



**FERTILITY BEHAVIOUR OF BHOTE COMMUNITY A CASE STUDY OF
HATIYA VDC , SANKHUWASAVA DISTRICT**

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Recommendation

This is to certify that the dissertation entitled "*Fertility Behaviour of Bhote Community A Case Study of Hatiya VDC , Sankhuwa Sabha District*" is prepared by Mr. Raj Kumar Chapagain under my supervision. He has collected the primary data for this purpose in Bhote communities and completed successfully the requirements for dissertation in Master of Arts in Population Studies.

I recommend this dissertation for evaluation to the Dissertation Committee.

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Abstract

This study aims to examine the fertility behaviour of indigenous community. It presents the findings from analysis of interviewed data from Hatiya VDC, Sankhuwa-Sabha district. The sample population of this study is 121 women of reproductive ages 15-49 of Bhote community. Data were obtained on household and individual information related to explain fertility performance from the survey conducted during August 2009.

and female children aged under 5 were only 56 in Bhote community in study area. Analysis of fertility behaviour was carried out by using cross tables and mean tables with selected dependent and independent variables. Children ever born (CEB) were used as an indicator of fertility behaviour.

In the sample population of indigenous community, 52.60% were males and 47.12% were females. The family size of this community was 5.5 per house. Out of the 590 total population, the male.

Among the 121 respondents highest percent (7.63) were found in age group 20-24 and lowest percent (0.68) in age group 60+. Among the reproductive age 15-49 years of 451 population, 76.27 percent were already married and 23.73 percent were unmarried.

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CHAPTER –ONE

1.1 General Background

Fertility is one of the major components of population change. It is biological process which is determined by socio-economic, cultural factors, such as: women education, age at marriage contraceptive, health and employment (Bongaarts 1983). Fertility is related to mortality, if the fertility rate is high, population size increase but if the mortality rate is high population size decrease. In the global context fertility is different from developed and developing countries.

Fertility is the childbearing performance of individuals, couples, group or population. It is contrasted with fecundity, the theoretical capacity to reproduce, which may or may not lead to refer to the most general analysis of childbearing, though this usage is becoming less common and the term of reproduction measure of fertility normally refers only to live birth (Pressat 1985)

Health, family planning and educational institution are regards as mediator of fertility and mortality behaviour. Hence the relationship between fertility and mortality behaviour seen in the wider context in which main social factors are taken into account at both the individual and social levels. which have an impact on child survival and fertility relationship (UN,1994)

Socio-economic and socio cultural factors affect fertility. fertility encouraging factors are currently marriage and positive value of marriage,

family life and procreation, high value of children, son preference, low status of validation and security for men and women during old age, some of fertility is discouraging are sexually abstinence on certain occasions, age separation of spouses for long period of time and education and employment of women outside home (Dahal,1992:1-5)

One of the most important indicator of women's employment is control over this own fertility. Women's bodies have been used and abused on account their fertility. In Hindu tradition woman are worshiped for their fertility. In the exalted status of mother goodness. While infertility is considered a curse (Bannat, 1983; Cascara, Billy and West, 1986). Pregnancies, child birth and lactation force women to withdraw from economic active work thus making them depend on other member of society. Frequent pregnancies impinge on their health and sometimes even on their very live. It is therefore most important to examine weather women have control over their own fertility.

1.2 Statement of the Problem

Most of the developing countries of the world are facing the problem of rapid population growth due to the high fertility rates. It creates many problems, e.g. starvation, high mother and child mortality rate, low level of living standard, unemployment, and problems in education, socio-economic problems. Similarly it also creates different kinds of pollutions.

There is high fertility rate in Nepal. According to 2001 census, the total fertility rate (TFR) of Nepal is recorded as 4.6 per women. The NDHS 2006 shows the total fertility rate (TFR) of Nepal as 3.1 per women. It has

become serious problem, the socio-economic and demographic conditions are adversely affected.

The burning causes of rapid growth in fertility are: low age at marriage, lack of knowledge in the use of contraceptive devices, unemployment. Conservative beliefs are also other variables. Their traditional occupation, agricultural workers low level of income, domestic workers etc. and which are also the same causes of Bhote communities in the study area. Biological behaviors are also very helpful to fertility behavior of Bhote community, that is why it must be reduced in reasonable way and that is possible through the development of social-economic Status of people and awakening the people of effective implication of family planning programme.

There are several studies related to fertility behavior in different ethnic groups but there is no study carried out on Bhote community so, this study will be very helpful for any scholars who want to study and to run their study about this community on the related topic. If this study wouldn't be carried out then we would miss these facts about study area of Bhote community in related topic.

If the research is not carried out on the facts then we can't get the actual problems. As this study is a fact based study. It gives total description of Bhote communities Related to the topic.

1.3 Objective of the Study

The general objective of the study is assessing the fertility behavior

of Bhote community of Syaksila 6, Hatiya VDC , Sankhuwa-sabha district. The specific objectives of the study are as fallows :

- To explore the demographic and socio-economic characteristic of Bhote community.
- To examine female education, occupation, and age at marriage, family planning and its relation with fertility
- To explain the relationship between CEB and some demographic and socio-economic characteristics.

1.4 Significance of the Study

The main purpose of this study is to find out to various socio economic and demographic aspects of fertility behavior of Bhote community in Hatiya VDC. The Bhote community is situated in Sankhuwa-Sabha, Dhankuta, Tanahu , Jumla, Dolpa, Surkhet etc. According to the census of 2001, Bhote population are 19,261. The verification of the demographic and socio economic characteristics on fertility behavior may help researchers, administrators and policy makers in their areas. Not only this study provides recent data on fertility which may help the policy to get in sight into population dynamics. ON the other hand there are quite a few studies with analyzed the fertility or certain specified communities of nation so that this study provide the people, who are concerned to Bhote community, NGO\INGO planner and policy maker to formulate the more stable and suitable policies. This study will be more useful for further researchers who tend to study this community.

1.5 Limitation of The Study

-) This study is limited to fertility behaviors of Bhote community only in Hatiya VDC, ward No 6 Syaksila, of Sankhuwa-sava district.
-) This study is limited to the general socio-economic study of the age group of people especially to the currently married women aged 15-49 years.
-) In this study merely some demography and socio-economic variables are considered to explain fertility behavior in term of CEB.
-) The study was conducted in a small area that the primary objective of the partial fulfillment of the master degree required in population. Therefore, detail research was not possible. So the finding may not be generalized for other groups of people through out the country.

1.6 Organizations

This study is organized into six major chapters. The first chapter deals with general background of the study, significant of the study, limitation of the study and organization .The second chapter deals with the literature review and conceptual framework for the study .The third chapter describes the methodology. It includes background of the study area, sample design, source of data, questionnaire design, and procedure of data and data analysis. The fourth chapter deals with socio-economic and demographic characteristics of the population and respondents. The fifth chapter deals analysis of fertility of currently married women by socio-economic and demographic variables and the six chapters presents the summary, conclusion and recommendation.

CHAPTER-TWO

LITERATURE REVIEW

2.1 Theoretical review

Nepalese society was ethnically diverse and complex in the early 1990s, ranging in phenotype (physical characteristics) and culture from the Indian to the Tibetan. Political scientists Joshi and Rose broadly classify the Nepalese population into three major ethnic groups in terms of their origin: Indo-Nepalese, Tibeto-Nepalese, and indigenous Nepalese.

The second major group consisted of communities of Tibeto-Mongol origin occupying the higher hills from the west to the east.

The Bhote or Bhotia groups inhabiting the foothills of the Himalayas--among whom the Sherpas have attracted the most attention in the mountaineering world--have developed regional distinctions among themselves, although clearly related physically as well as culturally to the Tibetans. The term Bhote literally means inhabitant of Bhot, a Sanskrit term for the trans-Himalayan region of Nepal, or the Tibetan region. However, Bhote is also a generic term, often applied to people of Tibetan culture or Mongoloid phenotype. As used by the Paharis and the Newars, it often had a pejorative connotation and could be applied to any non-Hindu of Mongoloid appearance.

An extraordinarily complex terrain also affected the geographic distribution and interaction among various ethnic groups. Within the general latitudinal sorting of Indo-Nepalese (lower hills) and Tibeto-Nepalese (higher hills and mountains) groups, there was a lateral (longitudinal) pattern, in which

various ethnic populations were concentrated in specific geographic pockets. The deeply cut valleys and high ridges tended to divide ethnic groups into many small, relatively isolated, and more or less self-contained communities. This pattern was especially prominent among the Tibeto-Nepalese population. For example, the Bhote group was found in the far north, trans-Himalayan section of the Mountain Region, close to the Tibetan border. The Sherpas, a subgroup within the Bhote, were concentrated in the northeast, around the Mount Everest area. To the south of their areas were other Tibeto-Nepalese ethnic groups the Gurung in the west-central hills and the Tamang and Rai in the east-central hills particularly close to and east of the Kathmandu Valley. The Magar group, found largely in the central hills, was much more widely distributed than the Gurung, Tamang, and Rai. In the areas occupied by the Limbu and Rai peoples, the Limbu domain was located farther east in the hills, just beyond the Rai zone. The Tharu group was found in the Tarai, and the Paharis were scattered throughout Nepal. Newars largely were concentrated in the Kathmandu Valley. However, because of their past migration as traders and merchants, they also were found in virtually all the market centers, especially in the hills, and as far away as Lhasa in Tibet.

This geographically concentrated ethnic distribution pattern generally remained in effect in the early 1990s, despite a trend toward increasing spatial mobility and relocating ethnic populations. For example, a large number of Bhotes (also called Mananges from the Manang District) in the central section of the Mountain Region, Tamangs, and Sherpas have moved to the Kathmandu Valley. Similarly, Thakalis from the Mustang District adjacent to Manang have moved to Pokhara, a major urban center in the hills

about 160 kilometers west of Kathmandu, and to Butawal and Siddhartha Nagar, two important urban areas in the central part of the Tarai, directly south of Pokhara. Gurungs, Magars, and Rais also have become increasingly dispersed.

Although Paharis, especially those in rural areas, were generally quite conscious of their caste status, the question of caste did not usually arise for Tibeto-Nepalese communities unless they were aware of the Hindu caste status arbitrarily assigned to them. In so far as they accepted caste-based notions of social rank, the Tibeto-Nepalese tended not only to see themselves at a higher level than did the Hindu Pahari and Newar, but also differed as to ranking among themselves. Thus, it was doubtful that the reported Rai caste's assumption of rank superiority over the Magar and Gurung castes was accepted by the two latter groups. Moreover, the status of a particular group was apt to vary from place to place, depending on its relative demographic size, wealth, and local power.

The Bhote region is where the Arun River enters Nepal from Tibet, and is situated to the north of the district of Sankhuwa-sabha. The inhabitants of Bhote are called Shingsaapas or Shingsa. They enjoy cultural and social affinity and geographical proximity with the Sherpas and other northerners. They adhere to Bon and Buddhism. The village headman is called Goba and Gempoo. They migrate to the lower hills during winter. Most are engaged in farming and some are in trade. The Bhote society had already been formed in Darjeeling in India as far back as circa 1914.

The Bhote, who live on the steep terraces on both sides of the deep canyon made by the Arun River as it enters Nepal from Tibet, call themselves

Shingsa. As the place is also known as Singhsa the people living in that place, the Shingsa or Karbhotas, are also known as Singhsapa, of Snakhuwa-sabha. Among the various indigenous people living in the northern part of country, the area inhabited by is considered the most difficult. Although the lifestyle of the Shingsapas is similar to the Tibetans to the north, they also display some of their own specialties. The Shingsapas live in the half a dozen villages of Kimathanka, Chepuwa, Hatiya, pawakhola, etc in the northern part of Sankhuwa-sabha on the two sides of the Arun River and Barun River. They are a small minority group living in a remote area. Their population has not been enumerated separately in the censuses.

The Bhotas have own separate language called Shingsapaki-keyk, similar with Tibetan or sherpa language with some local dialectal variations. The Shingsapas do have special ceremonies prior to marriage, and the formal ceremony related to marriage. The wife's family and relatives offer gifts. If a husband takes another wife, he has to leave the household. The head of the village, Goba, also receives marriage tax. After death and during cremation the Lama and Loben have a considerable role to play. The houses of Bhotas are made of stone, wood and bamboo. The Bhotas go down to the plains to trade during winter but do not have much trade contacts with the north.

The Bhotas have many subgroups made up of various family groups like the Thikeppa, Nuppa, Khumbuwa, Pongsuwa, Bhoecha, Nava and Chyaba. The head of social organizations is the Goba and Gembu. They undertake various functions of the village like administration, protection, collecting of taxes, punishment, etc. Although the Bhotas are Buddhist, they believe in

ghosts and spirits and have deep faith in shamans. They practice animal sacrifice in all ritual. When people and cattle die, they call upon shamans believing that the deaths occurred because the ghost became angry or the dead became inflicted with ghosts and spirits. There are monasteries in every village, and the Bhote had received the government's seal to collect tax in the village. They collect taxes from bridges, land and honey hunter. The Bhote cut goat in the months of Jestha and Bhadau and celebrate. The occupation of Bhote is farming and raising livestock, which includes the raising of sheep. They are not till now involved like the Sherpas and others, guides to tourists and Everest summiteers. The Bhotes go to the southern districts like Sunsari, Saptari and during the winter months to engage in trade. Bhote and Sherpas have been recorded as the same group of ethnicity according to the national census of Nepal and Bhote's population has not groups with each other. been enumerated separately. The total population of this VDC is 3096. Among them, 2295 are Bhote. According to the national census 0.66 of total population speak their mother tongue and CBS 2001 has indicated to national census 2001, 101 ethnic groups have been identified, Nepal is multi language country; each ethnic group contains separate Lange defined by mother tongue. The total fertility rate of Nepal was 6.3 in 1981 and reached 5.6 in 1991 and 4.1 in 2001 (CBS 2003) .The TFR is higher than other SAARC countries.

In the respect of fertility behavior Kinsley Davids and Judith Blake have give their own strong Definition in 1956 in the title "structure and fertility, an analytical framework", where they have categorized the main biological events in three main division, all of them constitute all together eleven variables which are related to phenomena of fertility, this variables are

centered around intercourse, conception and gestation .As each process is biological, cultural and economic factors, these affect all the stages child bearing and these eleven intermediate variables have been categorized into three main group which are as follows.

1. Factor affecting to inter-course (intercourse variables)
2. Factor affecting exposure to conception (conception variables)
3. Factor affecting gestation and successful parturition (gestation variables)

These variables can play either positive or negative effect on fertility; the fertility level in any society is determined by combined effect of all these variables. So, all of these variables are presented in every society.

Even John Bongaarts has also identified direct determinants of fertility which he called "proximate determinants of fertility"

According to John Bongaarts and Robert Potter, "the proximate determinants of fertility are the biological and behavioral factors through which social, economic and environmental variables affect fertility." They identified seven proximate determining variables affecting fertility which are age at marriage and marital disputation, one set of permanent sterility, duration of postpartum Infecundability, use and effectiveness of contraception, spontaneous intrauterine mortality and induced abortion. These four proximate determinants are very active in determining the fertility (MOPE 2000, 27)

In the same way, United Nation also developed the threshold hypothesis in 1970 by unearthing, its short comings and especially studies the relationship

between the level of fertility and various indicators at the level of socio-economic development. This study based on the data called from various countries having different levels of gross reproduction rate. The following twelve indicators of socio-economic development were used:

- Per capita income
- Energy consummation
- Urbanization
- Non agricultural activities
- Hospital beds
- Life expectancy at birth
- Infant mortality
- Early marriage
- Female literacy
- News paper circulation
- Radio receiver
- Cinema attendance.

This hypothesis categorizes all the countries into two groups Viz -countries having high fertility and countries having low fertility. The developing countries are considered having high fertility and developed countries are supported of having low fertility. That is why the countries with initially high fertility will not experience a fertility decline even with some socio-economic development; however, the fertility decline will be initiated in a certain level of socio-economic infrastructural development. And, after this achievement, the fertility steadily decline to a much lower plane.

Among them per capita income, newspaper circulation, radio, receiver and female literacy are more catalytic indicators of the reduction of fertility (Gobwin R Kenneth,1969).

In the same way J.C Caldwell too has developed the theory of intermediate wealth flow in regarded to fertility which is known as the "Theory of intergenerational wealth flow"

According to this theory, in a society the fertility is high if the children are taken economically useful to parents and fertility is low if the children are not taken economically beneficial to the parents. So, it is vivid that in primitive society, the direction of economic flow is from children to parents and in modern society, the direction of economic flow is just opposite that is from parents to children. That is why, this intergenerational economic flow is determined by the social conditions. The economic advantages to the parents have been identified in different six main points.

The theory of demographic transition is based on the actual demographic experience of western countries this theory is presented by Frank Notestein in 1945 (advanced) described the transition from high to low fertility representing a shift from natural fertility to family limitation (Libenstein, 1998:96) . The countries of Europe and North America, this transition is supported by the ethnic norms, laws, structure and relations in the community and family according to religious doctrines. Thus, the theory stimulated a number of studies that analyzed the relationship between socio-economic development and fertility. In the countries of being popularized demographic transition, fertility decline was mainly due to the declines in death rate and family limitation norms resulting .The process of

modernization which involves raising living standard of life, raising income, raising education and advances in sanitation and medical knowledge (UN, 1979:59)

Arsine Dumont (1965) formulated the principle of "social capillarity". He believed that wakening of to procreate was caused by the progress of civilization an attributed to the progress of civilization an attributed to the reduction in family size to the individual's ambition to improve his position in society as a column of liquid rise under the force of capillarity in the tube. The development of individualism and desire for personal improvement stimulate couple to have fewer children and hence fertility of the societies declines (UN 1973, 54-55).

J.M. Tuladhar (1989) examined the persistence of high fertility in Nepal using data from Nepal fertility survey, 1976. He found that higher mortality levels especially of infants, joint family system, early and universal marriage system, low educational attainment and working status especially of women are the main contributing factors of high fertility in Nepal.

Between the husband and wife communication regarded as one of the responses for not using contraception in Latin America and Asian societies (Tuladhar, 1989,210-212). The majority of currently married women in Nepal reported that they never discussed about family size with their husband. The proportion of women who have had communication with their spouses was higher among the younger and the educated than among the older and uneducated women.

Dahal (1992) analyzed the determining factors of high fertility and found that in Nepali society high economic and social value of children, low education and social status of women, poor health and insufficient nutritional intake, inaccessibility of quality family planning and its unmet demand are the determining factors of high fertility in Nepal.

2.2 Empirical Review

Most of the developing countries like Nepal have low level of mortality rate and high level of fertility. Most of the studies in fertility which attempt to summarize the studies regarding the determinants of fertility are selected and presented as follows.

Educational Attainment and Fertility

Education is directly determining fertility behavior of human being. These two variables are inversely proportion if higher the levels of education for women. They are usually associated with a higher age at marriage. It may also be noted that the higher level of education provide a higher level of information as out keeping fertility under control and create and sustain motivation to keep small family size Higher level educated mothers do not the baby and fertility is reduced

Education has been considered as a catalytic agent to reduce fertility in Nepal. Educated women are more aware of the issue of quality of children than non educated in Nepal, the average number of CEB is 1.9 for literate women especially for primary education and 1.5 for graduate which is lower the literate with children ever born 2.8(CBS 1991)

The World Bank Survey 1984, selected 3000 households randomly selected from three districts of Kerala state India and showed that the average number of CEB was lower for better educated than for the illiterate, which is 2.1 for the women with 10 or more years of schooling and 4.5 for women with no schooling. Analysis of 1990/91 Pakistan Demographic and Health Survey (PDHS) data resulted that age specific fertility rates (ASFR) were inversely related to educational level of mother, however the association was more consistent in urban than in rural areas.(UN, 1993:11-13) .

Family Health Survey 1996 explained a strong relationship between education and fertility. Women with at least some secondary education have total fertility rate of 5.1 whereas women with primary education have total fertility rate of 3.9 per women (MOH,1996).These data indicates that the highest total fertility rate is observed for the women with no education. Nepal family and Health Survey 1996 also indicate the wife's education status more instrumental in reducing fertility than husband's.

In Nepal, women with no education have 3.5 CEB, primary education 2.4 and secondary education have 2.1 only; similarly, CEB of women whose husband is literate has 3.6 with primary education 3.1 and 2.7 with secondary education (Acharya, 2000). So, higher the educational attainment lower the fertility, lower the educational status higher the fertility.

Occupation and Fertility

Female having different occupation is found to have different level of fertility in Nepal. The employment of the women outside the home reduces the level of fertility behavior .If the women are employed they have a

smaller number of children than who are not employed. Women who have smaller number of children tend to take paid jobs outside their homes or those who have already paid jobs restrict their family size to the very minimum. (UN,1987) ,found that in every region women with occupation in the modern sector of economy had smallest number of children over born than women involved in traditional sector of economy . Those who had never worked had on an average likely to have mire children than women involved in any of the occupational group. In oceanic countries the differences in means CEB was found to be 2.2 children between women who worked and who did not.

The setting of work and occupation are determining factors for fertility differentials. If the wife works at home, she is likely to have virtually identical to that of women not in the labor force and if she works away from home she is likely to have a significantly low fertility (Shanjuta and Mathur, 1989:324-334). In India (1981), the study by family planning program found that total fertility rate for the working women was found to be 3.85 in rural and 2.25 in urban area whereas corresponding figure for non working women were 4.76 and 3.27 respectively (Shanjuta and Mathur, 1989).In Latin America and Caribbean where women who never worked had 2.7 more children than women who were employed in modern occupation (UN, 1987).

Nepal is agriculture based country. A large proportion of the country's labor force is involved in agriculture while very small proportion is in non agriculture sector. Most of the female are in unproductive sector. In Nepal 90 percent of the economically active female population is engaged in agriculture, whereas less than one percent of them work as professional and

technicians. Even those employed in professional and technical sectors are generally lowered level and low paid job.

The professional workers have mean age at marriage of 19.8 years compared to administrative workers having mean age at marriage of 20.2 years. Lowest mean age at marriage of 17.1 years is found for the women who work in farm and agriculture (Risal and Shrestha, 1989:56). Women whose occupation is farming and fishing gave highest fertility level. Their average mean number of CEB is 2.7 forever married women which is only 1.6 for the professional and technical, administrative and clerical workers. (MOH, 1995).

Cultural, Religious Value and Fertility

Different fertility can be observed in the different cultural and religious societies. By culture and religious Nepali society is pro-natalist (Dahal, 1987). A major cultural component of Nepali women is child bearer. A woman becomes real women only when she performs her role as mother and her status is fully validated after the successful birth of many children specially sons and childlessness is a curse (Dahal, 1987). Total marital fertility has observed different among different caste and ethnicity groups. For example total marital fertility rate (TMFR) for Brahmin was 5.67 for Chettri was 6.07, for Newar was 4.89 and for Tamang was 7.5 (Niraula and Shrestha, 1997:24).

Age at Marriage and Fertility

Fertility and age at marriage are inversely related in Nepal. Marriage is cohabitation of two opposite sexes. In Nepal, age at marriage is found to be

lower, for females were 15.4 and 19.5 years for males (MOPE, 2002). Nepalese society does not allow the sexual union of unmarried people. So, marriage is the most essential in our society. Nepal is multi-lingual, multi-religions and multi-ethnic society. According to the age and their religion, age at marriage and CEB are different.

A study claims that women marrying between 20-24 have similar fertility that or those marrying before age 20, only if the marriage age reached 35 or over would there be a significant reduction of fertility. Perhaps this is one of the reasons for persistent high fertility in Nepal (Karki, 2003).

The number of CEB affects the socio-economic condition of the people in the country. Empirical studies have been shown that number of CEB and poverty are positively associated. The maternity health and family planning are interrelated and they have together an impact on the quality of population. According to NLSS 2003/04, the mean number of CEB per women is estimated to be 2.4. As expected this increases with age group of women. Rural areas have more children per women relatively to urban areas TFR for Nepalese estimated 83.4 urban areas have a much lower rate of 3.8. According to Census 2001 the TFR range from 3.7 to 3.9 (CBS, NLSS, 2003/04).

Contraception and Fertility

Family planning awareness helps to control population growth in the country. Nepal living standard survey (NLSS II) estimates 71 percent of women aged 15-49 years are knowledgeable about at least one of the FP methods, 46 percent have ever used it and 30 percent are currently using

some from of planning methods. As one would expect, the proportion of women of knowledge of at least one of the FP methods is higher in urban areas than in rural areas (91 percent versus 74 percent). Such knowledge is likely to be higher among younger cohorts, and among richer quintal groups. The current use rate of family planning is higher among women aged 35-39 years. This is higher among those from richer households. Radio is the most common media of information about family planning .The majority of women, 38 percent reported radio as the source of information about family planning methods followed by friends, relatives (24%), television (7%) and newspaper (3%). In response to the question asked to women aged (15-49) years on the type of family planning methods currently using either by them or by their husbands, 33% reported laparoscopy minilap, 20% Vasectomy, 39%, other temporary methods and only 8% Condom. Among 60% of users of family planning methods visit public health institutions 5% and health workers (4%).Such a pattern is observed in all developmental regions, ecological zones, age groups, age groups and conception quintiles. However, after Public health institution, pharmacy is more popular in urban areas and the richest quintile (CBS/NLSS, 2003/04).

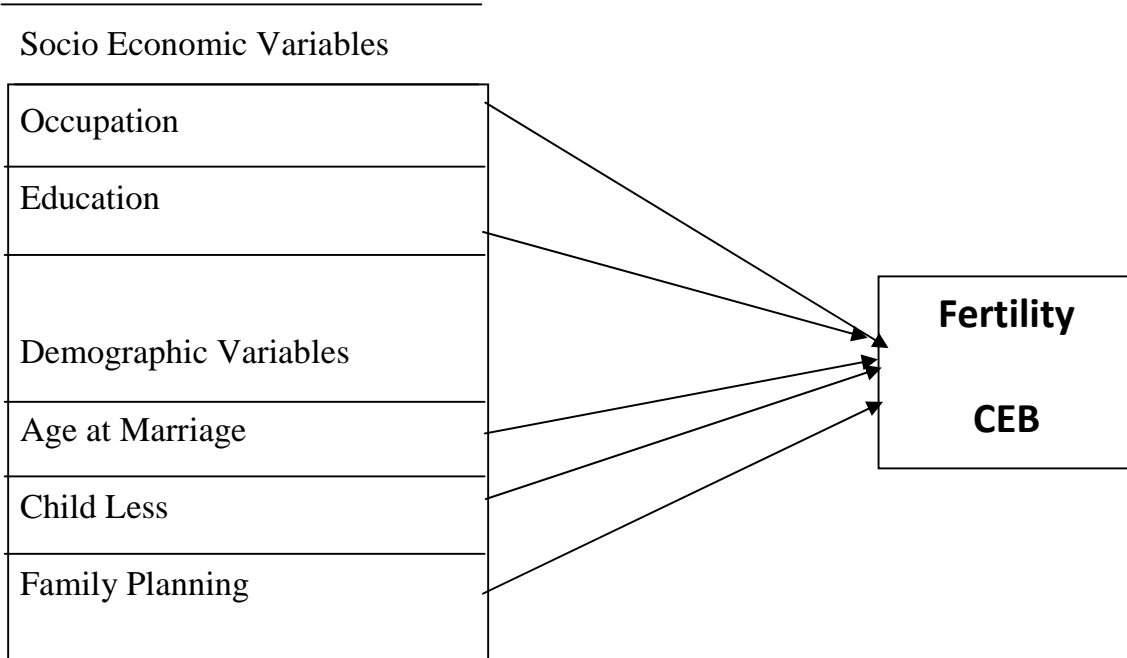
2.3 Conceptual Framework

The research framework set out in figure considered that, education and occupation are socio-economic variable and age at marriage; child loss experience and family planning are demographic variables which determined the level of fertility. In this framework, fertility is dependent variable and socio-economic and demographic variables are independent variables as fertility.

Conceptual Framework for Analysis of Fertility

Independent Variables

Dependent Variables



CHAPTER THREE

METHODOLOGY

3.1 Study Area

The study area was selected as 'Hatiya' VDC ward no. 6 Syaksila, Sankhuwa-Sabha district in eastern part of Nepal. The VDC lies in the Northern part of Sankhuwa Sabha district. It is very remote area of Sankhuwa-Sabha district. It is very far from districts headquarter Khandbari. It touches Pawakhola VDC and Chepuwa VDC as in the east, 'Makalu' VDC in the west. Similarly it touches Kimathanka VDC in the northern side and in south, Pathibhara VDC lies.

There are many casts, ethnic and religious groups of people having different socio-economic and demographic characteristics living in Hatiya VDC such as Rai, Gurung, Tamang, Dalit, Sherpa and Bhote. No study has yet been conducted on the fertility behaviour of 'Bhote' women living in this VDC. It was necessary to know the level of fertility situation of the Bhote women in this area. The study was conducted only among Bhote community, which is backward in the socio-economic and demographic aspects.

3.2 Data Collection Method

The data collection method is purposive. This study is based on the census. It was more suitable for this study because of small universe of Bhote community. This study focuses on fertility behaviour of currently married women age of 15-49 years, in Hatiya VDC Bhote community, ward no 6.

The total number of households of the study area is 121 and sample size is also 121 because I found only 121 married women reproductive age (15-49 years) in the selected households.

3.3 Questionnaire Design

There are different types of questionnaire which can be used to collect required information. Some of them are: structured questionnaire and non structured questionnaire. This study has used mixed questionnaire for the study of fertility behaviour of Bhote community, the question has been divided into different groups.

Household information: family information and demographic information have been included in this groups.

Demographic information: home, age, age at marriage, education, occupation, number of sons and daughters, knowledge, attitude and use of family planning, source of information, use and non -use of family planning has been included .

3.4 Method of Data Analysis

The quality of any research work depends upon the techniques; used to analyze and present the data. The data have been collected in files according to its research design. For this crude data are collected from questionnaire which were carefully edited, checked and coded before they were entered into the computer and tabulated as the need of report.

CHAPTER-FOUR

DEMOGRAPHIC AND SOCIO-ECONOMIC

CHARACTERISTICS

4.1 Background Characteristics of population

This Unit describes the general demographic and socio-economic characteristics of Bhote people living in Hatiya VDC representing socio-economic status affecting fertility among Bhote community.

4.1 Respondent characteristics

4.1.1 Age-Sex Structure

Age sex structure of population plays significant role in demography. It provides the information of population in different age groups at particular period. Similarly, age-sex structure of the population is the vital variables in study of population dynamics. The age-sex structure is given below in table number 4.1.

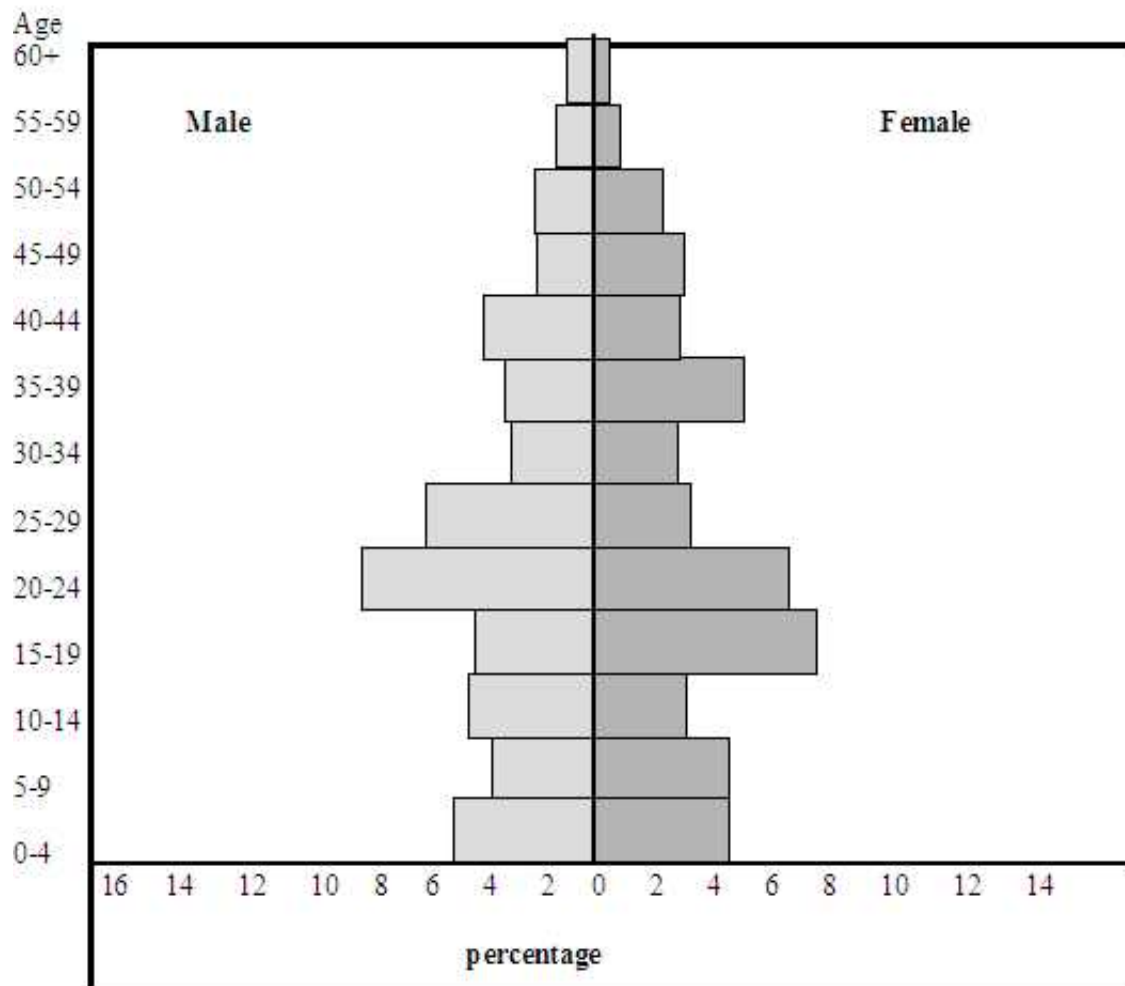
Table No. 4.1 Age-Sex Structure of Study Population

Age group of population	Sex of the population				Total	
	Male		Female		Number	percent
	Number	percent	Number	percent		
0-4	31	5.25	25	4.24	56	9.49
5-9	24	4.07	27	4.58	51	8.64
10-14	28	4.75	19	3.22	47	7.96
15-19	27	4.58	45	7.63	72	12.20
20-24	49	8.31	38	6.44	87	14.74
25-29	37	6.27	21	3.56	58	9.83
30-34	20	3.39	18	3.50	38	6.44
35-39	22	3.73	27	4.58	49	8.30
40-44	24	4.07	17	2.88	31	5.25
45-49	13	2.20	20	3.39	33	5.60
50-54	14	2.37	12	2.03	26	4.40
55-59	11	1.86	5	0.85	16	2.71
60+	9	1.53	4	0.68	13	2.20
Total	312	52.60	278	47.40	590	100

Source: Field survey, 2009

Age-Sex structured of population is important variable for study of fertility. These study covers the 121 households as sample population. The table number 4.1 indicates that the highest proportion of population found in age group 20-24 (14.74%) followed by age group of age 15-19(12.20%).Similarly, lower proportion of population was found in age group s60+(2.20%) indicating low life expectancy at birth.

Figure no. 4.1.2.1 population pyramid



4.1.2 Educational Status of the Study Population

Education is the major or basic requirement for the social, political and economic development. Education plays vital role in the socio-economic status of the community. Educational status will be use full in analysis relating to change in fertility. Therefore, it is important to know the educational status of people of the study area. The question about educational attainment was asked to the persons aged 6 years and above.]

Table No. 4.2 Distribution of population by Educational Status

Educational status	Number	percentage
Literate	295	57.72
Illiterate	216	42.28
Total	511	100.00
Educational attainment		
Primary	213	72..20
Secondary	76	42.28
Higher	6	2.04
Total	295	100.00

Source: Field Survey, 2009

According to above table it is known that more than half (57.72%) respondents are literate and near about (42.28%) are illiterate. Similarly, (72%) respondents have attained primary level of education nearly 42.28 have attained secondary and only 2.04 percent respondents have attained higher level of education

4.1.3 Marital status of study population

Marriage is the primary event in the process of family formation. The marital status of the study population is presented under the following table

Table No. 4.3 Distribution of population age by Marital Status

Marital status	Number	Percentage
Married	334	76.27
Unmarried	107	23.73
Total	441	100.00

Source: Field Survey, 2009

Above table shows that out of total population majority 76.27% people are married and rest 23.7 are unmarried in study areas. In this table highest proportion of people are married which directly affects the fertility level.

4.2 Background Characteristics of Respondents

Before analyzing the fertility behaviours of people, demographic and socio-economic characteristics of the respondents are studied. Various socio-economic and demographic characteristics of respondents are analyzed in this sub-section.

4.2.1 Age Distribution

Age of women is very important factor for determining fertility. The age distribution of respondents is presented presented under following table

Table No. 4.4 Distribution of Respondents by Age Group

Age group	Number	percentage
15-19	9	7.43
20-24	19	15.71
25-29	16	13.23
30-34	17	14.04
35-39	24	19.83
40-44	16	13.23
45-49	20	16.53
Total	121	100.0

Sourc: Field Survey, 2009

Table 4.4 shows that eligible women respondents are divided in the different 5 years age group. The highest percent (19.83%) of the eligible women are group 35-39 and second highest percent is in age group 45-49. The least majority (7.43%) of eligible women seems in the eligible 15-19 and in 20 years age group the eligible women are nearly 16 percent.

4.2.2 Family Size

Family refers to group of members living in one household bounded by blood, marriage or adoption. It is small unit of society. There is no any fix period when family system was started but it is generally believed that it was started from beginning of Stone Age. Nobody can live with in the position of alone, so family was significance role in human society similarly; family size refers to total number or member who lives in family together. Size differs from one society to another as well as developing to developed region. Nuclear family trend is popular in developed country. It seems just opposite but due to development, modernization, family size is going to be limited in developing world also. The family size was observed in study area presented under the following table.

Table no. 4.5 Distribution of Respondents by Family Size

Family Size	Number	Percent
1-4	17	14.4
5-6	85	70.24
7-12	19	15.72
Total	121	100.00

Source; Field Survey,2009

Above table indicates that more than 70 percent households have 5-6 family members living together, 15.72 Percent have 7-12 family members and rest 14.4 percent have 1-4 family members. It is clear that small as well as large family system seems to be in trend in this study area.

Educational Status

Educational qualification is vital indicators of the fertility of women. Generally an educated woman naturally has better communication with her husband about contraception and number of children. The distribution of eligible respondents by educational status is given below.

Table No. 4.6 Distribution of Respondents by Educational Status

Educational Status	Eligible women	Percent
Literate	23	19.00
Illiterate	98	81.00
Total	121	100.00
Educational attainment		
Primary	17	73.91
Secondary	6	26.09
Higher	-	-
Total	23	100.00

Source: Field Survey, 2009

Above table shows that nearly (19%) eligible women are literate and (81%) are illiterate. Out of 23 eligible literate women, 17 eligible women have attained primary level education and 6 have attained secondary level of education.

Age at Marriage

In Nepal marriage takes place in early ages and it is almost universal. Universal marriage practice leads to long term social and economic consequences including higher fertility. The distribution of women by age at marriage has been classified by age group, which is presented under following table.

Table No. 4.7 Distribution of Respondents by Age at Marriage

Age at marriage	Number	percentage
10-14	7	5.78
15-19	91	75.22
20-24	21	17.35
25-29	2	1.65
Total	121	100.00

Source:Field Survey, 2009

The average mean age at marriage of study area is 17.74 year. Above table shows that majority of respondents (75.22%) are married during the period 15-19 years, (17.35%) are married during 20-24 years, (5.78 %) are in 10-14 years and rest (1.65%) respondents are married in period 25-29 years. It clears that early age marriage trend seems in the study area which affects the fertility level of women.

4.2.4 Source of Drinking Water

One question was asked about source of drinking water to respondents in study area which information is presented as below.

Source of drinking water	Number	Percent
---------------------------------	---------------	----------------

Dug well	20	16.52
Tap	25	20.66
River/Steam	76	62.82
Total	121	110.00

Table No. 4.8 Distribution of respondents by source of drinking water

Source: Field Survey, 2009

Table 4.8 shows that nearly 63 percent reported river/steam of their source of drinking water .Similarly (16.52%) reported dug well as source of drinking water and similarly (20.66%) reported Tap as the source of drinking water.

4.2.5 Religion

Nepal is multi religious country. Level of fertility is directly affected by religion. In study area the status of respondents in terms of religion is given under following table.

Table No. 4.9 Distribution of respondents by religion

Religion	Number	Percent
Hindu	1	0.83
Buddhist	120	99.17
Total	121	100.00

Source; Field Survey, 2009

Table given above shows that (99.17%) respondents are Buddhists and remaining only (0.83%) of them are Hindus.

4.2.5 Occupation

Occupation is major determining factor of economic status of people. Generally it is said that higher level of occupation, lower level of fertility and vice-versa. The occupation status of respondents is presented under following table

Table No. 4.10 Distribution of respondents by occupation

Occupation	Number	Percent
Agriculture	71	58.69
Wage labor	30	24.78
Business	17	14.06
Service	3	2.47
Total	121	100.0

Source: Field survey,2009

According to above table, it is known that majority of respondents reported the occupation of agriculture which accounts (58.69%). (2.47%) service, (24.78%) wage labour and rest (14.06%) reported the major occupation in the study area respectively.

4.2.7. Child loss Experience

The childless experience and respondents which was found in study area is given under the following table

Table No. 4.11 Distribution of Respondents by Child loss Experiences

childloss Experience	Number	Percent
0	98	80.00
1	21	17.35
2	2	1.66
Total	121	100.0

Source: Field Survey, 2009

Above table shows that (80%) respondents have reported no child experience, (17.35%) reported one child and rest (1.66%) reported the two child loss experience in the study area.

4.2.8 Annual Income

Income level has significant role in determining the life style of people. High level income people have high level of life style and vice versa. The income status of respondents which was observed in study areas given as follows.

Table No. 4.12 Distribution of Respondents by Annual Income

Annual Income	Number	Percent
Below -10,000	18	14.87
10,000-20,000	32	26.45
20,000-30,000	46	38.02
30,000+Over	16	13.23
Not reported	9	7.43
Total	121	100.00

Source: Field Survey, 2009

Above table shows that (14.87%) respondents reported the level of annual income under 100000, (26.45%) reported 10,000-20,000,(38.02%) reported 20,000-30,000,(13.23%) reported 30,000+and (7.43%) reported no income respectively.

4.2.9 Knowledge and Use of FP Methods

One of the main objectives of this study is to collect the information about family planning, about use of FP methods that affects the fertility

Table No. 4.14 Distribution of Respondents by Knowledge and Use of FP.

Knowledge of FP	Number	Percentage
Yes	93	76.86
No	28	23.14
Total	121	100.00
Use of FP Method		
Female Sterilization	42	45.16
Male Sterilization	7	7.52
Pill	7	7.52
IUD	5	5.37
Inject-able	6	6.45
Norplant	6	6.45
Condom	20	21.50
Total	92	100.0

Source: Field survey, 2009

Table 4.15 shows that 76.86 percent respondents have purported the response about knowledge of family planning and nearly 24 percent have reported 'no' response about knowledge of family planning. Similarly, an overwhelming 45.16% respondents gave reported their knowledge on female sterilization and knowledge of condom lies in second position, which accounts (21.50%). And least percent (5.37%)their knowledge on IUD. It means among various method of family planning female sterilization is more popular than other method of family planning

CHAPTER- FIVE

FERTILITY BEHAVIOUR OF RESPONDENDENTS

This Unit describes the fertility behavior of respondents by some socio-economic variables. Number of CFB of women of reproductive age is one of the best indications of fertility, which is taken as dependent variable. It is measured in terms of mean number of CEB with various demographic and socio- economic characteristics.

5.1 Mean CEB by current age of Women

The number of mean children ever born is shown by various age of mother. It has positive association with longer span of the reproductive age of women.

Table No. 5.1 Mean CEB by Current age of Women

Age group	Mean CEB	Number	percentage	National CEB
15-19	1.67	9	7.43	0.47
20-24	2.05	19	15.71	
25-29	2.31	16	13.23	
30-34	3.76	17	14.04	
35-39	3.70	24	19.83	
40-44	4.17	16	13.23	
45-49	4.18	20	16.53	5.32
Total	3.17	121	100.00	

Source: Field survey, 2009

The table No. 5.1 shows that, the mean number of CEB of women of the study area was found 3.17 which is higher mean of total Nepalese currently married women age 15-49 years, where as the mean number of CEB of women in age group 15-19 years is 1.67. Highest mean number of CEB is

4.18 in age group 30-34 year is 3.76 to compare the DHS 2006 the age 15-19 cem 0.47 and the 45-49 age groups CEB is 5.32 it shows that, the age of married women increase the mean number of CEB increase it means there is positive relationship between age of women and mean number of CEB in the study area.

5.2 Mean CEB by Age at marriage

Age at marriage is also one of the determinants of fertility. Low mean number of CEB could be expected for those who have married relatively at higher age

Table No. 5.2 Mean CEB by Age at marriage

Age group	Mean CEB	Number	Percentage
9-14	4.00	7	5.78
15-19	3.58	91	75.22
20-24	3.00	21	17.35
25-29	2.10	2	1.65
Total	3.17	121	100.00

Source: Field survey, 2009

From the above tables shows the highest mean number of CEB(4.00) was found among those women who married at the age of (9-14) years and lowest mean number of CEB(2.10) was found at age at marriage of (25-29)years. In this table shows that the age at marriage of women increases the mean number of CEB decrease. There is inverse relationship between mean number of CEB and age at marriage of women.

5.3 Mean CEB by Educational status

Education of women plays vital role for fertility decline. It has been accepted that education is negatively associated with the fertility. In the general educated women not only marry late they are also more conscious about the advantages of small family size and use of contraceptives. Therefore education is negatively associated with number of CEB.

Table No. 5.3 Mean CEB by Educational Status.

Education status	Mean CEB	Number	Percentage
Literate	2.30	23	19.01
Illiterate	4.04	98	81.0
Total	3.17	121	100.00

Educational Level

Primary	2.50	17	73.91
Secondary	1.62	6	42.28
Higher	-	-	-
Total	2.30	23	100.00

Source: Field survey, 2009

Table No. 5.3 Shows that mean number of CEB of literate women is lower than illiterate women's literate women had 2.30 mean number of CEB whereas illiterate had 4.04 mean number of CEB. In this study all respondents of reproduction age group (15-49) years have attained any formal education and non formal education. Those respondents who have attained similarly, the mean CEB of secondary level is 1.62 it is important to note that any body have attained higher level of education and mean CEB is not mentioned. It means higher level of education lower than mean CEB and vice-versa

5.4 Mean CEB by Occupation

Occupation status can affect on differentiate of fertility behavior. In general women who work in agriculture where there is more manpower needed, so they want to produce more children, being in agriculture sector women engaged in other professional job they produce small number of children so that differentiate occupation have differentiate fertility behaviour.

Table No. 5.4 Mean CEB by Occupation

Occupation	Mean CEB	Number	Percentage
Agriculture	4.39	71	58.69
Wage labor	3.02	30	24.78
Business	2.50	17	14.06
Service	2.00	3	2.47
Total	3.17	121	100.00

Source: Field survey, 2009

Above table shows that most of women are engaged in agriculture sector whose mean CEB is 4.39. 200 mean CEB of those women who are engaged in service, 3.02 mean CEB of those who are engaged in wage labour and 2.50 mean CEB of those who are engaged in business sectors. In study area, who involved agriculture sector have higher mean CEB than those women who engaged in other sectors.

5.5 Mean CEB by Expectation of Giving Birth

The relation between expectation and mean CEB of women is presented as following table.

Table No. 5.5 Mean CEB by Expectation of Giving Birth

Number of children	Mean CEB	Number	Percentage
1	2.02	8	6.63
2	2.20	54	44.63
3	2.91	15	12.39
4	2.24	26	21.48
5	5.00	7	5.78
6	5.00	11	9.09
Total	3.17	121	10.00

Source: Field survey,2009

This table shows that higher expectations of children born increase the mean number of CEB. Those respondents have low 2.02 mean CEB who want to give birth only one child other wise vice-versa. In study area those women's mean CEB is high who have many numbers of children.

5.6 Mean CEB by Currently using Any Method of Family planning

Mean CEB is directly affected by husband using any methods of family planning. Any method of family planning can be taken as 'device' for limiting the fertility level. Generally, it is widely accepted that increase in prevalence of contraceptive methods, decrease the fertility .In this situation is presented the table 5.6

Table No. 5.6 mean CEB by Husband currently using Any Method of FP

Using contraceptive	Mean CEB	Number	percentage
Yes	3.04	87	93.54
No	3.30	5	6.46
Total	3.17	93	100.00

Source: Field survey,2009

The table No.5.6 shows that means CEB is 3.30 of those respondent whose husband is either currently using of any methods of family planning. Mean CEB is 3.04 of those women whose husband is using any methods of family planning.

CHAPTER- SIX

SUMMARY, CONCLUSION AND RECOMMENDATIONS

6.1 Summary and Conclusions

This study has analyzed basic socio-economic and demographic variables of Bhote community of Hatiya VDC of Sankhwa-Sabha district. It is based on primary data the research work has been studied fertility behavior in terms of CEB of currently married women in aged 15-49. CEB frequency and mean table were presented to describes socio-economic and demographic factor influencing fertility, age at marriage education occupation, child loss experience of women and use of contraception where taken as independent variables and mean CEB was taken as dependent variables. This study to find out the following major findings.

- Ñ Among 121 households there were: 590 total populations out of them 52.88% were males and 47.12% were females.
- Ñ Majority of people have 5-6 family members which accounts 70.24 percent.
- Ñ Out of total population an overwhelming people in age group 20-24 years i.e. 14.74 percent.
- Ñ The total population literacy rate is high (57.72%) was as compared illiterate i.e. 42.28% similarly 72.20% people have primary education and 25.78% population have secondary level of population where as 2.04% have higher level of education.

- Ñ The marital status 76.27 %peoples are married where as 2.73% are unmarried.
- Ñ Among 109 respondents majority (19.83%) respondent are in age group (35-39)
- Ñ Educational status of respondents, 19.00% are literate and 81.00% are illiterate. 73.91% respondents have primary level of education and 26.09% have secondary level of education.
- Ñ The average means age at marriage is 17.74 in study area.
- Ñ The majority of respondents use the stream and river (62.82%), (20.66%) use tap and (16.52%) use dug well.
- Ñ The study area have (99.71%) respondents are Buddhist religion, the study area have only one is Hindu.
- Ñ According to occupational status of this study area 58.69% respondents are engaged in agriculture sectors only.
- Ñ Majority 80.99% respondents reported no experience of child loss.
- Ñ Out of total respondents 38.02 % reported their annual income between Rs 20,000-30,000.
- Ñ According to knowledge and use of family planning 76.86% respondents reported knowledge of F.P. where as 23.14% have reported no knowledge of family planning like wise.
-) Mean CEB is high (4.18) in age group (45-49) years.
-) The mean CEB is high(4.00) of those respondents who head got marriage in age group 9-14 years.
-) The mean CEB is high (4.04) of those respondents who are illiterate as compared illiterate which mean CEB 2.30.

-) The respondent who are engaged in agriculture sector is high mean CEB i.e. 4.39.
-) Mean CEB is reported high (3.30) from those respondents who are not using family planning methods.

Conclusion

This study is to examine the fertility behaviour of Bhote women in Hatiya VDC, Sankhuwa-Sabha. Women status indicators such as: age, education, occupation, age at marriage, knowledge and use of contraception and child lose experience have been carried out to examine the relationship between the status of and fertility behaviour in Hatiya VDC, Sankhuwa-Sabha in this study following conclusion were drawn.

-) The higher percentage of female respondents is in age group 35-39 years.
-) In these VDC, the literacy rate and level of education is poor.
-) In these study area early marriage system is high.
-) More than half percent female reported cycle facilities in their households.
-) Most of the Bhote women were engaged in agricultural sectors.
-) Annual income of respondents seems to be minimum level.
-) The study shows that when women lost their child, they will be motivated to replace their dead children. In this situation higher child loss promotes women to reproduce more children.
-) There is inverse relationship between use of family planning methods and fertility behaviour.
-) It has been seen that an increase of age of women, the mean CEB of women also increases.

-) There is inverse relation between education or literacy rate and mean number of CEB of respondents.
-) Mean CEB has been seen affected directly from status of occupation. The mean CEB can be found of those women who engaged in agriculture sectors

6.2 Recommendations

Education is more important in every aspects of life for both male and female, in Hatiya VDC educational condition is very poor. Female literacy is found very low to compare with male. Government should implement several programmes to educate both women and their husband because the education one or more major factors in reducing fertility. Higher level of education of women makes them consciousness about small family size.

To achieve a lower level of fertility infant, mortality rate should be reduced child loss promotes women to reduce more children. She will motive to replace her dead child. Therefore reducing of infant and child mortality is such higher important factor of decreasing fertility. Hence, government should improve nutrition and establish maternal and child health's care centre, maternal education, free mobile medical facilities and awareness immunization. Information, education and communication service and supply of family planning method should be expanded for increasing prevalence of contraceptive use in Bhote community.

Shifting of women from agriculture to nonagricultural sector is likely to be negatively associated with fertility. Government should promote special sets females employment and create job opportunities is non agriculture sectors.

CHAPTER –ONE

1.2 General Background

Fertility is one of the major components of population change. It is biological process which is determined by socio-economic, cultural factors, such as: women education, age at marriage contraceptive, health and employment (Bongaarts 1983). Fertility is related to mortality, if the fertility rate is high, population size increase but if the mortality rate is high population size decrease. In the global context fertility is different from developed and developing countries.

Fertility is the childbearing performance of individuals, couples, group or population. It is contrasted with fecundity, the theoretical capacity to reproduce, which may or may not lead to refer to the most general analysis of childbearing, though this usage is becoming less common and the term of reproduction measure of fertility normally refers only to live birth (Pressat 1985)

Health, family planning and educational institution are regards as mediator of fertility and mortality behaviour. Hence the relationship between fertility and mortality behaviour seen in the wider context in which main social factors are taken into account at both the individual and social levels. which have an impact on child survival and fertility relationship (UN,1994)

Socio-economic and socio cultural factors affect fertility. fertility encouraging factors are currently marriage and positive value of marriage, family life and procreation, high value of children, son preference, low

status of validation and security for men and women during old age, some of fertility is discouraging are sexually abstinence on certain occasions, age separation of spouses for long period of time and education and employment of women outside home (Dahal,1992:1-5)

One of the most important indicator of women's employment is control over this own fertility. Women's bodies have been used and abused on account their fertility. In Hindu tradition woman are worshiped for their fertility. In the exalted status of mother goodness. While infertility is considered a curse (Bannat, 1983; Cascara, Billy and West, 1986). Pregnancies, child birth and lactation force women to withdraw from economic active work thus making them depend on other member of society. Frequent pregnancies impinge on their health and sometimes even on their very live. It is therefore most important to examine weather women have control over their own fertility.

1.2 Statement of the Problem

Most of the developing countries of the world are facing the problem of rapid population growth due to the high fertility rates. It creates many problems, e.g. starvation, high mother and child mortality rate, low level of living standard, unemployment, and problems in education, socio-economic problems. Similarly it also creates different kinds of pollutions.

There is high fertility rate in Nepal. According to 2001 census, the total fertility rate (TFR) of Nepal is recorded as 4.6 per women. The NDHS 2006 shows the total fertility rate (TFR) of Nepal as 3.1 per women. It has

become serious problem, the socio-economic and demographic conditions are adversely affected.

The burning causes of rapid growth in fertility are: low age at marriage, lack of knowledge in the use of contraceptive devices, unemployment. Conservative beliefs are also other variables. Their traditional occupation, agricultural workers low level of income, domestic workers etc. and which are also the same causes of Bhote communities in the study area. Biological behaviors are also very helpful to fertility behavior of Bhote community, that is why it must be reduced in reasonable way and that is possible through the development of social-economic Status of people and awakening the people of effective implication of family planning programme.

There are several studies related to fertility behavior in different ethnic groups but there is no study carried out on Bhote community so, this study will be very helpful for any scholars who want to study and to run their study about this community on the related topic. If this study wouldn't be carried out then we would miss these facts about study area of Bhote community in related topic.

If the research is not carried out on the facts then we can't get the actual problems. As this study is a fact based study. It gives total description of Bhote communities Related to the topic.

1.3 Objective of the Study

The general objective of the study is assessing the fertility behavior

of Bhote community of Syaksila 6, Hatiya VDC , Sankhuwa-sabha district. The specific objectives of the study are as fallows :

- To explore the demographic and socio-economic characteristic of Bhote community.
- To examine female education, occupation, and age at marriage, family planning and its relation with fertility
- To explain the relationship between CEB and some demographic and socio-economic characteristics.

1.4 Significance of the Study

The main purpose of this study is to find out to various socio economic and demographic aspects of fertility behavior of Bhote community in Hatiya VDC. The Bhote community is situated in Sankhuwa-Sabha, Dhankuta, Tanahu , Jumla, Dolpa, Surkhet etc. According to the census of 2001, Bhote population are 19,261. The verification of the demographic and socio economic characteristics on fertility behavior may help researchers, administrators and policy makers in their areas. Not only this study provides recent data on fertility which may help the policy to get in sight into population dynamics. ON the other hand there are quite a few studies with analyzed the fertility or certain specified communities of nation so that this study provide the people, who are concerned to Bhote community, NGO\INGO planner and policy maker to formulate the more stable and suitable policies. This study will be more useful for further researchers who tend to study this community.

1.7 Limitation of The Study

-) This study is limited to fertility behaviors of Bhote community only in Hatiya VDC, ward No 6 Syaksila, of Sankhuwa-sava district.
-) This study is limited to the general socio-economic study of the age group of people especially to the currently married women aged 15-49 years.
-) In this study merely some demography and socio-economic variables are considered to explain fertility behavior in term of CEB.
-) The study was conducted in a small area that the primary objective of the partial fulfillment of the master degree required in population. Therefore, detail research was not possible. So the finding may not be generalized for other groups of people through out the country.

1.8 Organizations

This study is organized into six major chapters. The first chapter deals with general background of the study, significant of the study, limitation of the study and organization .The second chapter deals with the literature review and conceptual framework for the study .The third chapter describes the methodology. It includes background of the study area, sample design, source of data, questionnaire design, and procedure of data and data analysis. The fourth chapter deals with socio-economic and demographic characteristics of the population and respondents. The fifth chapter deals analysis of fertility of currently married women by socio-economic and demographic variables and the six chapters presents the summary, conclusion and recommendation.

CHAPTER-TWO

LITERATURE REVIEW

2.1 Theoretical review

Nepalese society was ethnically diverse and complex in the early 1990s, ranging in phenotype (physical characteristics) and culture from the Indian to the Tibetan. Political scientists Joshi and Rose broadly classify the Nepalese population into three major ethnic groups in terms of their origin: Indo-Nepalese, Tibeto-Nepalese, and indigenous Nepalese.

The second major group consisted of communities of Tibeto-Mongol origin occupying the higher hills from the west to the east.

The Bhote or Bhotia groups inhabiting the foothills of the Himalayas--among whom the Sherpas have attracted the most attention in the mountaineering world--have developed regional distinctions among themselves, although clearly related physically as well as culturally to the Tibetans. The term Bhote literally means inhabitant of Bhot, a Sanskrit term for the trans-Himalayan region of Nepal, or the Tibetan region. However, Bhote is also a generic term, often applied to people of Tibetan culture or Mongoloid phenotype. As used by the Paharis and the Newars, it often had a pejorative connotation and could be applied to any non-Hindu of Mongoloid appearance.

An extraordinarily complex terrain also affected the geographic distribution and interaction among various ethnic groups. Within the general latitudinal sorting of Indo-Nepalese (lower hills) and Tibeto-Nepalese (higher hills and mountains) groups, there was a lateral (longitudinal) pattern, in which

various ethnic populations were concentrated in specific geographic pockets. The deeply cut valleys and high ridges tended to divide ethnic groups into many small, relatively isolated, and more or less self-contained communities. This pattern was especially prominent among the Tibeto-Nepalese population. For example, the Bhote group was found in the far north, trans-Himalayan section of the Mountain Region, close to the Tibetan border. The Sherpas, a subgroup within the Bhote, were concentrated in the northeast, around the Mount Everest area. To the south of their areas were other Tibeto-Nepalese ethnic groups the Gurung in the west-central hills and the Tamang and Rai in the east-central hills particularly close to and east of the Kathmandu Valley. The Magar group, found largely in the central hills, was much more widely distributed than the Gurung, Tamang, and Rai. In the areas occupied by the Limbu and Rai peoples, the Limbu domain was located farther east in the hills, just beyond the Rai zone. The Tharu group was found in the Tarai, and the Paharis were scattered throughout Nepal. Newars largely were concentrated in the Kathmandu Valley. However, because of their past migration as traders and merchants, they also were found in virtually all the market centers, especially in the hills, and as far away as Lhasa in Tibet.

This geographically concentrated ethnic distribution pattern generally remained in effect in the early 1990s, despite a trend toward increasing spatial mobility and relocating ethnic populations. For example, a large number of Bhotas (also called Mananges from the Manang District) in the central section of the Mountain Region, Tamangs, and Sherpas have moved to the Kathmandu Valley. Similarly, Thakalis from the Mustang District adjacent to Manang have moved to Pokhara, a major urban center in the hills

about 160 kilometers west of Kathmandu, and to Butawal and Siddhartha Nagar, two important urban areas in the central part of the Tarai, directly south of Pokhara. Gurungs, Magars, and Rais also have become increasingly dispersed.

Although Paharis, especially those in rural areas, were generally quite conscious of their caste status, the question of caste did not usually arise for Tibeto-Nepalese communities unless they were aware of the Hindu caste status arbitrarily assigned to them. In so far as they accepted caste-based notions of social rank, the Tibeto-Nepalese tended not only to see themselves at a higher level than did the Hindu Pahari and Newar, but also differed as to ranking among themselves. Thus, it was doubtful that the reported Rai caste's assumption of rank superiority over the Magar and Gurung castes was accepted by the two latter groups. Moreover, the status of a particular group was apt to vary from place to place, depending on its relative demographic size, wealth, and local power.

The Bhote region is where the Arun River enters Nepal from Tibet, and is situated to the north of the district of Sankhuwa-sabha. The inhabitants of Bhote are called Shingsaapas or Shingsa. They enjoy cultural and social affinity and geographical proximity with the Sherpas and other northerners. They adhere to Bon and Buddhism. The village headman is called Goba and Gempoo. They migrate to the lower hills during winter. Most are engaged in farming and some are in trade. The Bhote society had already been formed in Darjeeling in India as far back as circa 1914.

The Bhote, who live on the steep terraces on both sides of the deep canyon made by the Arun River as it enters Nepal from Tibet, call themselves

Shingsa. As the place is also known as Singhsa the people living in that place, the Shingsa or Karbhotas, are also known as Singhsapa, of Snakhuwa-sabha. Among the various indigenous people living in the northern part of country, the area inhabited by is considered the most difficult. Although the lifestyle of the Shingsapas is similar to the Tibetans to the north, they also display some of their own specialties. The Shingsapas live in the half a dozen villages of Kimathanka, Chepuwa, Hatiya, pawakhola, etc in the northern part of Sankhuwa-sabha on the two sides of the Arun River and Barun River. They are a small minority group living in a remote area. Their population has not been enumerated separately in the censuses.

The Bhotas have own separate language called Shingsapaki-keyk, similar with Tibetan or sherpa language with some local dialectal variations. The Shingsapas do have special ceremonies prior to marriage, and the formal ceremony related to marriage. The wife's family and relatives offer gifts. If a husband takes another wife, he has to leave the household. The head of the village, Goba, also receives marriage tax. After death and during cremation the Lama and Loben have a considerable role to play. The houses of Bhotas are made of stone, wood and bamboo. The Bhotas go down to the plains to trade during winter but do not have much trade contacts with the north.

The Bhotas have many subgroups made up of various family groups like the Thikeppa, Nuppa, Khumbuwa, Pongsuwa, Bhoecha, Nava and Chyaba. The head of social organizations is the Goba and Gembu. They undertake various functions of the village like administration, protection, collecting of taxes, punishment, etc. Although the Bhotas are Buddhist, they believe in

ghosts and spirits and have deep faith in shamans. They practice animal sacrifice in all ritual. When people and cattle die, they call upon shamans believing that the deaths occurred because the ghost became angry or the dead became inflicted with ghosts and spirits. There are monasteries in every village, and the Bhote had received the government's seal to collect tax in the village. They collect taxes from bridges, land and honey hunter. The Bhote cut goat in the months of Jestha and Bhadau and celebrate. The occupation of Bhote is farming and raising livestock, which includes the raising of sheep. They are not till now involved like the Sherpas and others, guides to tourists and Everest summiteers. The Bhotes go to the southern districts like Sunsari, Saptari and during the winter months to engage in trade. Bhote and Sherpas have been recorded as the same group of ethnicity according to the national census of Nepal and Bhote's population has not groups with each other. been enumerated separately. The total population of this VDC is 3096. Among them, 2295 are Bhote. According to the national census 0.66 of total population speak their mother tongue and CBS 2001 has indicated to national census 2001, 101 ethnic groups have been identified, Nepal is multi language country; each ethnic group contains separate Lange defined by mother tongue. The total fertility rate of Nepal was 6.3 in 1981 and reached 5.6 in 1991 and 4.1 in 2001 (CBS 2003) .The TFR is higher than other SAARC countries.

In the respect of fertility behavior Kinsley Davids and Judith Blake have give their own strong Definition in 1956 in the title "structure and fertility, an analytical framework", where they have categorized the main biological events in three main division, all of them constitute all together eleven variables which are related to phenomena of fertility, this variables are

centered around intercourse, conception and gestation .As each process is biological, cultural and economic factors, these affect all the stages child bearing and these eleven intermediate variables have been categorized into three main group which are as follows.

1. Factor affecting to inter-course (intercourse variables)
2. Factor affecting exposure to conception (conception variables)
3. Factor affecting gestation and successful parturition (gestation variables)

These variables can play either positive or negative effect on fertility; the fertility level in any society is determined by combined effect of all these variables. So, all of these variables are presented in every society.

Even John Bongaarts has also identified direct determinants of fertility which he called "proximate determinants of fertility"

According to John Bongaarts and Robert Potter, "the proximate determinants of fertility are the biological and behavioral factors through which social, economic and environmental variables affect fertility." They identified seven proximate determining variables affecting fertility which are age at marriage and marital disputation, one set of permanent sterility, duration of postpartum Infecundability, use and effectiveness of contraception, spontaneous intrauterine mortality and induced abortion. These four proximate determinants are very active in determining the fertility (MOPE 2000, 27)

In the same way, United Nation also developed the threshold hypothesis in 1970 by unearthing, its short comings and especially studies the relationship

between the level of fertility and various indicators at the level of socio-economic development. This study based on the data called from various countries having different levels of gross reproduction rate. The following twelve indicators of socio-economic development were used:

- Per capita income
- Energy consummation
- Urbanization
- Non agricultural activities
- Hospital beds
- Life expectancy at birth
- Infant mortality
- Early marriage
- Female literacy
- News paper circulation
- Radio receiver
- Cinema attendance.

This hypothesis categorizes all the countries into two groups Viz -countries having high fertility and countries having low fertility. The developing countries are considered having high fertility and developed countries are supported of having low fertility. That is why the countries with initially high fertility will not experience a fertility decline even with some socio-economic development; however, the fertility decline will be initiated in a certain level of socio-economic infrastructural development. And, after this achievement, the fertility steadily decline to a much lower plane.

Among them per capita income, newspaper circulation, radio, receiver and female literacy are more catalytic indicators of the reduction of fertility (Gobwin R Kenneth,1969).

In the same way J.C Caldwell too has developed the theory of intermediate wealth flow in regard to fertility which is known as the "Theory of intergenerational wealth flow"

According to this theory, in a society the fertility is high if the children are taken economically useful to parents and fertility is low if the children are not taken economically beneficial to the parents. So, it is vivid that in primitive society, the direction of economic flow is from children to parents and in modern society, the direction of economic flow is just opposite that is from parents to children. That is why, this intergenerational economic flow is determined by the social conditions. The economic advantages to the parents have been identified in different six main points.

The theory of demographic transition is based on the actual demographic experience of western countries this theory is presented by Frank Notestein in 1945 (advanced) described the transition from high to low fertility representing a shift from natural fertility to family limitation (Libenstein, 1998:96) . The countries of Europe and North America, this transition is supported by the ethnic norms, laws, structure and relations in the community and family according to religious doctrines. Thus, the theory stimulated a number of studies that analyzed the relationship between socio-economic development and fertility. In the countries of being popularized demographic transition, fertility decline was mainly due to the declines in death rate and family limitation norms resulting .The process of

modernization which involves raising living standard of life, raising income, raising education and advances in sanitation and medical knowledge (UN, 1979:59)

Arsine Dumont (1965) formulated the principle of "social capillarity". He believed that wakening of to procreate was caused by the progress of civilization an attributed to the progress of civilization an attributed to the reduction in family size to the individual's ambition to improve his position in society as a column of liquid rise under the force of capillarity in the tube. The development of individualism and desire for personal improvement stimulate couple to have fewer children and hence fertility of the societies declines (UN 1973, 54-55).

J.M. Tuladhar (1989) examined the persistence of high fertility in Nepal using data from Nepal fertility survey, 1976. He found that higher mortality levels especially of infants, joint family system, early and universal marriage system, low educational attainment and working status especially of women are the main contributing factors of high fertility in Nepal.

Between the husband and wife communication regarded as one of the responses for not using contraception in Latin America and Asian societies (Tuladhar, 1989,210-212). The majority of currently married women in Nepal reported that they never discussed about family size with their husband. The proportion of women who have had communication with their spouses was higher among the younger and the educated than among the older and uneducated women.

Dahal (1992) analyzed the determining factors of high fertility and found that in Nepali society high economic and social value of children, low education and social status of women, poor health and insufficient nutritional intake, inaccessibility of quality family planning and its unmet demand are the determining factors of high fertility in Nepal.

2.2 Empirical Review

Most of the developing countries like Nepal have low level of mortality rate and high level of fertility. Most of the studies in fertility which attempt to summarize the studies regarding the determinants of fertility are selected and presented as follows.

Educational Attainment and Fertility

Education is directly determining fertility behavior of human being. These two variables are inversely proportion if higher the levels of education for women. They are usually associated with a higher age at marriage. It may also be noted that the higher level of educational provide a higher level of information as out keeping fertility under control and create and sustain motivation to keep small family size Higher level educated mothers do not the baby and fertility is reduced

Education has been considered as a catalytic agent to reduce fertility in Nepal. Educated women are more aware of the issue of quality of children than non educated in Nepal, the average number of CEB is 1.9 for literate women especially for primary education and 1.5 for graduate which is lower the literate with children ever born 2.8(CBS 1991)

The World Bank Survey 1984, selected 3000 households randomly selected from three districts of Kerala state India and showed that the average number of CEB was lower for better educated than for the illiterate, which is 2.1 for the women with 10 or more years of schooling and 4.5 for women with no schooling. Analysis of 1990/91 Pakistan Demographic and Health Survey (PDHS) data resulted that age specific fertility rates (ASFR) were inversely related to educational level of mother, however the association was more consistent in urban than in rural areas.(UN, 1993:11-13) .

Family Health Survey 1996 explained a strong relationship between education and fertility. Women with at least some secondary education have total fertility rate of 5.1 whereas women with primary education have total fertility rate of 3.9 per women (MOH,1996).These data indicates that the highest total fertility rate is observed for the women with no education. Nepal family and Health Survey 1996 also indicate the wife's education status more instrumental in reducing fertility than husband's.

In Nepal, women with no education have 3.5 CEB, primary education 2.4 and secondary education have 2.1 only; similarly, CEB of women whose husband is literate has 3.6 with primary education 3.1 and 2.7 with secondary education (Acharya, 2000). So, higher the educational attainment lower the fertility, lower the educational status higher the fertility.

Occupation and Fertility

Female having different occupation is found to have different level of fertility in Nepal. The employment of the women outside the home reduces the level of fertility behavior .If the women are employed they have a

smaller number of children than who are not employed. Women who have smaller number of children tend to take paid jobs outside their homes or those who have already paid jobs restrict their family size to the very minimum. (UN,1987) ,found that in every region women with occupation in the modern sector of economy had smallest number of children over born than women involved in traditional sector of economy . Those who had never worked had on an average likely to have mire children than women involved in any of the occupational group. In oceanic countries the differences in means CEB was found to be 2.2 children between women who worked and who did not.

The setting of work and occupation are determining factors for fertility differentials. If the wife works at home, she is likely to have virtually identical to that of women not in the labor force and if she works away from home she is likely to have a significantly low fertility (Shanjuta and Mathur, 1989:324-334). In India (1981), the study by family planning program found that total fertility rate for the working women was found to be 3.85 in rural and 2.25 in urban area whereas corresponding figure for non working women were 4.76 and 3.27 respectively (Shanjuta and Mathur, 1989).In Latin America and Caribbean where women who never worked had 2.7 more children than women who were employed in modern occupation (UN, 1987).

Nepal is agriculture based country. A large proportion of the country's labor force is involved in agriculture while very small proportion is in non agriculture sector. Most of the female are in unproductive sector. In Nepal 90 percent of the economically active female population is engaged in agriculture, whereas less than one percent of them work as professional and

technicians. Even those employed in professional and technical sectors are generally lowered level and low paid job.

The professional workers have mean age at marriage of 19.8 years compared to administrative workers having mean age at marriage of 20.2 years. Lowest mean age at marriage of 17.1 years is found for the women who work in farm and agriculture (Risal and Shrestha, 1989:56). Women whose occupation is farming and fishing gave highest fertility level. Their average mean number of CEB is 2.7 forever married women which is only 1.6 for the professional and technical, administrative and clerical workers. (MOH, 1995).

Cultural, Religious Value and Fertility

Different fertility can be observed in the different cultural and religious societies. By culture and religious Nepali society is pro-natalist (Dahal, 1987). A major cultural component of Nepali women is child bearer. A woman becomes real women only when she performs her role as mother and her status is fully validated after the successful birth of many children specially sons and childlessness is a curse (Dahal, 1987). Total marital fertility has observed different among different caste and ethnicity groups. For example total marital fertility rate (TMFR) for Brahmin was 5.67 for Chettri was 6.07, for Newar was 4.89 and for Tamang was 7.5 (Niraula and Shrestha, 1997:24).

Age at Marriage and Fertility

Fertility and age at marriage are inversely related in Nepal. Marriage is cohabitation of two opposite sexes. In Nepal, age at marriage is found to be

lower, for females were 15.4 and 19.5 years for males (MOPE, 2002). Nepalese society does not allow the sexual union of unmarried people. So, marriage is the most essential in our society. Nepal is multi-lingual, multi-religions and multi-ethnic society. According to the age and their religion, age at marriage and CEB are different.

A study claims that women marrying between 20-24 have similar fertility that or those marrying before age 20, only if the marriage age reached 35 or over would there be a significant reduction of fertility. Perhaps this is one of the reasons for persistent high fertility in Nepal (Karki, 2003).

The number of CEB affects the socio-economic condition of the people in the country. Empirical studies have been shown that number of CEB and poverty are positively associated. The maternity health and family planning are interrelated and they have together an impact on the quality of population. According to NLSS 2003/04, the mean number of CEB per women is estimated to be 2.4. As expected this increases with age group of women. Rural areas have more children per women relatively to urban areas TFR for Nepalese estimated 83.4 urban areas have a much lower rate of 3.8. According to Census 2001 the TFR range from 3.7 to 3.9 (CBS, NLSS, 2003/04).

Contraception and Fertility

Family planning awareness helps to control population growth in the country. Nepal living standard survey (NLSS II) estimates 71 percent of women aged 15-49 years are knowledgeable about at least one of the FP methods, 46 percent have ever used it and 30 percent are currently using

some from of planning methods. As one would expect, the proportion of women of knowledge of at least one of the FP methods is higher in urban areas than in rural areas (91 percent versus 74 percent). Such knowledge is likely to be higher among younger cohorts, and among richer quintal groups. The current use rate of family planning is higher among women aged 35-39 years. This is higher among those from richer households. Radio is the most common media of information about family planning .The majority of women, 38 percent reported radio as the source of information about family planning methods followed by friends, relatives (24%), television (7%) and newspaper (3%). In response to the question asked to women aged (15-49) years on the type of family planning methods currently using either by them or by their husbands, 33% reported laparoscopy minilap, 20% Vasectomy, 39%, other temporary methods and only 8% Condom. Among 60% of users of family planning methods visit public health institutions 5% and health workers (4%).Such a pattern is observed in all developmental regions, ecological zones, age groups, age groups and conception quintiles. However, after Public health institution, pharmacy is more popular in urban areas and the richest quintile (CBS/NLSS, 2003/04).

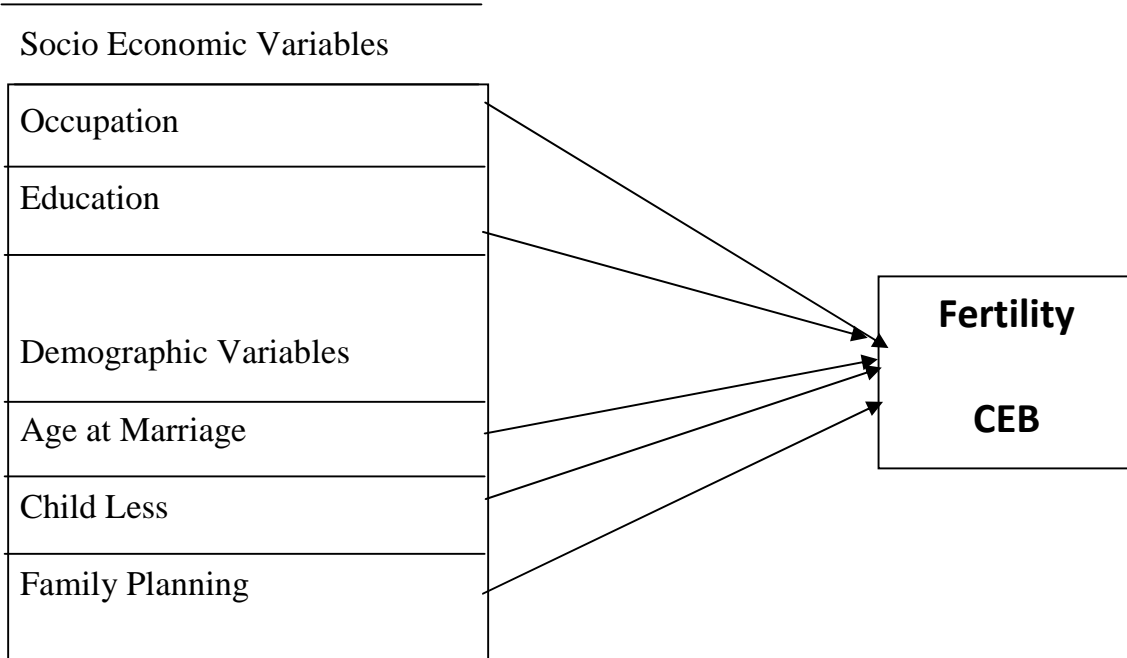
2.3 Conceptual Framework

The research framework set out in figure considered that, education and occupation are socio-economic variable and age at marriage; child loss experience and family planning are demographic variables which determined the level of fertility. In this framework, fertility is dependent variable and socio-economic and demographic variables are independent variables as fertility.

Conceptual Framework for Analysis of Fertility

Independent Variables

Dependent Variables



CHAPTER THREE

METHODOLOGY

3.2 Study Area

The study area was selected as 'Hatiya' VDC ward no. 6 Syaksila, Sankhuwa-Sabha district in eastern part of Nepal. The VDC lies in the Northern part of Sankhuwa Sabha district. It is very remote area of Sankhuwa-Sabha district. It is very far from districts headquarter Khandbari. It touches Pawakhola VDC and Chepuwa VDC as in the east, 'Makalu' VDC in the west. Similarly it touches Kimathanka VDC in the northern side and in south, Pathibhara VDC lies.

There are many casts, ethnic and religious groups of people having different socio-economic and demographic characteristics living in Hatiya VDC such as Rai, Gurung, Tamang, Dalit, Sherpa and Bhote. No study has yet been conducted on the fertility behaviour of 'Bhote' women living in this VDC. It was necessary to know the level of fertility situation of the Bhote women in this area. The study was conducted only among Bhote community, which is backward in the socio-economic and demographic aspects.

3.2 Data Collection Method

The data collection method is purposive. This study is based on the census. It was more suitable for this study because of small universe of Bhote community. This study focuses on fertility behaviour of currently married women age of 15-49 years, in Hatiya VDC Bhote community, ward no 6.

The total number of households of the study area is 121 and sample size is also 121 because I found only 121 married women reproductive age (15-49 years) in the selected households.

3.5 Questionnaire Design

There are different types of questionnaire which can be used to collect required information. Some of them are: structured questionnaire and non structured questionnaire. This study has used mixed questionnaire for the study of fertility behaviour of Bhote community, the question has been divided into different groups.

Household information: family information and demographic information have been included in this groups.

Demographic information: home, age, age at marriage, education, occupation, number of sons and daughters, knowledge, attitude and use of family planning, source of information, use and non -use of family planning has been included .

3.6 Method of Data Analysis

The quality of any research work depends upon the techniques; used to analyze and present the data. The data have been collected in files according to its research design. For this crude data are collected from questionnaire which were carefully edited, checked and coded before they were entered into the computer and tabulated as the need of report.

CHAPTER-FOUR

DEMOGRAPHIC AND SOCIO-ECONOMIC

CHARACTERISTICS

4.1 Background Characteristics of population

This Unit describes the general demographic and socio-economic characteristics of Bhote people living in Hatiya VDC representing socio-economic status affecting fertility among Bhote community.

4.1 Respondent characteristics

4.1.1 Age-Sex Structure

Age sex structure of population plays significant role in demography. It provides the information of population in different age groups at particular period. Similarly, age-sex structure of the population is the vital variables in study of population dynamics. The age-sex structure is given below in table number 4.1.

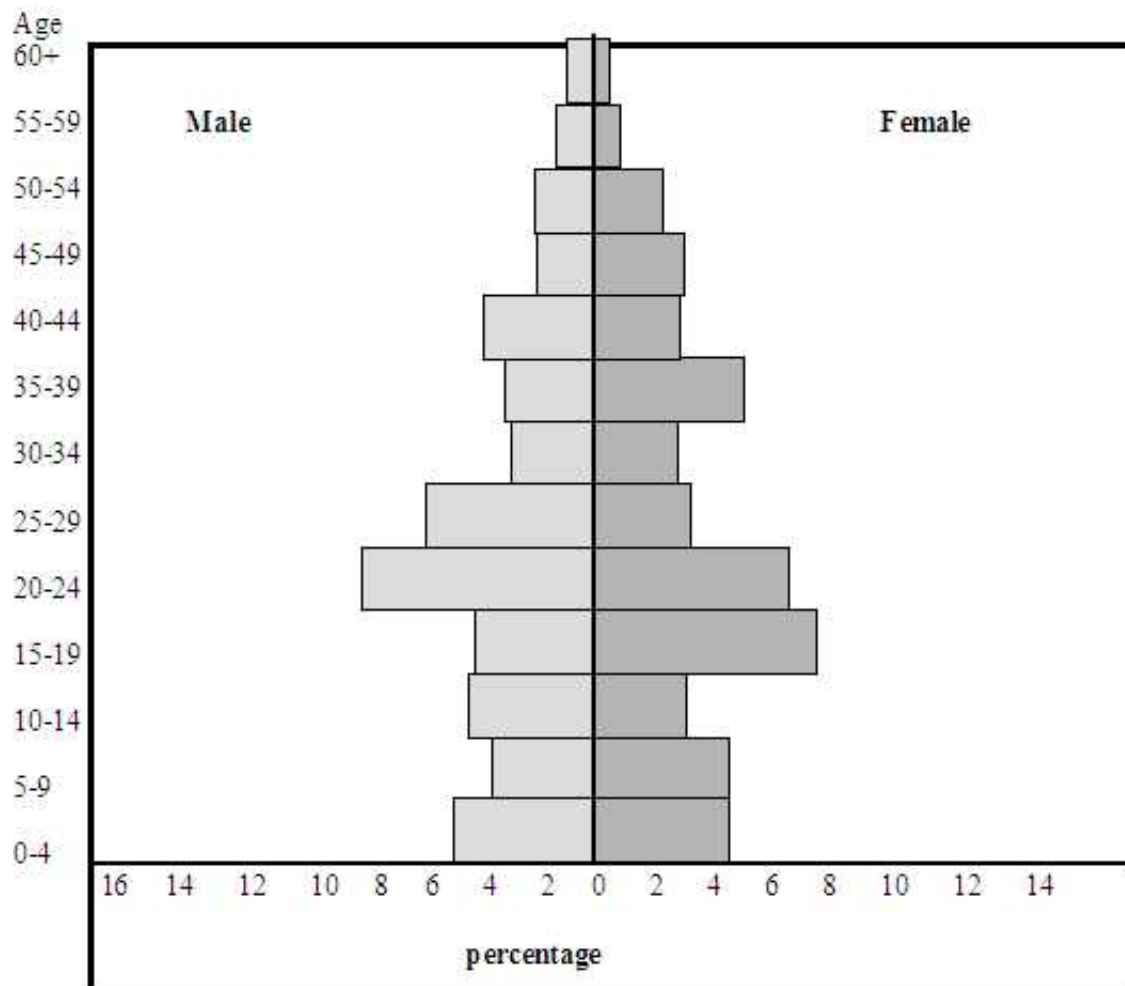
Table No. 4.1 Age-Sex Structure of Study Population

Age group of population	Sex of the population				Total	
	Male		Female		Number	percent
	Number	percent	Number	percent		
0-4	31	5.25	25	4.24	56	9.49
5-9	24	4.07	27	4.58	51	8.64
10-14	28	4.75	19	3.22	47	7.96
15-19	27	4.58	45	7.63	72	12.20
20-24	49	8.31	38	6.44	87	14.74
25-29	37	6.27	21	3.56	58	9.83
30-34	20	3.39	18	3.50	38	6.44
35-39	22	3.73	27	4.58	49	8.30
40-44	24	4.07	17	2.88	31	5.25
45-49	13	2.20	20	3.39	33	5.60
50-54	14	2.37	12	2.03	26	4.40
55-59	11	1.86	5	0.85	16	2.71
60+	9	1.53	4	0.68	13	2.20
Total	312	52.60	278	47.40	590	100

Source: Field survey, 2009

Age-Sex structured of population is important variable for study of fertility. These study covers the 121 households as sample population. The table number 4.1 indicates that the highest proportion of population found in age group 20-24 (14.74%) followed by age group of age 15-19(12.20%).Similarly, lower proportion of population was found in age group s60+(2.20%) indicating low life expectancy at birth.

Figure no. 4.1.2.1 population pyramid



4.1.2 Educational Status of the Study Population

Education is the major or basic requirement for the social, political and economic development. Education plays vital role in the socio-economic status of the community. Educational status will be use full in analysis relating to change in fertility. Therefore, it is important to know the educational status of people of the study area. The question about educational attainment was asked to the persons aged 6 years and above.]

Table No. 4.2 Distribution of population by Educational Status

Educational status	Number	percentage
Literate	295	57.72
Illiterate	216	42.28
Total	511	100.00
Educational attainment		
Primary	213	72..20
Secondary	76	42.28
Higher	6	2.04
Total	295	100.00

Source: Field Survey, 2009

According to above table it is known that more than half (57.72%) respondents are literate and near about (42.28%) are illiterate. Similarly, (72%) respondents have attained primary level of education nearly 42.28 have attained secondary and only 2.04 percent respondents have attained higher level of education

4.1.3 Marital status of study population

Marriage is the primary event in the process of family formation. The marital status of the study population is presented under the following table

Table No. 4.3 Distribution of population age by Marital Status

Marital status	Number	Percentage
Married	334	76.27
Unmarried	107	23.73
Total	441	100.00

Source: Field Survey, 2009

Above table shows that out of total population majority 76.27% people are married and rest 23.7 are unmarried in study areas. In this table highest proportion of people are married which directly affects the fertility level.

4.2 Background Characteristics of Respondents

Before analyzing the fertility behaviours of people, demographic and socio-economic characteristics of the respondents are studied. Various socio-economic and demographic characteristics of respondents are analyzed in this sub-section.

4.2.2 Age Distribution

Age of women is very important factor for determining fertility. The age distribution of respondents is presented presented under following table

Table No. 4.4 Distribution of Respondents by Age Group

Age group	Number	percentage
15-19	9	7.43
20-24	19	15.71
25-29	16	13.23
30-34	17	14.04
35-39	24	19.83
40-44	16	13.23
45-49	20	16.53
Total	121	100.0

Sourc: Field Survey, 2009

Table 4.4 shows that eligible women respondents are divided in the different 5 years age group. The highest percent (19.83%) of the eligible women are group 35-39 and second highest percent is in age group 45-49. The least majority (7.43%) of eligible women seems in the eligible 15-19 and in 20 years age group the eligible women are nearly 16 percent.

4.2.2 Family Size

Family refers to group of members living in one household bounded by blood, marriage or adoption. It is small unit of society. There is no any fix period when family system was started but it is generally believed that it was started from beginning of Stone Age. Nobody can live with in the position of alone, so family was significance role in human society similarly; family size refers to total number or member who lives in family together. Size differs from one society to another as well as developing to developed region. Nuclear family trend is popular in developed country. It seems just opposite but due to development, modernization, family size is going to be limited in developing world also. The family size was observed in study area presented under the following table.

Table no. 4.5 Distribution of Respondents by Family Size

Family Size	Number	Percent
1-4	17	14.4
5-6	85	70.24
7-12	19	15.72
Total	121	100.00

Source; Field Survey,2009

Above table indicates that more than 70 percent households have 5-6 family members living together, 15.72 Percent have 7-12 family members and rest 14.4 percent have 1-4 family members. It is clear that small as well as large family system seems to be in trend in this study area.

Educational Status

Educational qualification is vital indicators of the fertility of women. Generally an educated woman naturally has better communication with her husband about contraception and number of children. The distribution of eligible respondents by educational status is given below.

Table No. 4.6 Distribution of Respondents by Educational Status

Educational Status	Eligible women	Percent
Literate	23	19.00
Illiterate	98	81.00
Total	121	100.00
Educational attainment		
Primary	17	73.91
Secondary	6	26.09
Higher	-	-
Total	23	100.00

Source: Field Survey, 2009

Above table shows that nearly (19%) eligible women are literate and (81%) are illiterate. Out of 23 eligible literate women, 17 eligible women have attained primary level education and 6 have attained secondary level of education.

Age at Marriage

In Nepal marriage takes place in early ages and it is almost universal. Universal marriage practice leads to long term social and economic consequences including higher fertility. The distribution of women by age at marriage has been classified by age group, which is presented under following table.

Table No. 4.7 Distribution of Respondents by Age at Marriage

Age at marriage	Number	percentage
10-14	7	5.78
15-19	91	75.22
20-24	21	17.35
25-29	2	1.65
Total	121	100.00

Source:Field Survey, 2009

The average mean age at marriage of study area is 17.74 year. Above table shows that majority of respondents (75.22%) are married during the period 15-19 years, (17.35%) are married during 20-24 years, (5.78 %) are in 10-14 years and rest (1.65%) respondents are married in period 25-29 years. It clears that early age marriage trend seems in the study area which affects the fertility level of women.

4.2.6 Source of Drinking Water

One question was asked about source of drinking water to respondents in study area which information is presented as below.

Source of drinking water	Number	Percent
--------------------------	--------	---------

Dug well	20	16.52
Tap	25	20.66
River/Steam	76	62.82
Total	121	110.00

Table No. 4.8 Distribution of respondents by source of drinking water

Source: Field Survey, 2009

Table 4.8 shows that nearly 63 percent reported river/steam of their source of drinking water .Similarly (16.52%) reported dug well as source of drinking water and similarly (20.66%) reported Tap as the source of drinking water.

4.2.5 Religion

Nepal is multi religious country. Level of fertility is directly affected by religion. In study area the status of respondents in terms of religion is given under following table.

Table No. 4.9 Distribution of respondents by religion

Religion	Number	Percent
Hindu	1	0.83
Buddhist	120	99.17
Total	121	100.00

Source; Field Survey, 2009

Table given above shows that (99.17%) respondents are Buddhists and remaining only (0.83%) of them are Hindus.

4.2.7 Occupation

Occupation is major determining factor of economic status of people. Generally it is said that higher level of occupation, lower level of fertility and vice-versa. The occupation status of respondents is presented under following table

Table No. 4.10 Distribution of respondents by occupation

Occupation	Number	Percent
Agriculture	71	58.69
Wage labor	30	24.78
Business	17	14.06
Service	3	2.47
Total	121	100.0

Source: Field survey,2009

According to above table, it is known that majority of respondents reported the occupation of agriculture which accounts (58.69%). (2.47%) service, (24.78%) wage labour and rest (14.06%) reported the major occupation in the study area respectively.

4.2.7. Child loss Experience

The childless experience and respondents which was found in study area is given under the following table

Table No. 4.11 Distribution of Respondents by Child loss Experiences

childloss Experience	Number	Percent
0	98	80.00
1	21	17.35
2	2	1.66
Total	121	100.0

Source: Field Survey, 2009

Above table shows that (80%) respondents have reported no child experience, (17.35%) reported one child and rest (1.66%) reported the two child loss experience in the study area.

4.2.10 Annual Income

Income level has significant role in determining the life style of people. High level income people have high level of life style and vice versa. The income status of respondents which was observed in study areas given as follows.

Table No. 4.12 Distribution of Respondents by Annual Income

Annual Income	Number	Percent
Below -10,000	18	14.87
10,000-20,000	32	26.45
20,000-30,000	46	38.02
30,000+Over	16	13.23
Not reported	9	7.43
Total	121	100.00

Source: Field Survey, 2009

Above table shows that (14.87%) respondents reported the level of annual income under 100000, (26.45%) reported 10,000-20,000,(38.02%) reported 20,000-30,000,(13.23%) reported 30,000+and (7.43%) reported no income respectively.

4.1.1 Family Size

Family refers to group of members living in one household bounded by blood, marriage or adoption. It is small unit of society. There is no any fix period when family system was started but it is generally believed that it was started from beginning of Stone Age. Nobody can live with in the position of alone, so family was significance role in human society similarly; family size refers to total number or member who lives in family together. Size differs from one society to another as well as developing to developed region. Nuclear family trend is popular in developed country. It seems just

opposite but due to development, modernization, family size is going to be limited in developing world also. The family size was observed in study area presented under the following table.

Table no. 4.13 Distribution of Respondents by Family Size

Family Size	Number	Percent
1-4	17	14.4
5-6	85	70.24
7-12	19	15.72
Total	121	100.00

Source: Field Survey, 2009

Above table indicates that more than 70 percent households have 5-6 family members living together, 15.72 Percent have 7-12 family members and rest 14.4 percent have 1-4 family members. It is clear that small as well as large family system seems to be in trend in this study area..

4.2.11 Knowledge and Use of FP Methods

One of the main objectives of this study is to collect the information about family planning, about use of FP methods that affects the fertility

Table No. 4.14 Distribution of Respondents by Knowledge and Use of FP.

Knowledge of FP	Number	Percentage
Yes	93	76.86
No	28	23.14
Total	121	100.00
Use of FP Method		
Female Sterilization	42	45.16
Male Sterilization	7	7.52
Pill	7	7.52
IUD	5	5.37
Inject-able	6	6.45
Norplant	6	6.45
Condom	20	21.50
Total	92	100.0

Source: Field survey, 2009

Table 4.15 shows that 76.86 percent respondents have purported the response about knowledge of family planning and nearly 24 percent have reported 'no' response about knowledge of family planning. Similarly, an overwhelming 45.16% respondents gave reported their knowledge on female sterilization and knowledge of condom lies in second position, which accounts (21.50%). And least percent (5.37%)their knowledge on IUD. It means among various method of family planning female sterilization is more popular than other method of family planning

CHAPTER- FIVE

FERTILITY BEHAVIOUR OF RESPONDENDENTS

This Unit describes the fertility behavior of respondents by some socio-economic variables. Number of CFB of women of reproductive age is one of the best indications of fertility, which is taken as dependent variable. It is measured in terms of mean number of CEB with various demographic and socio- economic characteristics.

5.2 Mean CEB by current age of Women

The number of mean children ever born is shown by various age of mother. It has positive association with longer span of the reproductive age of women.

Table No. 5.1 Mean CEB by Current age of Women

Age group	Mean CEB	Number	percentage	National CEB
15-19	1.67	9	7.43	0.47
20-24	2.05	19	15.71	
25-29	2.31	16	13.23	
30-34	3.76	17	14.04	
35-39	3.70	24	19.83	
40-44	4.17	16	13.23	
45-49	4.18	20	16.53	5.32
Total	3.17	121	100.00	

Source: Field survey, 2009

The table No. 5.1 shows that, the mean number of CEB of women of the study area was found 3.17 which is higher mean of total Nepalese currently married women age 15-49 years, where as the mean number of CEB of women in age group 15-19 years is 1.67. Highest mean number of CEB is

4.18 in age group 30-34 year is 3.76 to compare the DHS 2006 the age 15-19 cem 0.47 and the 45-49 age groups CEB is 5.32 it shows that, the age of married women increase the mean number of CEB increase it means there is positive relationship between age of women and mean number of CEB in the study area.

5.2 Mean CEB by Age at marriage

Age at marriage is also one of the determinants of fertility. Low mean number of CEB could be expected for those who have married relatively at higher age

Table No. 5.2 Mean CEB by Age at marriage

Age group	Mean CEB	Number	Percentage
9-14	4.00	7	5.78
15-19	3.58	91	75.22
20-24	3.00	21	17.35
25-29	2.10	2	1.65
Total	3.17	121	100.00

Source: Field survey, 2009

From the above tables shows the highest mean number of CEB(4.00) was found among those women who married at the age of (9-14) years and lowest mean number of CEB(2.10) was found at age at marriage of (25-29)years. In this table shows that the age at marriage of women increases the mean number of CEB decrease. There is inverse relationship between mean number of CEB and age at marriage of women.

5.3 Mean CEB by Educational status

Education of women plays vital role for fertility decline. It has been accepted that education is negatively associated with the fertility. In the general educated women not only marry late they are also more conscious about the advantages of small family size and use of contraceptives. Therefore education is negatively associated with number of CEB.

Table No. 5.3 Mean CEB by Educational Status.

Education status	Mean CEB	Number	Percentage
Literate	2.30	23	19.01
Illiterate	4.04	98	81.0
Total	3.17	121	100.00

Educational Level

Primary	2.50	17	73.91
Secondary	1.62	6	42.28
Higher	-	-	-
Total	2.30	23	100.00

Source: Field survey, 2009

Table No. 5.3 Shows that mean number of CEB of literate women is lower than illiterate women's literate women had 2.30 mean number of CEB whereas illiterate had 4.04 mean number of CEB. In this study all respondents of reproduction age group (15-49) years have attained any formal education and non formal education. Those respondents who have attained similarly, the mean CEB of secondary level is 1.62 it is important to note that any body have attained higher level of education and mean CEB is not mentioned. It means higher level of education lower than mean CEB and vice-versa

5.4 Mean CEB by Occupation

Occupation status can affect on differentiate of fertility behavior. In general women who work in agriculture where there is more manpower needed, so they want to produce more children, being in agriculture sector women engaged in other professional job they produce small number of children so that differentiate occupation have differentiate fertility behaviour.

Table No. 5.4 Mean CEB by Occupation

Occupation	Mean CEB	Number	Percentage
Agriculture	4.39	71	58.69
Wage labor	3.02	30	24.78
Business	2.50	17	14.06
Service	2.00	3	2.47
Total	3.17	121	100.00

Source: Field survey, 2009

Above table shows that most of women are engaged in agriculture sector whose mean CEB is 4.39. 200 mean CEB of those women who are engaged in service, 3.02 mean CEB of those who are engaged in wage labour and 2.50 mean CEB of those who are engaged in business sectors. In study area, who involved agriculture sector have higher mean CEB than those women who engaged in other sectors.

5.5 Mean CEB by Expectation of Giving Birth

The relation between expectation and mean CEB of women is presented as following table.

Table No. 5.5 Mean CEB by Expectation of Giving Birth

Number of children	Mean CEB	Number	Percentage
1	2.02	8	6.63
2	2.20	54	44.63
3	2.91	15	12.39
4	2.24	26	21.48
5	5.00	7	5.78
6	5.00	11	9.09
Total	3.17	121	10.00

Source: Field survey,2009

This table shows that higher expectations of children born increase the mean number of CEB. Those respondents have low 2.02 mean CEB who want to give birth only one child other wise vice-versa. In study area those women's mean CEB is high who have many numbers of children.

5.6 Mean CEB by Currently using Any Method of Family planning

Mean CEB is directly affected by husband using any methods of family planning. Any method of family planning can be taken as 'device' for limiting the fertility level. Generally, it is widely accepted that increase in prevalence of contraceptive methods, decrease the fertility .In this situation is presented the table 5.6

Table No. 5.6 mean CEB by Husband currently using Any Method of FP

Using contraceptive	Mean CEB	Number	percentage
Yes	3.04	87	93.54
No	3.30	5	6.46
Total	3.17	93	100.00

Source: Field survey,2009

The table No.5.6 shows that means CEB is 3.30 of those respondent whose husband is either currently using of any methods of family planning. Mean CEB is 3.04 of those women whose husband is using any methods of family planning.

CHAPTER- SIX

SUMMARY, CONCLUSION AND RECOMMENDATIONS

6.2 Summary and Conclusions

This study has analyzed basic socio-economic and demographic variables of Bhote community of Hatiya VDC of Sankhwa-Sabha district. It is based on primary data the research work has been studied fertility behavior in terms of CEB of currently married women in aged 15-49. CEB frequency and mean table were presented to describes socio-economic and demographic factor influencing fertility, age at marriage education occupation, child loss experience of women and use of contraception where taken as independent variables and mean CEB was taken as dependent variables. This study to find out the following major findings.

- Ñ Among 121 households there were: 590 total populations out of them 52.88% were males and 47.12% were females.
- Ñ Majority of people have 5-6 family members which accounts 70.24 percent.
- Ñ Out of total population an overwhelming people in age group 20-24 years i.e. 14.74 percent.
- Ñ The total population literacy rate is high (57.72%) was as compared illiterate i.e. 42.28% similarly 72.20% people have primary education and 25.78% population have secondary level of population where as 2.04% have higher level of education.

- Ñ The marital status 76.27 %peoples are married where as 2.73% are unmarried.
- Ñ Among 109 respondents majority (19.83%) respondent are in age group (35-39)
- Ñ Educational status of respondents, 19.00% are literate and 81.00% are illiterate. 73.91% respondents have primary level of education and 26.09% have secondary level of education.
- Ñ The average means age at marriage is 17.74 in study area.
- Ñ The majority of respondents use the stream and river (62.82%), (20.66%) use tap and (16.52%) use dug well.
- Ñ The study area have (99.71%) respondents are Buddhist religion, the study area have only one is Hindu.
- Ñ According to occupational status of this study area 58.69% respondents are engaged in agriculture sectors only.
- Ñ Majority 80.99% respondents reported no experience of child loss.
- Ñ Out of total respondents 38.02 % reported their annual income between Rs 20,000-30,000.
- Ñ According to knowledge and use of family planning 76.86% respondents reported knowledge of F.P. where as 23.14% have reported no knowledge of family planning like wise.
-) Mean CEB is high (4.18) in age group (45-49) years.
-) The mean CEB is high(4.00) of those respondents who head got marriage in age group 9-14 years.
-) The mean CEB is high (4.04) of those respondents who are illiterate as compared illiterate which mean CEB 2.30.

-) The respondent who are engaged in agriculture sector is high mean CEB i.e. 4.39.
-) Mean CEB is reported high (3.30) from those respondents who are not using family planning methods.

Conclusion

This study is to examine the fertility behaviour of Bhote women in Hatiya VDC, Sankhuwa-Sabha. Women status indicators such as: age, education, occupation, age at marriage, knowledge and use of contraception and child lose experience have been carried out to examine the relationship between the status of and fertility behaviour in Hatiya VDC, Sankhuwa-Sabha in this study following conclusion were drawn.

-) The higher percentage of female respondents is in age group 35-39 years.
-) In these VDC, the literacy rate and level of education is poor.
-) In these study area early marriage system is high.
-) More than half percent female reported cycle facilities in their households.
-) Most of the Bhote women were engaged in agricultural sectors.
-) Annual income of respondents seems to be minimum level.
-) The study shows that when women lost their child, they will be motivated to replace their dead children. In this situation higher child loss promotes women to reproduce more children.
-) There is inverse relationship between use of family planning methods and fertility behaviour.
-) It has been seen that an increase of age of women, the mean CEB of women also increases.

-) There is inverse relation between education or literacy rate and mean number of CEB of respondents.
-) Mean CEB has been seen affected directly from status of occupation. The mean CEB can be found of those women who engaged in agriculture sectors

6.2 Recommendations

Education is more important in every aspects of life for both male and female, in Hatiya VDC educational condition is very poor. Female literacy is found very low to compare with male. Government should implement several programmes to educate both women and their husband because the education one or more major factors in reducing fertility. Higher level of education of women makes them consciousness about small family size.

To achieve a lower level of fertility infant, mortality rate should be reduced child loss promotes women to reduce more children. She will motive to replace her dead child. Therefore reducing of infant and child mortality is such higher important factor of decreasing fertility. Hence, government should improve nutrition and establish maternal and child health's care centre, maternal education, free mobile medical facilities and awareness immunization. Information, education and communication service and supply of family planning method should be expanded for increasing prevalence of contraceptive use in Bhote community.

Shifting of women from agriculture to nonagricultural sector is likely to be negatively associated with fertility. Government should promote special sets females employment and create job opportunities is non agriculture sectors.

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APPENDIX

TRIBHUWAN UNIVERSITY CENTROL DEPARTMENT OF POPULATION STUDY Fertility Behaviour of Bhote Community (A Case Study of Hatiya VDC in Sankhuwa-sava District)

A. General Information:

1. Name of Respondent:

2. Name of Households :

3. VDC/Ward:

FAMILY BAGROUND

line No	Usual Resident	Relationship to Head of Household	Sex	Age	Marital Status Age 10 and Over	
	1. Name of the person who usually live with household	2.What is the relationship to the head of the household	3.Male/female	4.How old are you	5.Has ever been married?	If yes, has started living with her?
			M F	In Year	Yes , No	Yes, No
01						
02						
03						
04						
05						
06						
07						
08						
09						
10						
11						
12						

Codes For

01 Head

02wife or husband

03 Sons or Daughter

04 Son-in –law

or Daughter-in –law

o5 Grand Child

o6 Parent

07 Parent-in-law

08 Brothers or Sister

09 Brother-in-law or Sister –in-law

10 Nephews, Nice

11 Co-wife

12 Don't know

13 Other relat

Household' Background

No	QUESTION AND FILTERS	CODING CATEGORIES
1	What is the main source of drinking water for members of year household?	Piped water-----1 Dug well-----2 Tube well----- 3 Other-----36
2	Do you share this facility with other shares hold?	1. Yes-----1 2. No-----2
3	Does your household have: 6 Electricity? 7 Radio? 8 Television? 9 Telephone? 10 Bicycle?	Yes No Electricity--1 2 Radio-----1 2 Television---1 2 Telephone----1 2 Bicycle-----1
4	What is the religion of the Hindu of the household?	Hindu-----1 Buddhist-----2 Christian-----3 Other-----36
5	Does your husband have any agricultural land?	Yes-----1 No-----2
6	If yes, which types of land are using?	Own-----1 Rented-----2 Other-----36
7	What is your husband occupation?	Agriculture-----1 Service-----2 Wage-----3 Other-----4
8	How much annual income your husband's?	Rs.-----

Respondent Background

No	QUESTION AND FILTERS	CODING CATEGORIES
9	Have you ever attended school?	Yes -----1 No -----2
10	What is the highest grade you completed?	Grade <input type="text"/> <input type="text"/>
11	Do you usually read a newspaper or magazine?	Yes-----1 No -----2
12	Do you usually listen to radio everyday?	Yes-----1 No-----2
13	Do you usually watch television	Yes-----1 No-----2
14	Are you currently married or are you divorce or separated?	Currently married----1 Widowed -----2 Divorced Separated---4
15	Is your husband living with you now or is he staying everywhere?	Living with her-----1 Staying everywhere-----2
16	Does your husband have any other wife beside yourself?	Yes-----1 No-----2
17	How old were your when you first got married?	Age----- <input type="text"/> <input type="text"/>

Reproductions

No	QUESTION AND FILTERS	CODING CATEGORIES
18	First I would like ask about all the berths you have had during your life. Have your ever given a birth?	Yes-----1 No-----2
19	Do you have any sons or daughter to whom you have given birth who is now living with her?	Yes-----1 No-----2
20	How many sons live with you? and how many daughter live with you?	Sons at home-- Daughter at <input type="text"/> <input type="text"/> <input type="text"/> home-- If none, record---00
21	Do you have any son's or daughter to whom you have given who are alive but don't live with you?	Yes-----1 No-----2
22	Have you ever given birth to a boy or girl who was born alive but later died?	Yes-----1 No-----2
23	How many pregnancies have you had that didn't end in a live birth?	Boys dead-- Girls' dead If none record ---00 <input type="text"/> <input type="text"/>
24	How many pregnancies have you had that didn't end in a live birth?	Pregnancy losses <input type="text"/> <input type="text"/>
25	Did you give any birth during the last twelve month period?	Yes-----1 No-----2
26	If yes, how many sons and daughter gave you birth in the twelve month period?	Sons--- <input type="text"/> <input type="text"/> Daughter <input type="text"/> <input type="text"/>
27	Are you pregnant now?	Yes-----1 NO-----2
28	How many children, do want to give a birth?	Number ----- <input type="text"/> <input type="text"/>

Contraception

No	QUESTION AND FILTERS	CONDING CATEGORIES
29	Have you heard any kind of family planning?	Yes-----1 No-----2
30	Which ways or method have you heard about?	Female sterilization---1 Male sterilization----2 pill-----3 IUD-----4 Injectables-----5 Nor plant-----6 Condom-----7 Withdraw-----8
31	Have you or your husband ever used anything or tried in any why to delay getting pregnant?	Yes -----1 No-----2
32	Are you or your husband currently doing something going any method delay getting present?	Yes-----1 No-----2
33	Where do you get the family planning method?	Hospital-----1 pharmacy-----2 Health post-----3 Shop-----4 Friends-----5
34	How many children have you born when you first started going contraception?	Sons----- <input type="text"/> <input type="text"/> Daughters----- <input type="text"/> <input type="text"/>