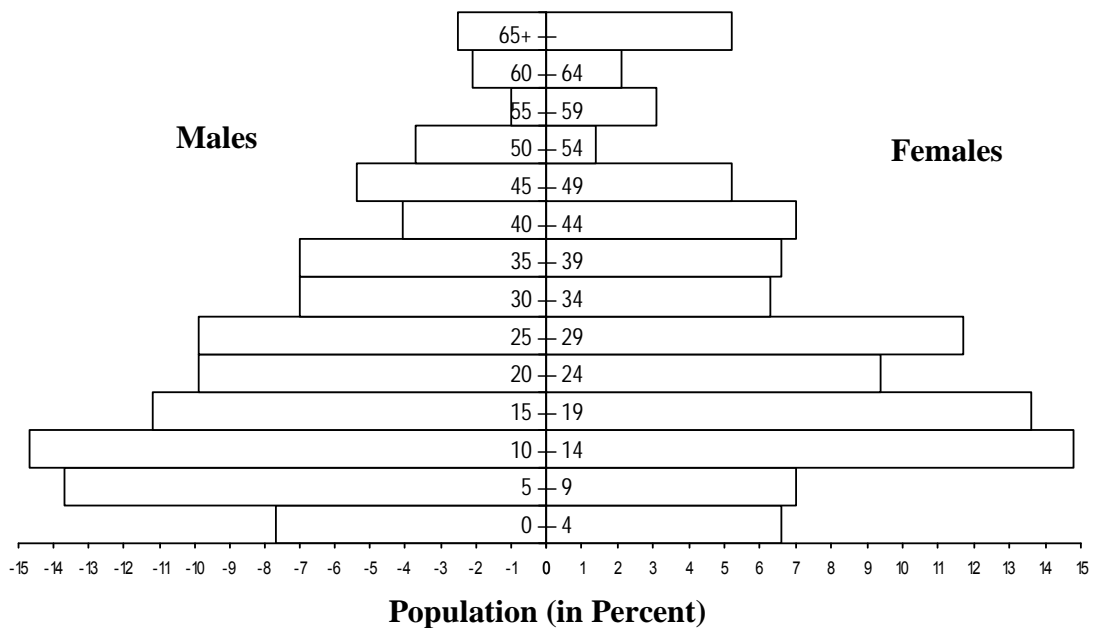
Age Group	Sex						Sex Ratio
	Male		Female		Total		
	No.	%	No.	%	No.	%	
0-4	37	7.7	28	6.6	65	7.2	132.1
5-9	66	13.7	30	7.0	96	10.6	220.0
10-14	71	14.7	63	14.8	134	14.7	112.7
15-19	54	11.2	58	13.6	112	12.3	93.1
20-24	48	9.9	40	9.4	88	9.7	120.1
25-29	48	9.9	50	11.7	98	10.8	96.0
30-34	34	7.0	27	6.3	61	6.7	125.9
35-39	34	7.0	28	6.6	62	6.8	121.4
40-44	20	4.1	30	7.0	50	5.5	66.7
45-49	26	5.4	22	5.2	48	5.3	118.2
50-54	18	3.7	6	1.4	24	2.6	300.0
55-59	5	1.0	13	3.1	18	2.0	38.5
60-64	10	2.1	9	2.1	19	2.1	111.1
65 and Above	12	2.5	22	5.2	34	3.7	54.5
Total	483	100.0	426	100.0	909	100.0	113.4

Source: Field Survey, 2008.

Table 1 shows that the study covers 909 population of 120 households. Out of total population 53.1 percent were males and 46.9 percent were females.

The percentage of population was found the highest (14.7%) in the age group 10-14 followed by 12.3 percent in the age group 15-19 years. This indicates that higher proportion of population is in lower age group which is result of higher fertility. The lowest proportion of population was found in the old age group 55-59 (2.0%).

Population Pyramid of Percent Distribution of the Population based on the data from Table 1.



#### 4.1.2 Marital Status of the Study Population

Marital status is a demographic characteristic of population. It involves biological, social, economic, legal and religious aspects. Marriage is the primary events in the process of family formation. The marital status of the study population by age group of population is given in Table 2.

**Table 2: Distribution of Study Population by Marital Status of Age Group of Population.**

Marital Status	Broad age group of the population								Total	
	10-14		15-19		20-59		60 and above			
	No	%	No	%	No	%	No	%	No	%
Single	134	100.0	107	35.9	50	19.0	1	1.9	292	39.0
Currently married	0	0.0	191	64.1	200	76.1	38	71.7	429	57.4
widow/widower	0	0.0	0	0.0	10	3.8	14	26.4	24	3.2
Divorced	0	0.0	0	0.0	3	1.1	0	0.0	3	0.4
Total	134	100.0	298	100.0	263	100.0	53	100.0	748	100.0

Source: Field Survey, 2008.

Table 2 shows that the marital status of the study population by age-group, in age group 10-14, all possessed single in marital status. 100 percent of the population were single in age group 10-14 years. There were not currently married, widow/widower and divorced in age group 10-14 years of population.

Out of total population of age group 15-19 years, 64.1 percent population were currently married followed by single 35.9 percent.

After that 76.1 percent population were currently married in age group 20-59 years which followed by single (19.0%), widow/widower (3.8%) and divorced (1.1%).

Than, out of total population of age group 60 and above, 71.7 percent of the population were currently married. Similarly, 26.4 percent population were widow/widower and 1.9 percent population was single. But there were not divorced in age group 60 and above years.

Above the table shows that out of the total 748 population, 57.4 percent were currently married and 39.0 percent were single. The widow/widower and divorced population had 3.2 percent and 0.4 percent respectively.

### 4.1.3 Education Status of the Study Population

Education is the one of the most important factor which plays vital role in all society and indirectly affects variable such as fertility, mortality, health condition, income, occupation living standard and other. Therefore, it is important to know the educational status of study population age five year and above.

**Table 3: Distribution of Study Population by Educational Status of Age Group of Population**

Literacy Status	Broad age group of the population								Total	
	5-14		15-19		20-59		60 and above			
	No	%	No	%	No	%	No	%	No	%
Literate	217	94.3	200	76.9	81	26.9	2	3.8	500	59.2
Illiterate	13	5.7	60	23.1	220	73.1	51	96.2	344	40.8
Total	230	100.0	260	100.0	300	100.0	53	100.0	844	100.0
Education attainment										
Primary	173	79.7	50	26.7	12	12.7	1	50.0	236	47.2
Lower secondary	38	17.5	45	24.1	34	36.2	0	0.0	117	23.4
Secondary	6	2.8	60	32.1	16	17.0	0	0.0	82	16.4
S.L.C.	0	0.0	22	11.8	4	4.3	1	50.0	27	5.4
P.C.L.	0	0.0	10	5.3	13	13.8	0	0.0	23	4.6
Bachelor & above	0	0.0	0	0.0	15	16.0	0	0.0	15	3.0
Total	217	100.0	187	100.0	94	100.0	2	100.0	500	100.0

Source: Field Survey, 2008.

Table 3 shows that 59.2 percent of the total population was literate and 40.8 percent of the population was illiterate. Above the table shows that literate population was majority than illiterate population. According to 2001 census, the literacy rate is 54.1 percent of the population of the Nepal (CBS, 2002). So, literacy rate of the Tharu population in the study area is higher than literacy rate of national.

Out of total literate population 47.2 percent of population had got primary level education. Similarly, 23.4 percent population had got lower secondary education followed by secondary level (16.4%), S.L.C. level (5.4%), P.C.L. (4.6%), Bachelor and above level (3.0%).

#### 4.1.4 Occupational Status

Occupational status is one of the important determinant of fertility and contraceptive behaviour. The questions about the occupation were asked to the population who were at the age of 10 years and above.

**Table 4: Distribution of Study Population Aged 10 Years and Above by Occupation Status**

Occupation	Broad age group of the population								Total	
	10-14		15-19		20-59		60 and above			
	No	%	No	%	No	%	No	%	No	%
Agriculture	5	4.2	50	29.2	258	66.2	13	24.5	326	44.4
Business	2	1.7	4	2.3	20	5.1	0	.0	26	3.5
Service	0	.0	3	1.8	7	1.8	0	.0	10	1.4
Daily wage	2	1.7	11	6.4	60	15.4	0	.0	73	9.9
Foreign employment	0	.0	0	0.0	8	2.1	0	.0	8	1.1
Household worker's	0	.0	13	7.6	20	5.1	9	17.0	42	5.7
Student	111	92.5	90	52.6	17	4.4	0	.0	218	29.7
Not stated	0	.0	0	0.0	0	0.0	31	58.5	31	4.2
Total	120	100.0	171	100.0	390	100.0	53	100.0	734	100.0

Source: Field Survey, 2008.

Table 4 shows that 44.4 percent of Tharu people were engaged in agriculture sector and 29.7 percent of population were student. Likewise, daily wages and household worker's were covered by 9.9 and 5.7 percent respectively. The percentage in business and not stated were 3.5 percent and 4.2 percent respectively. More than all population were engaged in agriculture and student which were indicated the majority of Tharu people. The percentage of service population were 1.4 percent. In other sectors were least proportion.

#### 4.1.5 Religion of Study Population

Nepal is a country with multi-religion people. But most of the people are Hindu. At national level more than 80 percent (80.6%) people are Hindu according to census 2001 (CBS, 2002). According to religion also people have different belief which directly or indirectly affected the fertility. In this study population is grouped under two religious groups. Because there are not greater than two religion groups in the study area, i.e. Hindu and Christian which is shown in Table 5.

**Table 5: Distribution of Households by Religion**

Religion	Number of household	Percentage
Hindu	118	98.3
Christian	2	1.7
Total	120	100.0

Source: Field Survey, 2008.

Table 5 shows that 98.3 percent households population was Hindu. Similarly, 1.7 percent was Christian. Thus, it is cleared from above table that 118 households were Hindu religion and 2 households were Christian religion.

#### 4.1.6 Living Status

Respondents were asked whether they are currently living in their house or not. The responses are shown below in Table 6.

**Table 6: Distribution of Households by Living Status**

Living status	No. of. Households	Percentage
Own house	120	100.0
Other's house	-	-
Total	120	100.0

Source: Field Survey, 2008.

Table 6 shows that all the households (100%) had own living houses. No one of them were living other's houses.

#### 4.1.7 Type of House

The respondents were asked about the type of their household. In the study are the given table shows the type of houses of the respondents.

**Table 7: Distribution of Respondents by Types of House**

Types of house	No. of Households	Percentage
Kachhi	87	72.5
Pakki	33	27.5
Total	120	100.0

Source: Field Survey, 2008.

The Table 7 shows that most of the respondent's house was Kachhi which was 72.5 percent. But 27.5 percent respondents house was Pakki. The above table shows that they had low economic status.

#### 4.1.8 Land for Agriculture

The respondents were asked about the other's land holding status. The responses are shown in the Table 8.

**Table 8: Distribution of the Households by Agriculture Land**

Land for Agriculture	No. of Households	Percent
Yes	116	96.7
No	4	3.3
Total	120	100.0

Source: Field Survey, 2008.

Table 8 shows that 96.7 percent of the respondents had land for agriculture. But, 3.3 percent of the households had not land for agriculture.

#### 4.1.9 Land Holding Status in Kattha

Among respondents land holding status was also asked questions to them. The responses are presented below in the Table 9.

**Table 9: Distribution of Household by Land Holding Status in Kattha**

Land kattha	No. of Households	Percent
0-20 kattha	45	38.8
20-40 "	35	27.6
40-60 "	9	7.8
60-80 "	6	5.2
80-100 "	7	6.0
100 & above kattha	17	14.0
Total	116	100.0

Source: Field Survey, 2008.

The Table 9 shows that 38.8 percent of the respondents had land for agriculture between 0-20 kattha. Similarly, 27.6 percent, 7.8 percent, 5.2 percent, 6.0 percent and 14.0 percent of the respondents had land for agriculture between 20-40 kattha, 40-60 kattha, 60-80 kattha, 80-100 kattha and 100- above kattha with respectively.

#### 4.2.1 Domestic Animal

Domestic animals are also sources of household income. To know their economic status and sources of incomes respondents were asked about the domestic animals. The responses are tabulated below in Table 10.

**Table 10: Distribution of Household by Domestic Animal**

Status of domestic animals	No. of Households	Percentage
Yes	119	99.2
No	1	0.8
Total	120	100.0

Source: Field Survey, 2008.

Table 10 shows that 99.2 percent of households had domestic animals. But 0.8 percent households had no any domestic animal.



#### 4.2.2 Types of Domestic Animals

Respondents were asked what types of domestic animals they have. The responses are tabulated in Table 11.

**Table 11: Distribution of Respondents by Types of Domestic Animals**

Types of domestic animals	No. of Households	Percentage
Buffaloes	62	52.1
Cows	27	22.7
Oxen	66	55.5
Goats	75	63.0
Ducks/cocks	99	83.2
Total	119	100.0

Source: Field Survey, 2008.

Table 11 shows that the households had various types of domestic animals which 83.1 percent households had Ducks/cocks. After that 63.0 percent households, 55.5 percent households, 52.1 percent households and 22.7 percent households had Goats, Oxen, Buffaloes and Cows respectively.

#### 4.2.3 Selling of Domestic Animals

Respondents were asked about the selling of domestic animals which they had domestic animals. The responses are tabulated in Table 12.

**Table 12: Distribution of Respondents by Selling of Domestic Animals**

Selling of domestic animals	No. of Households	Percentage
Yes	8	6.7
No	111	93.3
Total	119	100.0

Source: Field Survey, 2008.

Table 12 shows that 6.7 percent of the households were sold the domestic animals and 93.3 percent households were not sold their domestic animals. They only used their domestic animals for home.

#### 4.2.4 Toilet

Among respondents were asked about do you have a toilet or not. The responses are tabulated below in Table 13.

**Table 13: Distribution of Households by Toilet**

Toilet	No. of Households	Percentage
Yes	36	30.0
No	84	70.0
Total	120	100.0

Source: Field Survey, 2008

Table 13 shows that 30.0 percent of the households had a toilet. But, 70.0 percent of the households had not a toilet. It was indicated that most people were in poor condition and uneducated.

#### 4.2.5 Types of Toilet Facility

Among respondents were asked types of toilet facility who had only toilet facility. The responses are presented in Table 14.

**Table 14: Distribution of Households by Toilet Facility**

Types of toilet facility	No. of Households	Percentage
Traditional type	2	5.6
Modern type	34	94.4
Total	36	100.0

Source: Field Survey, 2008.

Table 14 shows that 5.6 of the households had traditional type of toilet facility and 94.4 percent household had modern type of toilet facility.

#### 4.2.6 Main Source of Drinking Water

Water is life and impure water may be cause the loss of life and health impurity. So public health is directly related to drinking water. Respondents were also asked the source of drinking water that they are using. The responses are tabulated below in the Table 15.

**Table 15: Distribution of Household by Source of Drinking Water**

Sources	No. of Households	Percentage
Water tap	1	0.8
Tube well	119	99.2
Total	120	100.0

Source: Field Survey, 2008.

Table 15 shows that 0.8 percent of the household were using tap and 99.2 percent of the household were using Tube well. The majority of the households was showed to use tube well

#### 4.2.7 Facilities of the Household

Home facilities is one of the important factors that indirectly fertility behaviour of the women. Households facilities also indicate the economic status of the family. Respondents were asked about facilities in their home. The responses are tabulated in Table 16.

**Table 16: Distribution of Respondents by Household Facility**

Facility	No. of Households	Percentage
Radio	53	44.2
Electricity	106	88.3
T.V.	55	45.8
Telephone	5	4.2
Transport facilities	88	73.3
Total	120	100.0

Source: Field Survey, 2008.

Table 16 indicates that 88.3 percent of the households had electricity facilities. After that, 73.3 percent households, 45.8 percent households, 44.2 percent households and 4.2 percent households had transport facilities, T.V., Radio and Telephone respectively.

### **4.3 Demographic and Socio-Economic Characteristics of the Respondents**

This chapter deals with the socio-economic and demographic characteristics of respondents (Eligible women). Various factors like age, education, occupation, use and nonuse of contraceptives, age at marriage, child loss experience and age of first menstruation of respondents are analyzed in this sub-section.

#### **4.3.1 Age Distribution of Respondents**

Age of women is a very important factor in determining fertility. So the distribution by age is in the study of fertility. The age distribution of the respondents are presented in Table 17.

**Table 17: Distribution of Respondents by Age Groups in the Study**

**Area**

Age group	No. of the respondents	Percent
15-19	3	2.5
20-24	16	13.3
25-29	34	28.3
30-34	20	16.7
35-39	23	19.2
40-44	21	17.5
45-49	3	2.5
Total	120	100.0

Source: Field Survey, 2008.

Table 17 shows that the eligible women respondents were divided in the different five year age groups. Among them the highest percent (28.3%) of the eligible women was in age group 25-29 and lowest percent was in age group

15-19 (2.5%) and 45-49 (2.5%). The age group 25-29 (28.3%) which was the most fertile group, it directly effect on fertility behaviour.

### 4.3.2 Educational Status of the Respondents

Education is one of the main factors affecting the fertility women. Educated women may have awarness about the fertility and they can communicate easily with their husbands about contraception and ideal number of children. It describes the eligible women by education status below in Table 18.

**Table 18: Distribution of Respondents by Literacy Status**

Literacy status	Respondents	
	Number	Percentage
Literate	15	12.5
Illiterate	105	87.5
Total	120	100.0
Educational attainment		
Primary	2	13.3
Lower secondary	5	33.3
Secondary	6	40.0
S.L.C.	1	6.7
P.C.L.	1	6.7
Total	15	100.0

Source: Field Survey, 2008.

Table 18 shows that the majority of respondents were illiterate 87.5 percent. Only 12.5 percent of respondents were literate. In the study area, illiterate women were higher than literate women of the total respondents. Out of the total educated, women 13.3 percent had primary education and 33.3 percent had lower secondary education. But 40.0 percent had got secondary education. The equal percent had got S.L.C. and P.C.L. education which was indicated above the Table. Thus, the educational status of the respondents was found in very low level.

### 4.3.3 Occupational Status of the Respondents

Occupational status is important factor one of the determinants of fertility and it is related to the fertility behaviour. In this study area, higher proportion of the respondents are found engaged in agriculture sector.

**Table 19: Distribution of Respondents by Occupation Status**

Occupation	No. of the Respondents	Percentage
Agriculture	87	72.5
Daily wage	17	14.2
Household worker's	16	13.3
Total	120	100.0

Source: Field Survey, 2008.

Table 19 shows that the larger proportion of respondents were engaged in agriculture sector which were 72.5 percent. They had helped as helper in the agriculture sector. But in the daily wage and household worker's sector percent of the respondents were 14.2 percent and 13.3 percent respectively.

### 4.3.4 Husband's Main Occupation

The occupational status as well as income of women's husband play an important role of fertility behaviour. The occupational status of women's husband is presented below in Table 20.

**Table 20: Distribution of Respondents by Household's Occupational Status**

Occupation	No. of the Respondents	Percentage
Agriculture	84	70.0
Business	11	9.2
Service	4	3.3
Daily wage	20	16.7
Foreign employment	1	0.8
Total	120	100.0

Source: Field Survey, 2008.

Table 20 shows that the highest 70.0 percent women's households were found whose occupation was agriculture, followed by business and daily wage sector which was 9.2 percent and 16.7 percent respectively. Similarly, 3.3 percent women's husband were service and 0.8 percent women's husband were foreign employment.

#### **4.3.5 Age at Marriage (AAM)**

Age at marriage is also important determining factor of fertility. Nepalese society where marriage is thought to be universal and is taken as a main task of almost universal that low age at marriage results higher number of children ever born. In study area age at marriage of women is found to be at early ages. The following table shows the distribution of respondents by age at marriage.

**Table 21: Distribution of Respondents by Age at Marriage**

Age at marriage	No. of the Respondents	Percent
10-14	4	3.3
15-17	101	84.2
18-19	10	8.3
20-24	5	4.2
Total	120	100.0

Source: Field Survey, 2008.

Table 21 shows that 84.2 percent of women were married at age of 15-17 years which was highest percent. And 8.3 percent of women were married at age of 18-19 years. Similarly, 4.2 percent and 3.3 percent of women were married at age of 20-24 and 10-14 years.

#### **4.3.6 Years of Living Together After Marriage**

Respondents were asked to living together with their husband after first marriage. This responses is presented in Table 22.

**Table 22: Distribution of Respondents by Years of Living Together After Marriage**

Years of living together after marriage	No. of Respondents	Percent
0-4	7	5.8
5-9	23	19.2
10-14	25	20.8
15-19	24	20.0
20-24	31	25.8
25-29	8	6.7
30-34	2	1.7
Total	120	100.0

Source: Field Survey, 2008.

Table 22 shows that 25.8 percent of respondents was lived together with their husband after marriage at age group 20-24 which was highest than other percent. But 1.7 percent of respondents was less than other percent of years of living together after marriage at age group 30-34.

#### **4.3.7 Age at First Menstruation (AAFMM) of Respondents**

Age at first menstruation of the women is one of the major determinants of fertility. Menstruation in the early age indicates the maturity to reproduce child.

**Table 23: Distribution of Respondents by Age at First Menstruation**

Age at First Menstruation	No. of the Respondents	Percent
10-12	7	5.8
13-14	95	79.2
15-16	15	12.5
17 +	3	2.5
Total	120	100.0

Source: Field Survey, 2008.

Table 23 shows that most of the respondents got their first menstruation at the age 13-14 which was 79.2 percent. Similarly, 12.5 percent of the



respondents got their first menstruation between ages 15-16. And 5.8 percent and 2.5 percent of the respondents got their first menstruation between at the age 10-12 and 17 + respectively.

#### 4.3.8 Give Birth

Respondents were asked about given any birth of child and result from the study population is presented below in Table 24.

**Table 24 : Distribution of Respondents by Give Birth of Child**

Give birth	No. of the Respondents	Percent
Yes	120	100.0

Source: Field Survey, 2008.

Table 25 shows that 100 percent of the respondents had given birth of the child.

#### 4.4 Child Loss Experience (CLE) of Respondents

As the parents may lose their living children, meanwhile they feel sad and depressed. Thus, the untimely death of children leads to high fertility of women. If the parents are educated and sensible, they are careful about the mortality rate becomes lower.

**Table 25 : Distribution of Respondents by Child Loss Experience**

Child loss experience	No. of Respondents	Percent
Yes	43	35.8
No	77	64.2
Total	120	100.0
Number of child loss		
1	30	69.8
2	10	23.2
3	3	7.0
Total	43	100.0

Source: Field Survey, 2008.

Table 25 shows that 35.8 percent of the respondents had child loss experience while other 64.2 percent had no experience. But 69.8 percent of the respondents had one child loss experience and 23.2 percent of the respondents had two child experience. Only 7.0 percent of the respondents had three child loss experience.

#### 4.4.1 Interest to Give Birth Additional Child

Respondents were asked about interest to give birth additional child. So, responses is presented in Table 26.

**Table 26: Distribution of Respondents by Interest to Give Birth**

##### Additional Child

Interest to give birth additional child	No. of Respondents	Percent
Yes	35	29.2
No	85	70.8
Total	120	100.0

Source: Field Survey, 2008.

Table 26 shows that 29.2 percent of the respondents had interested to give birth of additional child which 35 respondents said yes. But, 70.8 percent respondents had not interested to give birth of additional child which 85 respondents said no.

#### 4.4.2 Pregnancy Status

Respondents were asked about pregnancy status. So, responses is tabulated below in Table 27.

**Table 27: Distribution of Respondents by Pregnancy Status**

Pregnancy status	No. of Respondents	Percent
Yes	2	5.7
No	33	94.3
Total	35	100.0

Source: Field Survey, 2008.

Table 27 shows that 5.7 percent of the respondents were pregnancy status now. But, 94.3 percent respondents were not pregnancy status.

#### 4.4.3 Knowledge about Family Planning Method

Family planning is the most determining factor in fertility behaviour. Knowledge and practice of family planning methods changes the existing trend of fertility in any population. There is also inverse relationship between contraception and fertility. Every eligible women were asked about the knowledge of family planning, from they have herd about family planning method. But, it is an important especially to the couples.

**Table 28 : Distribution of Respondents by Give Birth of Child**

Knowledge about family planning method	No. of Respondents	Percent
Yes	120	100.0
Condom	106	88.3
Pills	42	35.0
IUD	23	19.2
Norplant	19	15.8
Kamal Chakki	70	58.3
Depo-provera	73	60.8
With drawl	0	.0
Male/Female sterilization	96	80.0

Source: Field Survey, 2008.

Table 28 shows that 100 percent of respondents had heard about knowledge of method of the family planning. Majority of respondents 88.3 percent and 80.0 percent had heard about condom and male/female sterilization respectively. The knowledge of Norplant had heard by few respondents which were 15.8 percent respondents. But any respondents had not knowledge about withdrawal.

#### 4.4.4 Source of Knowledge of Family Planning

There are various sources from where the respondents know about family planning methods. The main source are as shown below in the Table 29.

**Table 29: Distribution of Respondents by Source of Knowledge about Family Planning Methods**

Sources of knowledge of family planning	No. of Respondents	Percent
Radio	82	68.3
T.V.	27	21.7
Hospital	17	14.2
Health post	95	79.2
Newspaper	0	0.0
Doctor	12	10.0
Friends	29	24.0

Source: Field Survey, 2008.

Table 29 shows that 68.3 percent of the respondents were got knowledge about family planning from Radio and 79.2 percent of the respondents were got knowledge from health post. But, only 10 percent of the respondents were got knowledge about family planning from doctor. Any respondent were not got knowledge from Newspaper because of underdeveloped place. Because Newspaper can not reach at time.

#### 4.4.5 Ever Use of Family Planning Method

Ever use of family planning indicates their history of use of family planning methods. Use of family planning methods may have significant impact to manage the rapid growing population and environmental problems. Most of the under development and developing countries are out of its proper use because of traditions and low level of education about contraception methods.

**Table 30: Distribution of Respondents by Ever Use of Family****Planning Methods**

Ever use of FP methods	No. of Respondents	Percent
Yes	106	88.3
No	14	11.7
Total	120	100.0
<b>Methods Used</b>		
Condom	24	22.6
Pills	3	2.8
IUD	2	1.9
Norplant	3	2.8
Kamal Chakki	2	1.9
Depo-Provera	19	17.5
Male/female sterilization	52	49.1

Source: Field Survey, 2008.

Table 30 shows that the ever use of family planning among the study there was indicated. 88.3 percent of the respondents had ever used FP methods. Among the respondents who had ever used any methods, higher proportion had used female sterilization accounting for 49.1 percent followed by condom 22.6 percent, Depo-provera (17.9%), Pills (2.8%), Norplant (2.8%), IUD (1.9%) and Kamal chakki (1.9%).

**4.4.6 Spouses Ever Using Family Planning**

In this study, Respondents were asked about ever using family planning who was spouses. The responses are tabulated below in Table 31.

**Table 31: Distribution of Respondents (Spouses) by Ever Using FM****Methods**

Spouses ever using family planning	No. of Respondents	Percent
Husband	24	22.6
Wife	82	77.6
Total	106	100.0

Source: Field Survey, 2008.

Table 31 shows that 77.6 percent of the respondents were ever used family planning methods who was wife. But 22.6 percent of the respondents were ever used FM method who was husband. Therefore it was cleared that wife was used greater than husband.

#### 4.4.7 Currently Using FP Methods

Currently using FPMs help to reduce the fertility of the people. These people who are using FPMs, their fertility will be less than those who are not currently using. But, percentage of the respondents are presented in Table 32 who are currently using FPMs.

**Table 32: Distribution of Respondents by Currently Using FP**

<b>Methods</b>		
Currently using of family planning	No. of Respondents	Percent
Yes	12	10.0
No	108	90.0
Total	120	100.0
Using methods		
Condom	8	66.7
Kamal Chakki	2	16.7
Depo-Provera	1	8.3
Male/female sterilization	1	8.3

Source: Field Survey, 2008.

Table 32 shows that 10.0 percent of the respondents were currently using FP methods. 90.0 percent respondent were not currently using any FP methods. But, the respondents were using currently FP methods who was used condom 66.7 percent followed by kamal chakki 16.7 percent, Depo-Provera 8.3 percent and male/female sterilization 8.3 percent etc.

#### 4.4.8 Spouses Currently Using FPMs

The respondents were asked to spouses currently using FPMs. The responses are tabulated in Table 33.

**Table 33 : Distribution of Respondents by Spouses Currently Using FPMs**

Spouses currently using FPMs	No. of Respondents	Percent
Husband	8	66.7
Wife	4	33.3
Total	12	100.0

Source: Field Survey, 2008.

The Table shows 33 that 66.7 percent of the respondents had currently using FPMs who were husband and 33.3 percent of the respondents had currently using FPMs who were wife. So, percentage of husband were higher than wife to currently using FPMs.

#### **4.4.9 Advice to Use First FP Method**

Among the respondents were asked about who advice to use first FP methods, the responses are presented in Table 34.

**Table 34: Distribution of Respondents by Advice to Use First FPMs**

Advice to use first FPMs	No. of Respondents	Percent
Hospital	2	16.7
Health post	8	66.7
Doctors	2	16.7
Total	12	100.0

Source: Field Survey, 2008.

Table 34 shows that 66.7 percent of the respondents were got advice to use first FPMs from health post. And 16.7 percent respondents were got from hospital and Doctors respectively.

#### **4.5 Easy to Obtain Contraception Method**

Contraception methods helps couple to manage the family size by preventing unwanted pregnancy. Among the respondents were asked about it is easy to obtain contraception method. The responses are tabulated in Table 35.

**Table 35 : Distribution of Respondents by Easy to Obtain  
Contraception Methods**

Easy to obtain contraception method	No. of Respondents	Percent
Yes	58	48.3
No	62	51.7
Total	120	100.0
Using methods		
Condom	24	41.4
Pills	2	3.4
IUD	2	3.4
Norplant	3	5.2
Kamal Chakki	3	5.2
Depo-Provera	17	29.3
Male/female sterilization	7	12.1
Total	58	100.0

Source: Field Survey, 2008.

Table 35 shows that 48.3 percent of the respondents had said easy to obtain contraception and 51.7 percent respondents had not said easy to obtain contraception. Easy obtain contraception method had said by respondents which were condom (41.4%), Depo-Provera (29.3%), Male/female sterilization (12.1%), Norplant (5.2%), Kamal chakki (5.2%), Pills (3.4%) and IUD (3.4%) etc.

#### **4.6 Reason for not Using Contraception Method**

There are various reason for not using contraception method in our society where was asked to respondents than the responses have got and presented in Table 36.



**Table 36 : Distribution of Respondents by Reason for not Using Contraception Methods**

Reason for not Using Contraception Methods	No. of Respondents	Percent
Lack of knowledge	15	13.9
Lack of money	13	12.0
Due to side effect	51	47.2
Due to want another child	19	17.6
Husband disagree	4	3.7
Religion	2	1.9
Others	4	3.7
Total	108	100.0

Source: Field Survey, 2008.

Table 36 shows that there are several causes of not using FP methods. Among these majority of the respondents i.e. 47.2 percent were not using FP methods due to side effect. 17.6 percent of the respondents were not using FP methods due to want another child. Similarly, respondents were not using FP methods because of lack of knowledge (13.9%), Lack of money (12.0%), Husband disagree (3.7%), Religion (1.9%). But, some respondents were not using contraception method because of others whose percentage was 3.7 percent. It may be due to family disagree.

#### **4.6.1 Want to Use Any Method in Future**

Among the respondents were asked that do you want to use any method in future and the responses are presented in Table 37.

**Table 37: Distribution of Respondents by Want to Use Any Method in Future**

Want to use any method in future	No. of Respondents	Percent
Yes	30	27.8
No	78	72.2
Total	108	100.0

Source: Field Survey, 2008.

Table 37 shows that 27.8 percent of the respondents will want to use any method in future. But 72.8 percent respondents will not want to use any method in future.

## CHAPTER- V

### FERTILITY BEHAVIOUR OF THE RESPONDENTS

The main objective of this chapter is to deal fertility with various socio-economic and demographic factors. A special emphasis is given to the number of CEB to assess fertility behaviour of the respondents. Age group of the respondents, education, occupation, marital age of the respondents and use of FP methods, a relationship with CEB has been established for each variable.

#### 5.1 Mean CEB by Current Age

CEB is the total number of children ever born by a woman by the time of survey. The number of mean CEB is shown by various age groups of mother. It has positive association with longer span of the reproductive age of the women. A relationship of CEB with respondents age is presented in the Table 38.

**Table 38: Mean CEB by Age Group of Respondents**

Age group	No. of respondents	% of total no.	No. of children	Mean CEB
15-19	3	2.5	4	1.3
20-24	16	13.3	26	1.6
25-29	34	28.3	82	2.4
30-34	20	16.7	65	3.3
35-39	23	19.2	97	4.2
40-44	21	17.5	96	4.6
45-49	3	2.5	20	6.7
Total	120	100.0	390	3.3

Source: Field Survey, 2008.

$$\text{Note: Mean CEB} = \frac{\text{CEB}}{W}$$

where, CEB means number of children ever born.

W means no. of respondents (women)

$$\text{Total cases means mean CEB} = \frac{390}{120} = 3.25$$

Table 38 shows that the total mean children Ever Born (CEB) of ever married women of reproductive age group 15-49 years of the study population was found 3.3. The mean CEB was found to be lowest 1.3 for age group of 15-19 years and the highest 6.7 for the age group of 45-49 years. It was found that the CEB of the women has been increased from the age group of 15-19 years (1.3) to age group 45-49 years (6.7) as expected.

## 5.2 Mean CEB and Literacy Status (LS)

Education is considered as the best contraception. So, education of the women is one of the most important determinant of fertility and negatively relates with fertility i.e. higher the education lower the fertility and vice-versa. Educated women play an important role in lowering fertility. Educated women are also more aware of the issue of low family size than uneducated women. The mean number of CEB declines with increase in educational level of women. Women's educational status is taken as key factor for reducing fertility.

**Table 39: Mean CEB by Literacy Status of Respondents (Eligible Women)**

Literacy status	No. of respondents	% of total No.	No. of children	Mean CEB
Literate	15	12.5	34	2.3
Illiterate	105	87.5	356	3.4
Total	120	100.0	390	3.3
<b>Educational Attainment</b>				
Primary	2	13.3	6	3.0
Lower secondary	5	33.3	15	3.0
Secondary	6	40.0	10	1.7
S.L.C.	1	6.7	2	2.0
P.C.L.	1	6.7	1	1.0
Total	15	100.0	34	2.3

Source: Field Survey, 2008.

Table 39 shows that mean CEB of illiterate women was higher than literate women. Literate women had 2.3 mean number of CEB. But illiterate women had 3.4 mean number of CEB. This study has also found the similar findings as earlier study found that with increase in education level the fertility

goes down. Women with primary level education was 3.0 which decreased upto 1.7 for the respondents with secondary level. The mean number of CEB for the respondents with lower secondary was 3.0 and it was mean number of CEB 2.0 for the respondents having S.L.C. level. Thus, the S.L.C. level mean CEB was higher than P.C.L. level mean CEB.

### 5.3 Mean CEB by Occupation of Respondents

Fertility level/behaviour depends upon occupations of parents. In general, studies have shown that people engaged in agriculture and daily wage sector has more fertility than other occupation. There are categorized many level of occupation. High level of occupation have lower fertility than low level of occupation.

**Table 40: Mean CEB by Occupation of the Respondents (Eligible Women)**

Main Occupation	No. of respondents	% of total No.	No. of children	Mean CEB
Agriculture	87	72.5	288	3.3
Daily wages	17	14.2	56	3.3
Household worker's	16	13.3	46	2.9
Total	120	100.0	390	3.3

Source: Field Survey, 2008.

Table 40 shows that 72.5 percent of the respondents were engaged in agriculture sector and 14.2 percent respondents were engaged in daily wages sector whose mean CEB were 3.3 and 3.3 respectively. Similarly 13.3 percent respondents were engaged in household worker's whose mean CEB were 2.9.

### 5.4 Mean CEB by Husband's Occupation

The involvement of husband in any occupation plays some role to determine the fertility level usually most of the husband. Hence, it has been examined the mean CEB of women by their husbands occupation.

**Table 41: Mean CEB by Eligible Women's Husband's Occupation**

Husband's Occupation	No. of respondents	% of total No.	No. of children	Mean CEB
Agriculture	84	70.0	293	3.5
Business	11	9.2	25	2.3
Service	4	3.3	7	1.8
Daily wages	20	16.7	63	3.2
Foreign employment	1	0.8	2	2.0
Total	120	100.0	390	3.3

Source: Field Survey, 2008.

Table 41 shows that the highest mean CEB (3.5) had observed for the women whose husbands were working in agriculture sector and lowest mean CEB (1.8) was found the women whose husbands were involved in service. It seems that, the husbands occupation also affect the level of fertility.

### **5.5 Mean CEB by Age at Marriage of Respondents**

Age at marriage is one of the major determining factor for fertility behaviour. An increase in female age at marriage contributes to reduction of fertility. So there is an inverse relationship between age at marriage and fertility (CEB).

**Table 42: Mean CEB by Age at Marriage of the Respondents**

Age at marriage	No. of respondents	% of total No.	No. of children	Mean CEB
10-14	4	3.3	11	2.8
15-17	101	84.2	341	3.4
18-19	10	8.3	29	2.9
20-24	5	4.2	9	1.8
Total	120	100.0	390	3.3

Source: Field Survey, 2008.

Table 42 shows that the highest mean number of CEB (3.4) was found among those women who married at age of 15-17 years. Due to the greater number of women and children in age of 15-17 years, mean number of CEB was highest than others groups.

The mean number of CEB (2.8) was found those women who married at age of 10-14 years and mean number of CEB (2.9) was found among those women who married at age of 18-19 years. Lowest number of CEB (1.8) was found among those women who married at age of (20-24) years. Thus, it had been found that higher age at marriage, lower the fertility and when the age at marriage was increased then the mean CEB was decreased.

## 5.6 Mean CEB and Years of Living Together After Marriage

Respondents were asked about years of living together after marriage. If years of living together after marriage with husband is higher, mean CEB is also higher. It shows that years of living together after marriage increase and mean CEB is also increase which is presented in Table 43.

**Table 43: Mean CEB by Years of Living After Marriage with Husbands**

Years of living together	No. of respondents	% of total No.	No. of children	Mean CEB
0-4	7	5.8	9	1.3
5-9	23	19.2	46	2.0
10-14	25	20.8	66	2.6
15-19	24	20.0	78	3.3
20-24	31	25.8	135	4.4
25-29	8	6.7	44	5.5
30-34	2	1.7	12	6.0
Total	120	100.0	390	3.3

Source: Field Survey, 2008.

Table 43 shows that if years of living together after marriage increase, mean CEB was also automatically increased. Years of living together after marriage of women was higher respectively, which was years 0-4, 5-9, 10-14, 15-19, 20-24, 25-29 and 30-34 respectively whose mean CEB was increased 1.3, 2.0, 2.6, 3.3, 4.4, 5.5 and 6.0 respectively.

## 5.7 Mean CEB by Age at First Menstruation (AAFMM)

Age at first menstruation also plays an important role to determine the women's status in terms of fertility. If girls gets menstruation in earlier age, she becomes ready to bear child, parents may be worried and they think about her marriage at earlier age. Parents do so because of their belief in deep rooted traditional values. The relationship with age at first menstruation of the respondents with CEB has been established which is shown in Table 44.

**Table 44: Mean CEB by Age at First Menstruation of Respondents**

Age at first menstruation	No. of respondents	% of total No.	No. of children	Mean CEB
10-14	102	85.0	317	3.1
15-19	18	15.0	73	4.1
Total	120	100.0	390	3.3

Source: Field Survey, 2008.

Table 44 shows that 10-14 age at first menstruation of women had mean CEB (3.1) and 15-19 age at first menstruation of women had been mean CEB (4.1). But there was seem low mean CEB (3.1) fertility in the 10-14 age at first menstruation than 15-19 age at first menstruation i.e. mean CEB (4.1). This may be because of small area and small number of respondents. So that, it can not be clear like low age at first menstruation higher the fertility and high age at first menstruation lower the fertility.

## 5.8 Mean CEB and Child Loss Experience (CLE) of Respondents

There are several factors in determining fertility. Childloss experience of the women play a important role in determining fertility behaviour of women. Because when women losses her child, she will be motivate to replace her dead child. So, there is a positive relationship between child mortality and fertility. The mean CEB of respondents by childloss experiences has been given below in Table 45.



**Table 45: Mean CEB by Child Loss Experience and Respondents**

Child Loss Experience	No. of respondents	% of total No.	No. of Children	Mean CEB
Yes	43	35.8	185	4.3
No	77	64.2	205	2.7
Total	120	100.0	390	3.3
Number of Child Loss				
1	30	69.8	116	3.9
2	10	23.2	51	5.1
3	3	7.0	18	6.0
Total	43	100.0	185	4.3

Source: Field Survey, 2008.

Table 45 shows that out of total 120 respondents, 43 respondent had child loss experience whose mean CEB was (4.3) and 77 respondents had no child loss experience whose mean CEB was (2.7).

Above the table shows that out of 43 respondents. 30 respondents had one child loss experience whose mean CEB was (3.9), 10 respondents had two child loss experience whose mean CEB was (5.1) and 3 respondents had three child loss experience whose mean CEB was (6.0).

It is seen if women had higher number of child loss, their mean number of CEB also increased. Therefore, the finding clearly shows that the number of child loss experiences is positively associated with the mean number of CEB.

### **5.9 Mean CEB by Ever use of Family Planning Method**

Using family planning methods is to control the births. So, it is common that the women who use family planning methods have less number of children than those who have not used family planning methods. A relationship of CEB with women's use and non use of FP has been presented below in the Table 46.

**Table 46: Mean CEB by Ever Use of FPMs Respondents**

Ever use of FPMs	No. of respondents	% of total No.	No. of children	Mean CEB
Yes	106	88.3	345	3.3
No	14	11.7	45	3.2
Total	120	100.0	390	3.3

Source: Field Survey, 2008.

Table 46 shows that those women who had used FP methods had more CEB than those women who had not used FP methods. Generally, there is negative relationship between use of FP methods and fertility. But in this study shows the positive relationship between use of FP methods and fertility. This may be because of the women in the rural area after giving number of births then they use FP methods. Because, above the table shows that ever use of FPMs was shown higher mean CEB 3.3 and ever non use of FPMs was lower mean CEB 3.2.

## **CHAPTER-VI**

### **SUMMARY, CONCLUSION AND RECOMMENDATION**

The study had been carried out to examine the fertility behaviour of Tharu community in Joshipur VDC, Kailali. The research was based on primary data collected from field survey in Joshipur VDC of Kailali districts. It had been studied fertility behaviour in terms of CEB currently married aged 15-49 years.

For the collection of information 120 households were selected from ward 8, by visiting door to door and necessary information were collected from 120 respondents of these households of Joshipur VDC, Kailali.

To examine the differential in fertility some selected demographic and socio-economic variables have been considered. Such as age at marriage, education, occupation, child loss experience of women and use of contraception were taken as independent variables and mean CEB was taken as dependent variables.

#### **6.1 Major Findings**

- Among 120 households, there were 909 people. Out of them, 53.1 percent were males and 46.9 percent were females.
- Out of 748 population aged 10 years and above, 57.4 percent were currently married, 39.0 percent were single, 3.2 percent were widow/widower and 0.4 percent were divorced.
- Out of 844 population aged 5 years and above, 59.2 percent were literate and 40.8 percent were illiterate.
- Out of them literate population 500, primary level population was found 47.20 and S.L.C. level population was 5.40 percent. After that, bachelor

and above was 3.00 percent. So, it was cleared that percent of lower level education was more than higher level education.

- Out of 734 population aged 10 years and above, 44.4 percent were involved in agriculture, 29.7 percent were student. Similarly, 9.9 percent, 5.7 percent, 3.5 percent, 1.4 percent and 1.1 percent were involved in daily wage, household worker's, Business, service and foreign employment respectively. But 3.7 percent were not stated.
- Out of the total population, 98.3 percent were Hindu and 1.7 percent were Christian.
- All the respondents were living in this own house.
- Most of the respondent's house was kacchi which was 72.5 percent and 27.5 percent respondent's house was pakki.
- Among 120 respondents, 96.7 percent had other land for agriculture and 3.3 percent had not other land for agriculture.
- Among the respondents who had their own land, 38.5 percent had 0-20 kattha of land followed by 20-40 kattha (27.6%), 40-60 kattha (7.8%), 60-80 kattha (5.2%), 80-100 kattha (6.0%) and 100 and above kattha (14.0%) respectively.
- Among the respondents, 99.2 percent had domestic animals, 0.8 percent had not domestic animals.
- Among the respondents (households), they had buffalo (52.1%), cows (22.7%), oxen (55.5%), Goats (63.0%) and Ducks/cocks (83.2%) etc.
- Among the respondents, 6.7 percent of the respondents had sold their domestic animals.
- Out of 100 percent household, 30.0 percent had toilet and 70.0 percent had not toilet.

- Among the respondents, 5.6 percent had traditional type of toilet and 94.4 percent had modern type of toilet.
- Out of total household, 99.2 percent had tube well for the source of drinking water. But, 0.8 percent had water tap.
- Majority of the respondents had electricity facility which was accounted for 88.3 percent followed by transport facility (73.3%), T.V. (45.8%) and Radio (44.2%).
- Out of 120 respondents, the highest 28.3 percent of the respondents was in age group 25-29 and lowest 2.5 percent of the respondents was in age group 15-19 and 45-49 respectively etc.
- Among the total respondents, only 12.5 percent were literate and 87.5 percent were illiterate. But, among literate respondents 13.3 percent of the respondents had got primary level which followed by lower secondary (33.3%), secondary (40.0%), S.L.C. (6.7%) and P.C.L. (6.7%). But any respondents had not above than P.C.L.
- Among total respondents, 72.5 percent were involved in agriculture sector. 14.2 percent and 13.2 percent were involved in daily wage and household worker's respectively.
- Among total respondents, only 70.0 percent respondent's husbands were involved in agriculture sector followed by daily wage 16.7 percent and 9.2 percent respondents husband were involved in business sector.
- Among total respondents, only 92.5 percent of women were married at the age of 15-19 years which was the highest percentage and 4.2 percent of women were married at the age of 20-24 years. But 3.3 percent of women were married at age of below 14 years whose percentage was lowest.

- Out of total respondents, only highest 25.8 percent were living together after marriage to continue 20-24 years. But lowest 1.7 percent were living together after marriage to continue 30-34 years.
- Out of 120 respondents, 85.0 percent respondents were age first menstruation at 10-14 years and 15.0 percent of respondents were age of first menstruation at 15-19 years.
- All the respondents had given birth of child.
- About 35.8 percent of the respondents had child loss experience.
- About 29.2 percent of the respondents had interested to give birth of additional child.
- Out of 35 respondents, only 5.7 percent respondents were pregnancy status.
- Among 100 percent of the respondents, majority of respondents 88.3 percent and 88.0 percent had heard about condom and male/female sterilization respectively. But the knowledge of Norplant had heard by few respondents than all which were 15.8 percent.
- Among the respondents who have heard about FP methods 79.2 percent each of the respondents had heard through health post and 68.3 percent of the respondents had heard through radio.
- Out of total respondents, 88.3 percent of the respondents were ever using of FP methods. Among them, majority of the respondents had ever used male/female sterilization of FP methods whose was 49.1 percent followed by condom (22.6%) and Depo-Provera (17.9%).
- Among spouses ever using FP methods, 77.6 percent of the respondents was wife and 22.6 percent of the respondents was husband.

- Out of total respondents, 10.0 percent of the respondents were currently using of FP methods. Among them, majority of the respondents were currently used condom whose was 66.7 percent followed by kamal chakki (16.7%).
- Among spouses currently using FP methods, 66.7 percent of the respondents was husband and 33.3 percent of the respondents was wife.
- Among 12 respondents, 66.7 percent of the respondents had got advice to use first FP methods from healthpost. And 16.7 percent respondents had got from hospital and doctors respectively.
- Among the respondents, 48.3 percent of the respondents had side to obtain contraception. Out of them, majority of the respondents was easy to obtain condom of contraception method which was 41.4 percent.
- Among 108 respondents, the highest 47.2 percent was found having reason due to side effect for not using contraception method. 17.6 percent respondents were not using FP methods due to want another child followed by lack of knowledge (13.9%), lack of money (12.0%). But 3.7 percent respondents were not using contraception methods because of others which can be due to family disagree.
- Among 108 respondents, 72.2 percent of the respondents will not be want to use any method in future and 27.8 percent of the respondents will be want to use any method in future.
- The mean CEB of 120 respondents (women) were found to be 3.3. The highest mean CEB (6.7) was found in the age group (45-49) and lowest mean CEB (1.8) was found in the age group of 15-19 years.
- The mean CEB of total respondents (literate women) were 2.3 and illiterate women were 3.4. Similarly, the mean CEB of the respondents (women) with primary was 3.0 and S.L.C. was 2.0 and P.C.L. was 1.0.

- The mean CEB of agriculture and daily wage occupation of women had 3.3 and 3.3 respectively.
- The mean CEB by husband's occupation of women were 3.5 and 3.2 in the sector of agriculture and daily wages respectively.
- The respondents who were married at the age of 15-19 years were higher (3.4) mean CEB and those who had married at the age of 20-24 years were lower (1.8) mean CEB.
- Among 120 respondents who was 0-4 years of living together after marriage whose mean CEB was 1.3 and years of living together after marriage was 20-24 years, those mean CEB was 4.4.
- Out of total respondents, 10-14 age at first menstruation of women had mean CEB (3.1) and 15-19 age at first menstruation of women had mean CEB (4.1).
- According to number of child loss experience of women whose mean CEB was increased, such as the respondents had one, two and three child loss experience respectively, whose mean CEB was increased (3.9), (5.1) and (6.0) respectively.
- Out of 120 respondents, who was ever using of FPMs, they were mean CEB (3.3) and who was not ever using of FPMs, they were mean CEB (3.2).

## **6.2 Conclusions**

In conclusion many characteristics about which information was obtained in field survey where were useful in analysis of fertility behaviours of women. The main conclusions from the analysis is stated below.



- Tharu women were more illiterate and those with literacy had also lower level of educational attainment and education was revealed as one of the major determinant of fertility.
- Higher age at marriage was associated with the cause of low fertility of ever married women. This study shows that lower the age at marriage results higher the fertility.
- The occupational status of women in Tharu community was directly correlated with fertility. Higher level of occupational plays an important role to reduce fertility. Dut to maximum involvement in agriculture and daily wage, which leads to higher fertility.
- The child loss experience of women was motivated to bear more and more babies.
- There was inverse relationship between contraceptive use and fertility behaviour. But in the study area all respondents was knowledge about contraceptive method.

### **6.3 Recommendations**

On the basis of the above findings and conclusion the following recommendations are made:

- From the present study, it was found that the literacy status of women of this Tharu community was very low (P.34). It was cleared that female education has important role for overall development and population control. It was to be noted that education of women the future mother lead to lower fertility behaviour with high information about FP programmes.
- Age at marriage was also low in this Tharu community which automatically increases fertility. So, the government and NGOs should be applied effective programme to raise the age at marriage.

- Tharu women was involved in agriculture and daily wage, which leads to higher fertility of women. Therefore, The government and NGOs should be given a variety of occupational opportunities for Tharu women, like as service sector and business sector, because it will help to reduce fertility of women.
- Child loss experience has found the strongest relationship with mean CEB. So, to reduce child loss experience, awareness programmes related child and maternal health should be launched , it is not only for fertility education, but programmes must be targeted to improve the health status of women of Tharu women. Besides this programme like mass immunization, sanitation, nutrition, child and maternal health care facilities, cheap medical facilities, mobile medical facilities and awareness on FP services should be lunched.

#### **6.4 Recommendation for Future Research Issues**

This study has examined to find the fertility behaviour of Tharu community in Joshipur VDC, Kailali in terms of different socio-economic and demographic variables.

It is based on only Joshipur VDC, but this type of study can be done in other area of Nepal taking the large area applying different analysis method. This type of study may produce different new result and probably that result can describe the fertility behaviour of the people of Nepal in various ways.

Tharu communities are found in other area of Nepal. In some aspects they are similar to each other and in some aspects they are different from others. A detailed study on Tharu community with appropriate and nationally representative sample is required. So, this study is restricted only 120 respondents to study about this area.

But, this study is based on limited socio-economic and demographic variables. Other variables like ecological, biological, physiological, sex preference and cultural variables can be taken into consideration as future research issue.

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