CHAPTER I

1.1 Introduction

Fertility is one of the major components of population change which is known as child bearing process. It is biological phenomenon, which determined by the biological and physical factor and their interplay with social, cultural, economic and modernization factors. Actually, fertility plays vital role to increase population size or structure. Fertility has not inversely relationship with mortality because fertility can be high if mortality is high. In 1981 the fertility rate of Nepal was high including all developing countries after then the fertility rate decreased slowly. The population growth of Nepal was 2.25 from 1991 to 2001. The NDHS 2006 recorded 3.1 TFR. In some developed countries Total Fertility Rate (TFR) is found replaced level such as French, Slovakia, Moldova, Sanmarino and Solvenia. There are less than 1.5 births per women at reproductive ages (Acharya, 2007). Therefore, these countries have adopted pro-natalist population policies. High fertility rate creates many problems, such as unemployment, poverty and imbalance in environment

Fertility is the child bearing performance of individual's, couples, group or population. It is contrasted with fecundity, the theoretical capacity to reproduce which may or may not lead to fertility. The term natality is used to refer to the most general analysis of childbearing through this usage is becoming less common and term fertility is commonly used to cover all aspects of reproduction. Measure of fertility normally refers only to live birth (Pressat, 1985).

Nepal has experiencing a high level of fertility that has 3.1 TFR (NDHS, 2006). The government has made several efforts to reduce

fertility since 1965, high economic value of children, socio-economic cultural norms favouring sons, low female's literacy in Nepal beside this persistence or high fertility of Nepal and is also attributed to lake of knowledge about and access to contraceptive five particularly reliable methods. (Tuladhar, 1989).

Health, family planning and education institution are regarded 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 taken into account at both the individual and social levels which have an impact on child survival and fertility relationship (UN, 1994).

1.2 Statement of the Problem

All under developed countries of the world are facing the problem of rapid population growth. It is due to high fertility which is major constraint to development for developing countries. It creates many problem, i.e. low level of living standard, unemployment, migration, education and socio-economic problems.

The fertility of Nepal is declining but can be considered high due to the universal marriage, early age at marriage, son preference, demand of children for social, economic and cultural belief. More than 86 percent people are living in rural areas in Nepal (CBS, 2001). They do not understand easily the impact of population growth. They think "Child is gifted by god" higher fertility indicates larger family size. They are failure to provide good education, health and other fundamental needs because of their low.

Nepal is a multi-ethnic nation with diverse languages, religious and cultures. People of different caste and ethnicity are lively in Nepal. The fertility is different among these castes and ethnicity. The Nepalese government had adopted anti-natalist policy for focusing on family planning since the third development plant in 1970, although the fertility rate is still high especially of Janasati communities. Among them Rajbanshi is a backward caste lived in the eastern part of Nepal. The fertility rate of Rajbanshi community is higher than national level. The CEB of Rajbanshi community in Lakhanpur V.D.C. is 4.05 (Kheral 1998). The main cause of prevailing high fertility in Rajbanshi community is almost universal marriage system. It is an indigenous and traditional characterized with more traditional value which encourages higher number of children. Use of family planning method is very important for reducing the fertility. Contraceptive prevalence rate is very low in Nepal (CBS 1995) and even low in Rajbanshi community to compare the national level. Lower motivation, people limited assesses to contraceptive devices, and lack of community participation contributed to lower use of contraception among Rajbanshi couple.

The study area Lakhanpur village development committee in Jhapa district, where different communities of people having different socio-economic and demographic characteristics are residing. But in this study only Rajbanshi community has been taken. In general education, occupation, age at marriage, childloss experience, level of income and use of contraception are supposed to be confident as the determining factors of children ever born. Therefore, this study aims to highlight the contribution of these factors in lowering the number of children ever born.

1.3 Objectives of the Study

The general objective of the study is to asses the fertility behaviour of Rajabanshi community of Jhapa district. The specific objectives of the study are as follows:

1. To identify the demographics and socio-economic characteristics of Rajbanshi community. .

2. To analyze the effect of family planning, knowledge and behaviour on fertility among the Rajbanshi community.

3. To examine the relationship between CEB and demographic and socio- economic characteristics.

1.4 Significance of the Study

This study is concentrated to the place where the majority of Rajbanshies are residing so the findings of this study can be applied to them. This study is significantly important since the study of fertility behaviour has not been proceeded so far. Despite the resource and time constraint, the study has become so desirous that population education providers would significantly benefited from this study.

This will be very important event for the concerned people and agencies, NGO/INGO, planners and policy markers, for future researchers both foreign and natives social workers and politicians of the country in relation to their interest such as demographic and national integration. Hence his study is timely and appropriate.

1.5 Limitation of the Study

No study can be free from the limitations and this study is not an expectation of this fact. So, this study has the following limitations.

- This study is limited to fertility behaviour of Rajbanshi community only, not other caste in Lakhanpur V.D.C., Ward No. 1, Jhapa district.
- Limited socio-economic and demographic variables are considered to explain the fertility behaviour in the terms of CEB.
- The study is limited to socio-economic study of the population and age group of people especially to currently married women of age 15-49 years.
- Psychological, emotional and cultural factor one not include for the assessment of fertility behaviour.

1.6 Organization of the Study

This study is organized into seven major chapters. The first chapter deals with general background of the study, significant of the study, estimation of the study and organization of the study The second chapter deals with the literature reviews 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 analysis. The fourth chapter deals with socio- economic and demographic characteristics of the population and respondents. The fifth chapter deals with analysis of fertility of currently married women by socio- economic and demographic variables. The sixth chapter deals the basic measure of fertility and the last chapter presents the summary, conclusions and recommendations.

CHAPTER II

LITERATUR E REVIEW AND CONCEPTUAL FRAMEWORK

2.1 Theoretical Literature Review

Fertility is major component of rapid population growth of Population. Demographers and social scientists are even today busy in research of systematic theory which would provide explanations for change in fertility level and differential in fertility. Even fertility is determined by different physichological factors and their interplay with social cultural economic and modernization factors.

The theory of demographic transition presented by frank Noteston in 1945 described the transition from high to low fertility representing a shift from natural fertility to family limitation. (Loiberstion, 1987:96). The theories of demographic transition stimulated a number of studies that analyzed the relationship between socio- economic development and fertility. In the countries of being popularized demographic transition, fertility decaling was mainly due to decline in death rate and family limitation norm resulting the process modernization, which involves rising living standards of life, rising income, rising education and advance in sanitation and media knowledge (UN, 1973:59).

Davis and Black in 1956 focused in the industrial mechanism in society and listed 11 intermediate variables which are related to phenomena of fertility. These intermediate variables are centred around intercourses, conception and gestation. As the each process is biological cultural and economic factors, these affect all the stages of childbearing. These eleventh intermediate variables are categ`orized in to three groups.

i. Factors affecting exposure to intercourse (intercourse variables)

ii. Factor affecting exposure to conception (conception variables)

iii. Factor affecting gestation and successful parturition (gestation variables)

Each of those intermediate variables can have either a positive or a negative effect on fertility. The fertility level in any society is determined by the combined effect of all these variables. All of the variables are presented in every society. Each can be operated to reduce or enhance fertility (Bhende and Kantikar 2004).

According to john Bongaarts, the proximate determinants of fertility are the biological and behaviours factors through which social, economic, psychological and environment variables affect fertility. Bongaarts (1983) has identified seven set of proximate determining variables affecting fertility which are age at marriage and marital disruption, onset of permanent sterility, duration of postpartum infecundability, fecundability, use and effectiveness of contraception, spontaneous intrauterine mortality and induced abortion. Later he proposed only four proximate variables that affect directly in determining the fertility levels. They are proportion married, contraception, post-partum infecundability and abortion. These four proximate determinants are main determinants to reduce the fertility in Nepal (MOPE, 2000:27).

Malthus (1766-1834) attempted to investigate, what the natural increase in population would be, if left unchecked and the rate at which the means of subsistence could be increased. On the basis of these two questions, he framed two of his basic propositions that population tends to double itself every twenty five years , thus increasing in a geometrical

ratio, while even under the most favourable conditions, agricultural produce increase each twenty-five years only by an equal quantity thus increasing only in an arithmetical ratio. He concludes: "Taking the whole earth- the human species would increase as the numbers 1, 2, 4, 8, 16, 32, 64, 128, 256 and the subsistence as numbers 1, 2, 3, 4, 5, 6, 7, 8, 9. In two centuries, the population would be to the means of subsistence as 256 to 9"

Malthus recognized that powerful checks where constantly in operation to obstruct population growth and classified them under two headings. "The first of these checks may, with propriety, be called *preventive check* to population, and the absolute necessity of their operation in the case supposed is as certain and obvious as that man can not live without food". Malthus included *moral restraint* and vice as voluntary checks based on man's reasoning faculties. While further elaborating on these two preventive checks, Malthus described *moral restraints* as "Abstinence from marriage, either for a time or permanently, from prudential consideration, with a strictly moral conduct towards the sex a in the interval. And this is the only mode of keeping population on a level with the means of subsistence which is perfectly consistent with virtue and happiness". (Bhende and Kantikar, 2004).

The threshold hypothesis developed by United National (UN) in the year 1963 indicates that there is a interrelationship between fertility rate and the general socio-economic development of the society. According to the hypothesis, decreases in fertility after a society have reached a certain level of social and economic development (UN, 1973).

The threshold hypothesis of fertility has identified the 12 factors responsible for explaining the fertility. They included per- capita income,

Energy consumption, Urbanization, non-agricultural activities, Hospital bed, Life expectancy at birth, Infant morality, Early marriage, News paper circulation, Radio receiver, and Cinema attendance.

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

Easterlin (1975) analyzed human fertility behaviour in systematic manner, which states that parents are more concerned about the number of living children rather than number of birth. According to him fertility is the functional outcomes between supply of potential output (i.e. cn) and demand for surviving children (i.e. cd) which together determined by motivation of fertility regulation (i.e rc) if the potential output of children is smaller than demand (cn<cd) there is no desire to limit fertility. Such a situation of "excess demand" means to increase fertility. On the other hand if the potential out put of surviving children is greater than demand for surviving children (i.e. cn>cd) this could be considered as a situation of" excess supply." In this situation, parents would be faced with the prospect of having unwanted children. He concluded that motivation attitudes and access are the three important factors influencing adoption of fertility control (Bhende and Kantikar, 2004)

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

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 wealth and insufficient nutritional intake, inaccessibility of quality family planning and its unmet demand are the determining factor of high fertility of Nepal. Communication between husband and wife regarded as one of the responses for not using contraception in Latin America and Asian societies (Tuladhar, 1789:210). 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 educating than among the older and uneducated women (Tuladhar, 1989:212).

2.2 Empirical Literature

The main factor of population increase in most of the developing countries like Nepal is low level of mortality rate and high level of fertility rate.

Different number of studies in fertility which attempt to summarize the studies regarding the determinants of fertility are selected and presented below.

2.2.1 Education and Fertility

Education directly determines fertility behaviour of human being. We are seeing that the relation of these two variables is inversely proportion it means increase in educational levels decrease in fertility rate and vice-versa. A study showed high fertility among the women with elementary level of education than graduate in USA (UN, 1973).

Education has been considered as catalytic agent to reduce fertility in Nepal. Educated women are more aware of the issue of quality of children than non- educated (Risal and Shrestha 1989). 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 than illiterate with CEB 2.8 (CBS, 1991).

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

In Nepal level of fertility is inversely related to women's educational attainment; decreasing rapidly from 3.9 births among women with no education to 1.8 birth among women who have SLC and higher leave of education (NDHS, 2006).

2.2.2 Occupation and Fertility

Female in different occupation is found to have different fertility level. The employment of women outside the home reduces the level of fertility behaviour. In every region women with occupation in modern sector of economy had smallest member of children ever born than women involved in traditional sector of economy . Those who had never worked had an average likely to have more children than women in any of the occupational group. In oceanic countries the difference in mean CEB was found to be 2.2 children between women who work and who did not (UN, 1987).

Nepal is agriculture based country; large proportion of the country's labour 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 engaged in agriculture, whereas less than one percent of them work as professional and technical sectors and generally lower level and low paid job (Risal and Shrestha, 1989: 56).

2.2.3 Age at Marriage and Fertility

Age at marriage is also one of the determinants of fertility. There is also inverse relationship between age at marriage and fertility in Nepal. In Nepal, age at marriage of male is 22.9 where as 19.5 for female (CBS, 2001) . Nepalese society does not allowed the sexual union of unmarried people. So marriage is the most essential in our society. Nepal is a country with multi- lingual, multi-religions and multi- ethnic society so CEB are different to their age, religion and age at marriage.

Women who have started cohabitation at the earlier ages had 3.7 CEB where as the women cohabitation in 15.17 years had 2.3 CEB (Acharya, 1996). The value of singulate mean age at marriage have increased by 3 years for male and 4 year for females since 1961 and these are in 2001 about 23 for males and 20 years for female data shows that of definitely decline in male and female difference in SMAM from 4 years during the early 3 decades (1961-1991) to 3 years during the immediate last four decades (1961-2001) (CBS, 2003).

2.2.4 Cultural, Religions Value and Fertility

Different fertility can be observed in the different cultural and religious societies. By cultural and religion Nepali society is pro-natalist

(Dahal, 1987) . A major cultural component of Nepali women is child bearer. A women becomes real women, when she performs her role as mother and her status is fully validated after the successful birth of many children especially sons and childless is a curse (Dahal, 1987). Total marital fertility has observed different among different caste and ethnicity group. For example Total Marital Fertility Rate (TMFR) for Brahmin was 5.67, for Chhetri was 6.07, for Newar was 4.89 and for Tamang was 7.5 (Niraula and Shrestha, 1997:24).

2.2.5 Contraceptive Use and Fertility

Nearly two thirds of women do not intend to use contraception in the future because of fertility related reasons. Most of these women (38 percent) report themselves to be sub fecund or in fecund. Twelve percent of women do no intend to use because of opposition to use, with most of them citing religious opposition as a reason for non-use. Eighteen percent of women cited method related reason for non use, the most important of these being fear of side effects (10 percent). Women age 15-29 are most likely to cite opposition to use (57 percent) with religious opposition being the primary reason (44 percent). Nineteen percent of young women also mentioned method related reasons, primary fear of side effects (13 percent) as a major reason for non-use in the future. On the other hand, 72 percent of women age 30-49 cited fertility related reason for non-use in the future, with 42 percent reporting themselves as sub-fecund or in fecund. (NDHS 2006)

It is widely believed that family panning awareness help to control population growth in the country. Nepal Living Standard Survey (NLSS II) estimates 71 percent of women aged 15-49 year are knowledgeable about at least one of the family planning method ,46 percent have

ever used it and 30 percent are currently using some form of planning method (Pill, IUD, Injectable and Condom) As one would expect, the proportion of women's knowledge at least one of the family planning methods is higher in urban areas (91%) than in rural areas (74%) . Such knowledge is likely to be higher among younger cohorts, then other cohort. The current use rate of family planning is higher among women aged 35-39 years (NLSS,2003/04).

The majority of women (68 percent) and men (75 percent) age 15-49 have heard a family planning message recently on the radio. Whereas only 49 percent of women and 48 percent of men have heard family planning message on television. Fifteen percent of women and 38 percent of men have heard about family planning in the newspaper of magazine forty percent of women and 75 percent of men have been a family planning message on a poster or billboard, and 6 percent of women and 14 percent of men have been exposed to family planning messages at a street drama. One fourth of women and one-tenth of men have not been exposed to family planning messages in any of the specified media sources.(NDHS, 2006).

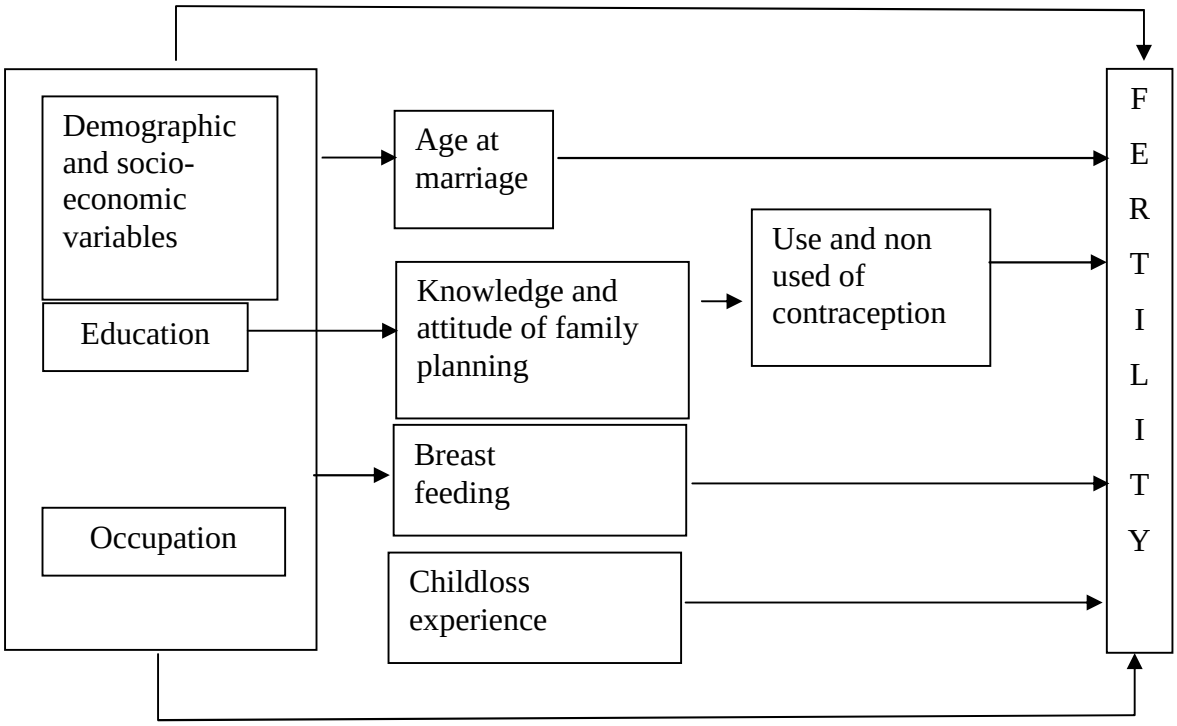
In order to know the history of Rajbanshi caste, it is necessary to study the ancient "Kamrup" history. "Kamrup" kingdom was started in eastern part of the Koshi River. In 1250 "Kamrup" state also known as "Kantipur". According to ancient history of "Kamrup" king of Kochebansi and bought the system of Rajbanshi. Altogether from the historical books. We can get Mechhe, Dhimal etc. caste/ethnicity also translated in to Rajbanshi caste. According to district profile of Jhapa the total number of Rajnanshi seems to be 73348. Out of Nepal, the numbers of Rajbanshi are 52 lakh in Indian and Bangal, 2 lakh in Bhutan which information can get from greater National conference on Rajbanshi which

was held in Indian Bihar in 1986. Out of Nepal the numbers of Rajbanshi are 52 lackh in India and Bangal, 2 lakh in Bhutan which uinformation can get from greater National Conference on Rajbanshi which was held in Indian Bihar in 1986. The international conference on Koche Rajbanshi was held in Jhapa district in 1955. According to Indian Assam history, koch index is not suitable for that caste ethnicity. So, state of Koche index, Rajbanshi is practicable for that ethnicity. King Bishaw shing also had bought center of Rajbanshi in 1915.

2.3 Conceptual Framework

The literature review provides sufficient backround to conceive a conceptual framework of the study by establishing relationship among various socio-economic and demographic variables responsible for variation in fertility of currently married Rajbanshi, female in Lakhanpur VDC. In order to void complexity only selected socio-economic variables (education occupation) and demographic variables (age at marriage, child loss experience and contraceptive) which have directly influence on fertility are considered in this study. The framework includes occupation and education as independent socio-economic variables and age at marriage, child loss experience and contraceptive prevalence as intermediate demographic variables which have direct or indirect influence on dependent variable as fertility.

Framework


Demographic and socio-economic variables
Education
Occupation
Age at marriage
Knowledge and attitude of family planning
Use and non used of contraception
Breast feeding
Childloss experience
FERTILITY

CHAPTER III

METHODOLOGY

3.1 Selection of the Study

The study area is selected as Lakhanpur VDC, of Jhapa District in eastern part of Nepal. The VDC is located at about 40 km west from district headquarter, Bhadrapur Municipality. The boundary of this VDC is Topgachhi VDC in the east, Damak Municipality in the West ,Bajho VDC of Ilam District in the north and Gauradaha VDC in the South from Lakhanpur VDC.

There is different caste, ethnic and religious group of people having different socio- economic and demographic characteristics living in Lakhantpur VDC. No study has been conducted on the fertility behaviour of Rajbanshi women in recent time of this VDC. This study is conducted only among Rajbanshi community which is back-ward in the socio- economic and demographic aspects.

3.2 Research Design

It is based on primary data and information. Structured questionnaire are used as major tool of information collection procedure for the data needed in this study. Both descriptive as well as exploratory types of research method are applied to make the job easies of respondents in answering the question for the purpose of identifying fertility behaviour of Rajbanshi community. No sophisticated mathematical analysis and interpretation have been used in the study.

3.3 Sampling Design

This study covers the total household of Rajbaonshi community of Lakhanpur VDC ward no. 1, on the basis of the records presented by

VDC office (Village profile, 2008) 320 household and 3212 population of Rajbanshi in Lakhanpur VDC. Among them 97 household was found Rajbanshi community in ward no. 1, of Lakhnpur VDC. For the study purpose all 97 household was taken. From the 97 households there were found 105 eligible women (ever married women aged 15-49 year). Because 7 households are not found eligible women and 90 have more than one eligible woman. The study has enumerated and picked up the various information which is necessary of the whole household as the census of Rajbanshi community.

3.4 Data Collection

The study was based on primary data collection only for Rajbanshi households in Lakhanpur VDC Ward No. 1. All the total households of Rajbanshi community of the Lakhanpur V.D.C. Ward No. 1 are included in this study. The eligible respondents were 15-49 years of age currently married women. But the necessary household's information were acquired from the heads of the households. Other necessary data are collected also from other secondary sources.

3.5 Questionnaire Design

Two types of questionnaire were used to get information. They were (i) Household questionnaire and (ii) individual questionnaire. The household questionnaires were used to collect the information on socio-economic and demographic measures of each member of the household. The main objective of the household questionnaire was to identity the eligible respondents for individual interview.

The individual questionnaire was use to collect the information from currently married women aged 15 to 49 year. Information was on age at marriage, child loss experience, educational background, knowledge of family planning, participation in decision making, and children ever born to find out fertility behaviour of women

3.6 Method of Data Analysis

At first, the collected data have been edited, tabulated and then analyzed using both quantitative and qualitative tools. Quantitative data have been tabulated and analyzed in terms of statistical tools are used in the analysis of primary data

CHAPTER - IV

DEMOGRAPHIC AND SOCIO-ECONOMIC CHARACTERISTICS OF STUDY POPULATION AND RESPONDENTS

4.1 Socio-economic Characteristics of Study Population

4.1.1 Setting of the Rajbanshi Community

This study is focused on one of the indigenous tribal community, Rajbanshi, residing in Lakhanpur village development committee. This VDC is in Jhapa district eastern Terai of Nepal. It is about 50 kms far (west) from the district headquartered, chandragadhi. This VDC boarders the Damak Municipality to the north-west, Bajho VDC of Illam district in the north, Gauradah VDC at south and Topgachhi VDC in the east. The brief introduction of Rajbanshi community is presented below.

Rajbanshi is one of the backward tribal community of Eastern Nepal. They are mostly found in north bangal, purnima of Bihar, Meghalaya district of Assam, Arunachal Pradesh and Mijoram of India. They consider Kutch Bihar of India as their origin place (Panta, 1983). The Rajbanshi found in Eastern Nepal are migrants from Bengal. Bihar and Meghalaya of India. This tribe is are residing from 1708 A.D. Mainly in Jhapa Morang district of Eastern Terai of Nepal. Agriculture is their main occupation and some of them are engaged in preparing their traditional good "BHUJA". The female of this community can prepare simple Jute Carpet called "CHATTI". Rajbanshi have no more caste they show some Chhetrian characteristics and some Rajbanshi considers themselves as Singh and Chaudhari. The Rajbanshi who prefer them as

Chaudhari are mainly found in Biratnagar side. They have four "GOTRA" i.e. Bharadhouj, Kasyap, Dhanesworn and Shandip.

The physical structure of Rajbanshi is similar to some tribes of theeast Terai i.e. Satar Dhimal etc. in some extent. They are black skinned, round and flat faced, long hair and strong muscled body. The female were PFJANI and blouse and male were DHOTI and KAMEJ. They have their own language i.e. Rajbanshi language. The young generation can speak Nepali language easily. The female use both traditional and modern ornaments in their neck, ears and nose. These ornaments are generally made of silver. Permanent painting of their arms with flower shape is one of the main feature of the female of Rajbanshi community.

This tribe is the follower of traditional beliefs and are backward both economically and socially. Literacy rate of this tribes is very low but school enrollment of this children is increasing now a days. Although they are economically poor. They expend a lot of wealth in celebrating their festivals.

4.1.2 Age-sex Structure of Study Population

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

Table 4.1.1: Distribution of Study Population by Age-sex Composition

Age group	Male		Female		Total		Sex Ratio
	Number	Percent	Number	Percent	Percent	Number	
0-4	35	12.07	31	11.96	11.83	66	113.90
5-9	33	11.38	34	12.14	12.13	67	97.06
10-14	29	10.00	25	9.78	9.54	54	116.00
15-19	25	8.62	27	9.42	10.31	52	92.60
20-24	27	9.31	21	8.70	8.62	48	128.57
25-29	30	10.34	20	9.06	7.63	50	150.00
30-34	19	6.55	16	6.34	6.11	35	54.29
35-39	20	6.90	18	6.88	6.87	38	111.11
40-44	16	5.52	12	5.07	4.58	28	133.33
45-45	15	5.17	11	4.71	4.20	26	136.36
50-44	13	4.48	13	4.71	4.96	26	100.00
55-59	10	3.45	10	3.62	3.81	20	100.00
60+	18	6.21	24	7.61	9.16	42	75.00
Total	290	100.00	262	100.00	100.00	552	108.28

Source: Field Survey, 2009.

Age is most important factor for studying fertility. The study covers 552 population and 97 households. Out of the total population, 52.54 percent are 52.54 percent male and 47.46 are female. Table 1 shows that the highest proportion of population was found in age group 5-9 (12.13). This indicates that higher proportion of population is in lower age group which is result of higher fertility. Similarly, lower proportion of population was found in age group 55-59 (3.62) indicating low life expectancy at birth.

Hence, the sex ratio of Rajbanshi population in study area is found 108.28 which is higher than national level. This shows the male population is higher than female population.

4.1.3 Dependency Ratio

Dependency ratio is define as the number of persons who are supported by population of working ages. It is obtained as number of dependent population as percentage of population of working ages.

Table 4.1.2: Dependency Ratio of Study Population

Dependency	Dependency ratio	Number
Child dependency	57.89	187
Old dependency	13.00	42
Total dependency	70.89	229

Source: Field Survey, 2009.

Table 2 shows that child dependency ratio is found to be 57.89 and old age dependency ratio is 13.00. The total dependency ratio was 70.89. It means 71 person depend upon 100 persons of working ages. In 2001 census, total dependency ratio of Nepal was 84.7 per 100 persons of working ages (CBS, 2003).

4.1.4 Education Status of Study Population

Education is the major component of the basic requirement for the social, political and economic development. Education plays vital role in the socio-economic status of community. Education status will be useful in an 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.

The Rajbanshi people who are knowing how to read and write is included in literate and those Rajbanshi people who can not read and write are included in illiterate in my study area.

Table 4.1.3: Distribution of Population by Educational Status

Educational Status	Number	Percent
Literate	275	56.58
Illiterate	211	43.42
Total	486	100.00
Educational attainment		
Primary (1-5)	147	53.45
L. Secondary & Secondary (6-10)	118	42.91
Higher (11^{+})	10	3.64
Total	275	100.00

Source: Field Survey, 2009.

According to table no. 4.1.3, it is known that more than half (56.58%) persons are literate and 43.42 percent are illiterate. Similarly 58.5 percent respondents have attained primary level of education, nearly 43 percent have attained secondary and only 3.6 percent respondents have attained higher level of education. It means more respondents have attained primary level of education than other level of education. It indicates that the literacy rate of Rajbanshi community is slowly increasing that helps to reduce birth rate of Rajbanshi community.

4.1.5 Marital Status of Study Population

Marriage is the primary event in the process of family formation. Martial status of population affects the level of fertility, because the boys and girls are allowed to have children only after marriage in Nepalese

society. The marital status of the study population is presented in table 4.1.4.

Table 4.1.4: Distribution of Study Population by Marital Status

Marital Status	Male	Percent	Female	Percent	Total	Percent
Unmarried	84	38.89	66	32.51	150	35.80
Married	126	58.33	126	62.07	252	60.14
Widow/Widower	6	2.78	11	5.42	17	4.06
Total	216	100.00	203	100.00	419	100.00

Source: Field Survey, 2009.

The table 4.1.4 shows that out of the total population, more than 60 percent are married and 35.80 percent are single. The window and widower population are 4.06 percent and no one is divorce or separate. The widow population is 5.42 percent and only 2.78 percent are widower. It indicates Rajbanshi widower are remarried after death of his wife.

4.1.6 Occupation of the Study Population

Occupational status is an important determinant for fertility and contraceptive behaviour. The statistics of the occupational structure of any population is useful for farming and it is considered as an integral part of socio-economic development policy. Those Rajbanshi people who are engaged their own field or Rent field of other is included in agriculture and people who are working each day in housing construction, farming and other cottage industries is included in wage labour, such as Rajbanshi people who sales chatpate and vegetables from their small shop are included in Business. Lower numbers of these people who are involving in government service, taken, service occupation in my study area. The occupational status of Rajbanshi population aged 10 years and above is presented in table 4.1.5.

Table 4.1.5: Distribution of study population by occupation according sex.

Occupation	Male	Percent	Female	Percent	Total	Percent
Agriculture	117	5.21	89	47.84	206	49.16
Service	12	5.15	10	5.38	22	5.25
Wage labour	31	39.06	69	37.10	160	38.19
Business	13	5.58	18	9.68	31	7.40
Total	233	100.00	186	100.00	419	100.00

Source: Field Survey, 2009.

Table No. 4.1.5 shows that 49.16 percent of total population (10 year aged and above) reported their occupational as agriculture. After that 38.19 percent of Rajbbanshi population is reported daily wage labour. Daily wage labour means those people who are worked hole day for gettins payment, specially in construction sectors. 7.40 percent Rajbanshi people are engaged in business sectors. They sell vegetables and other thing from their small shop and rest 5.25 percent are involved in service.

4.2 Demographic and Socio-economic Characteristics of Respondents

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

4.2.1 Age Distribution of Respondents

Age of women is very important factor in determining the fertility. If a girl married in early age, they have more children than other girls who are married in latest ages. The age composition of the respondents are presented in Table 4.2.1.

Table 4.2.1: Distribution of Respondent by 5 year Age Group

Age group	Number	Percent
15-19	9	8.57
20-24	18	17.14
25-29	21	20.00
30-34	26	24.76
35-39	15	14.29
40-44	11	10.48
45-49	5	4.76
Total	105	100.00

Source: Field Survey, 2009.

Table 4.2.1 shows that eligible women respondents are divided in the different 5 years age group. The highest percent (24.76%) eligible women are found in age group 30-34 and second highest percent (20.00%) is in age group 25-29. The least majority (4.76%) of eligible women seem in the age group 45-49. It indicates that most of eligible respondents are in 25 to 30 age group.

4.2.2 Age at Marriage of Respondents

In Nepal marriage takes place in early ages and it is almost universal. Universal marriage practices determine the fertility behaviours of women because the child bearing activities are legalized only after marriage in our country. In the context of Nepal, this phenomenon plays the active role that a girl has no culturally respect if she bears the baby before her marriage. Age at marriage was collected from different questions for the analysis. The age at marriage of respondent is present in Table 4.2.2.

Table 4.2.2: Distribution of Respondent by Age at Marriage

Age at marriage	Number	Percent
Below 15	10	9.52
15-19	72	68.57
20+	23	21.91
Total	105	100.00

Source: Field Survey, 2009.

The table 4.2.2 shows that 9.52 percent respondents are married during below 15 years, 68.57 percent married during 15-19 year and rest 21.91 percent married 20+ year. It clear that early age marriage trend seems in the study area which affects the fertility level of women to be high.

4.2.3 Literacy Status of Respondents

Education is main factor affecting the fertility of women. Educated women may have awareness about the fertility and they can communicate easily with her husband about contraception and ideal number of children. Table 4.2.3 presents the eligible women by educational status.

Table 4.2.3: Distribution of Respondent by Literacy Status

Educational attainment	Number	Percent
Literate	38	36.19
Illiterate	67	63.81
Total	105	100.00
Educational attainment		
Primary (1-5)	30	78.95
L. Secondary & Secondary (6-10)	6	15.79
Higher (11^{+})	2	5.26
Total	38	100.00

Source: Field Survey, 2009.

Table 4.2.3 shows that more than 36 percent of eligible women are literate and nearly 64 percent are illiterate. Out of 38 eligible literate women, 30 eligible women have attained primary level education and 6 have attained secondary level of education.

4.2.4 Religion Composition of Respondents

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 table no. 4.2.4.

Table 4.2.4 : Distribution of Respondent by Religion

Religion	Number	Percent
Hindu	95	90.48
Buddhist	3	2.87
Christian	7	6.65
Total	105	100.00

Source: Field Survey, 2009.

Table 4.2.4 shows that out of total respondents 90.48 percent respondents are Hindus, 2.87 percent reported Buddhist and rest 6.65 percent are Christian. It clears that Nepal is Hindu kingdom, so majority of respondents in study area seen as followership of Hindu religion.

4.2.5 Occupational Composition of Respondents

Occupation is major determining factor of economic status of people which directly affect fertility. Generally, it is said that higher level of occupation, lower level of fertility and vice-versa. The occupation status of respondents is presented table no. 4.2.5.

Table 4.2.5: Distribution of Respondent by Occupation

Occupation	Number	Percent
Agriculture	56	53.38
Service	5	3.81
Wage Labour	34	32.38
Business	11	10.48
Total	105	100.00

Source: Field Survey, 2009.

According to table no. 4.2.5, it is known that majority of respondents reported that their occupation is agriculture which accounts 53.33 percent, 3.81 percent service, 32.38 percent are wage labour and rest 10.48 percent respondents are engaged in business sectors in the study area.

4.2.6 Childloss Experience of Respondents

The childloss experience is one of the important factor which helps to determinant fertility. The childloss experience of study area is given in table 4.2.6.

Table 4.2.6: Distribution of Respondent by Childloss Experience

Age group	Number	Percent
0	89	84.76
1	10	9.53
2	5	4.76
3	1	0.95
Total	105	100.00

Source: Field Survey, 2009.

Table 4.2.6 shows that nearly 85 percent respondent have reported no childloss experience, 9.53 percent reported 1 childloss experience, 4.76 respondents reported 2 childloss experience and rest 0.95 respondent reported the 3 childloss experience in the study area.

4.2.7 Annual Income of Respondents

Income level has significant role in determining the life style of people which is directly related with fertility. High level income people have low level of fertility. The income status of respondents which was observed in study area give as follows :

Table 4.2.7 : Distribution of Respondent by Annual Income

Annual Income	Number	Percent
1000-5000	11	10.48
5000-10,000	31	29.52
10,000-20,000	34	32.38
20,000-30,000	20	15.05
30,000+	9	8.57
Total	105	100.00

Source: Field Survey, 2009.

Table no. 4.2.7 shows that 32.38 percent respondents reported the level of annual income between 10,000-20,000, 29.52 percent reported 5,000-10,000, 15.05 percent reported. 20,000-30,000, 10.48 percent reported 1000-5000 and rest 8.57 percent reported 30,000 income respectively. It shows that lower number of mean CEB of those Rajbanshi people who have high income.

4.2.8 Source of Drinking Water of Respondents

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

Table 4.2.8: Distribution of Respondent by Source of Drinking Water

Source of Drinking Water	Number	Percent
Dug well	13	12.38
Tube bell	95	87.62
Total	105	100.00

Source: Field Survey, 2009.

Table no. 4.2.8 shows that 87.62 percent respondents used drinking water from tube well and rest 12.38 percent respondents used drinking water from dug well. The above data shows most of the respondent use tube well water for drinking in the study area.

4.2.9 Means of Communication of Respondents

Communication is a important factor which plays vital role for determining fertility behaviours of couples. The following table shows means of communication of respondents in the study area.

Table 4.2.9: Distribution of Respondent by Means of Communication

Means of Communication	Number	Percent
Radio	85	80.96
Television	10	9.52
Telephone	9	8.57
Computer	1	0.35
Total	105	100.00

Source: Field Survey, 2009.

Table no. 4.2.9 shows that out of total respondents 80.96 have radio, 9.52 percent television, 8.57 percent telephone and rest 0.95 percent computer respectively of respondents in study area. This fact shows that means of communication directly the fertility behaviour of Rajbanshi community in the study area.

2.4.10 Knowledge and Use of Family Planning

One of the main objective of the study is to collect the information about knowledge and use of family planning. Use of family planning and contraceptive devices determine the fertility behaviour of any community.

Table 4.2.10: Distribution of Respondent by Knowledge and Use of Family Planning

Knowledge of Family Planning	Number	Percent
Yes	67	63.81
No	38	36.19
Total	105	100.00
User and non-users		
Users	38	56.72
Non-users	29	43.28
Total	67	100.00

Source: Field Survey, 2009.

Table no. 4.2.10 shows that the maximum number of the respondents have not knowledge about the family planning which comprise 63.81 percent and only 36.19 percent respondents have knowledge about family planning. Among those who have knowledge of family planning 56.72 percent are users and 43.28 percent are non-users.

CHAPTER-V

FERTILITY BEHAVIOUR OF THE RESPONDENTS

The main objective of this chapter is to deal with various socio-economic and demographic factors that can effect the children ever born (CEB) such as current age of respondents, age at marriage, occupational status. Childloss experience, religious status, educational status, contraceptive use, age at marriage and breast feeding practice. Fertility is taken as dependent variable and measured by number of children a women already have which is called children ever born. So CEB is taken as catalytic indicator of fertility.

5.1 CEB by Age of Women

The number of mean CEB is shown by various age group of mother. It has positive association with longer span of reproductive age of women. The number of children ever born to particular women is an aggregate measure of her lifetime fertility experience upto the movement at which data are collected. This does not provide the timing of birth.

Table 5.1: Mean CEB by Age of Women

Age group	Mean CEB	Number
15-19	0.80	9
20-24	1.97	18
25-29	3.10	21
30-34	3.20	26
35-39	3.94	15
40-44	4.87	11
45-49	4.93	5
Total	3.25	105

Source: Field Survey, 2009.

Table 5.1 shows that the mean number of CEB of women is 3.25 whereas mean number of CEB of women in age group 15-19 is 2.07. Highest mean number of CEB is 4.93 in age group 45.49 years. The mean number of CEB in age group 20.24 year is 1.97. It shows that when the age of married women increase than the mean number of CEB also increases in the study area. It means that there is positive relationship between age of women and mean number of CEB in study area.

5.2 Mean CEB by Age at Marriage

Marriage affect and determines the fertility. Low mean number of CEB could be expected for those who have married relatively at higher ages.

Table 5.2: Mean CEB of Respondents by Age at Marriage

Age group	Mean CEB	Number
Below 15	4.09	10
15-19	3.22	72
20+	2.44	23
Total	3.25	105

Source: Field Survey, 2009.

Table 5.2 shows that highest mean number of CEB 4.09 is found among those women who married below 15 year and lowest mean number of CEB 2.44 is found at age at marriage 20 and above years. Table no. 5.2 shows increase age at marriage of women decrease their mean number of CEB. There is inverse relationship between mean number of CEB and age at marriage of women in the study area.

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 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 5.3: Mean CEB by Educational Status

Literacy Status	Mean CEB	Number
Literate	2.53	38
Illiterate	3.97	67
Total	3.25	105
Educational attainment		
Primary	2.97	30
Secondary	2.63	6
Higher	1.99	2
Total	2.53	38

Source: Field Survey, 2009.

Table 5.3 shows cleary that literate respondents have lower 2.53 mean CEB of those respondents who are illiterate (3.97) . Similarly, mean CEB is high (2.97) of those respondents who have attained in primary education and lowest in those respondents who attained in higher education. It means higher level education of respondents have lower level of mean CEB.

5.4 Men CEB by Occupation

There is inverse relationship between occupational status of parents and number of CEB. In general, women work in agriculture were more

man power is needed. So, they want to produce more children being in agriculture sector. Women participating in others activities may produce fewer children so that differential occupation have differential fertility occupation have differential fertility behaviour.

Table 5.4: Mean CEB by Occupation

Occupation	Mean CEB	Number
Agriculture	4.07	56
Service	2.13	4
Wage labour	3.93	34
Business	2.88	11
Total	3.25	105

Source: Field Survey, 2009.

Table no. 5.4 shows that most of women are engaged in agriculture sector whose mean CEB is 4.07, 2.13 mean CEB of those women who are engaged in service, 3.92 mean CEB of those who engaged in wage labour and rest 2.88 mean CEB. Seems of those women who engaged in business sectors. In study area, women involved agriculture sector have higher mean CEB than those women who engaged in other sectors.

5.5 Mean CEB by Religions

Cultural and religious value is one of the effective factor of fertility behaviour. In this study there were three religious groups. Hindu, Christian and Buddhist. So that religious status is categorized in three parts which is presented in table 5.5.

Table 5.5: Mean CEB by Religion

Religion	Mean CEB	Number
Hindu	3.56	95
Christian	3.22	3
Buddhist	2.97	7
Total	3.25	105

Source: Field Survey, 2009.

Table 5.5 shows that there is highest mean CEB of those respondents who are Hindu, such as Christian and Buddhist respondents have 3.22 and 2.97 mean CEB respectively. According to table no. 5.5, we can say that, Hindu respondents have large number mean CEB and lowest in Buddhist respondents in the study area.

5.6 Mean CEB by Childloss Experience

There is positive relationship between childloss experience and fertility because when women losses her child, she will be motivated to replace her dead child.

Table 5.6: Mean CEB by Childloss Experience

Childloss	Mean CEB	Number
0	2.70	89
1	3.02	10
2	3.17	5
3+	4.11	1
Total	3.25	105

Source: Field Survey, 2009.

Table no. 5.6 shows that women having no childloss experience have lower mean CEB (2.70) than those women who lost more than 3 children have highest number of mean CEB (4.11).

It is seen that if women have higher number of childloss, their mean number of CEB also increases. There is positive relationship between childloss experience and mean number of CEB of women because women want to replace the dead child by giving next birth.

5.7 Mean CEB by Level of Income

Income level has significant role in determining the life style of people. High level income of people help to promote high level of life style which affect the fertility behaviour of couple. The mean CEB by level of income of respondents is presented in table no. 5.7.

Table 5.7: Mean CEB by Level of Income

Annual income	Mean CEB	Number
1,000-5,000	4.51	11
5,000-10,000	3.98	31
10,000-20,000	3.05	34
20,000-30,000	3.00	20
30,000+	2.96	9
Total	3.25	105

Source: Field Survey, 2009.

Table no. 5.7 shows that the highest mean number of CEB is found 4.51 of those respondents whose level of income is between 1,000 - 5,000. Such as 3.05 and 3.00 mean CEB of respondents whose level of income is between 10,000 - 20,000 and 20,000 - 30,000. The lowest mean number of CEB is found 2.96 of those respondents, whose level of income is 30,000 and above. This fact shows that high mean number CEB of those respondents who have low level of income and low number of

mean CEB is found of those respondents who have higher level of income in the study area.

5.8 Mean CEB by Knowledge of Family Planning

Family planning method is to prevent women form fertilization and stop giving birth or to increase birth interval. Using the birth control methods helps couple to manage the family size the preventing unwanted pregnancy. Family planning method directly effects fertility. The couple who knows the family planning method and using the method properly has lower fertility than non users and those have no knowledge about family planning method.

Table 5.8: Mean CEB by Use and Non-use of Family Planning Method

Knowledge of Family Planning	Mean CEB	Number
Yes	2.98	67
No	3.52	38
Total	3.25	105
User and non-users		
Users	2.10	38
Non-users	3.86	29
Total	3.25	67

Source: Field Survey, 2009.

Table 5.8 shows that out of 105 respondents 67 (63.8%) have knowledge about family planning method, whose mean CEB was found to be 2.98. Similarly 38 (36.19%) respondent have no knowledge about it whose mean CEB was found to be 3.33. Among them who have knowledge about family planning method 38 (56.72%) were users of family planning method, whose mean CEB was 2.10 and 29 (43.28%) respondents were non users of family planning method whose mean CEB is 3.86. The data reveal that the respondents who have knowledge use family planning method, their mean number of CEB was found lower and who have no knowledge are non-users their mean CEB was higher.

CHAPTER VI

SUMMARY, CONCLUSION AND RECOMMENDATION

6.1 Summary and Findings

This study has been carried out to examined the fertility behaviour of Rajbanshi community of an indigenous group of Nepal. The investigations is based primary data collected from the field survey conducted in November 2005. The study area is Lakhanpur VDC of Jhapa district. The total Rajbanshi household of this VDC is 320 and total population is 3,212. Among them number of Rajbanshi household is 97 their total population is 552 in study area.

- Among 97 households there were 552 population out of them 52.54 percent were male and 47.46 percent female.
- Child dependency ratio was 57.89 percent and total dependency ratio was 13.00 percent of these community.
- Out of the total population literacy is high (56.58%) as compared illiterate i.e. 43.42 percent. Similarly, 53.45 percent people have primary level education and 42.51 percent population have secondary level population where as 3.64 percent have higher level education.
- Out of 419 population aged 10 year and above are 60.14 were married 35.80 percent were unmarried and 4.06 percent were widow and widower.
- Out of the 419 total population age 10 year and above 49.16 percent were involved in a agricultural occupation. 38.19 percent

were in daily wage labour 7.40 percent were in business and rest 5.25 percent in service.

- Among total 105 respondents majority (24.76%) respondent are in age group 30-34 year.
- Among the 105 respondents 9.52 percent were married below 15 years of age and 4.77 percent married at above 21 years.
- Educational status of respondents, 36.19 percent are literate where as 63.81 percent are illiterate likewise, 78.95 percent respondents have primary level of education, 15.79 percent respondents have secondary and rest 5.26 percent have higher level of education in study area.
- Out of the total population 90.48 percent were Hindu 6.65 percent were Hindu 6.65 percent were Christian and rest 2.87 percent respondents were Buddhist in study area.
- The percent of respondents is high (53.33%) who are engaged in agriculture sectors.
- Majority (84.76%) respondents reported no child-loss experience.
- Out of the total respondents 10.48 percent respondents have annual income between 1000-5000, 35.38 percent respondents between 10,000 - 20,000 and only 8.75 percent respondents have 30,000+.
- Majority (87.62%) respondents use the tubewell water and rest 12.38 percent respondents were used dugwell water.
- Among the total respondents 63.81 percent have found knowledge about family planning method. The family planning method users

constitutes 56.72 percent among those who have knowledge about it.

- The mean number of CEB of 105 respondents was found to be 3.25. The highest mean CEB (4.93) was found in the age group 45-49 and lowest 0.80 in the age group of 15-19 years.
- The respondents who married at below 15 year have higher (4.89) mean number of CEB and who married at higher ages (above 21 years) have lower (2.09) mean number of CEB.
- There is inverse relation between mean numbers of CEB and literacy rate of respondents.
- The mean CEB can be found high (4.07) of those women who engaged in agriculture sectors.
- It was found that there is positive relationship between childloss experience and mean CEB. The respondents who lost more than 3 children have mean CEB 4.11 and those who was not lost child their mean CEB was found to be 270.
- Out of the total respondents, Hindu have highest mean CEB (3.56) than other religion.

6.2 Conclusions

The study attempts to examine the fertility behaviour of Rajbanshi women in Lakhanpur VCD Jhapa. Women status indicators such as age at marriage, education, knowledge and used of contraception and childloss experience have been carried out to examine the relationship between the status of women and fertility behaviour in Lakhanpur VDC Jhapa. In this study following conclusion are drawn.

- The highest percent of female respondents are in age group 30-34 year.
- In this VDC the literary rat and level of education is poor.
- The system of early marriage is high in study area.
- Most of indigenous Rajbanshi women were engaged in agriculture and daily labour sectors.
- Annual income of respondents seem to be medium level.
- The study shows that when women lost their child, they will be motivated to replace their dead children. In this situation higher childloss 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 mean numbers of CEB and literacy rate of respondents.

6.3 Recommendations

- Education is more important in every aspect of life for both male and female. In study area, education condition is very poor. Female literacy rate is found very low to compare with male government should implement several programs to educate both women and their husband because the education is one major factors in reducing fertility. Higher level of education of women make. Them consciousness about small family size.

- Childloss experience has stronger relationship with mean number of CEB, so that fertility reduction programme must be target not only to reduce the population size but also improve health status of women with many developmental projects in the community, awareness programmes should be implemented.

- Most of the women are engaged in agriculture and daily wage labour in the study area, therefore, there should be effective programmes to create employment opportunities for them in non-agricultural sector which helps to reduce the fertility rate and improve fertility behaviour.

- Low age at marriage ultimately leads high fertility. So, effective programmes should be launched to rise the status of women and avoid early marriage system in the study area.

- Information, education and communication (IEC) programmes should be lunched in the society to create awareness about women education, use family planning methods and contraception to reduce infant and child mortality by which women's status in the society would be increase and automatically reduces fertility.

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QUESTIONNAIRE
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Fertility Behaviour on Rajbanshi Community in Lakhanpur VDC in Jhapa District

Section A: General Information

1. Name of Respondents ……
2. Name of Household house ……..
3. Caste …….
4. Religion……..

S.N.	5. Households resident	6. Relationship to head of households	7. Sex	8. Age	9. Marital status	10 Age at marriage	11 Education	12. Occupation
			Male-1 Female 2	In year				
01								
02								
03								
04								
05								
06								
07								
08								
09								
10								
11								
12								

Codes for Q.N. 6

01 Head	06 Parent	11 Co-wife
02 Wife or husband	07 Parent in law	12 Other relative
03 Son or daughter	08 Brother or sister	13 Not related
04 Son in-law or Daughter in law	09 Brother in law or sister in law	14 Don't know
05 Grand child	10 Nephew, nice	

Codes for Q.N. 11

01 Literate	06 S.L.C. pass	
02 Illiterate	07 I.A. pass	
03 Primary Education	08 B.A. pass	
04 L. Secondary	09 Above B.A.	
05. Secondary	10. Don't Know	

Codes for Q.N. 9

01 Unmarried	06 Married but not living together
02 Married	
03 Widow/Widower	
04 Separated	
05. Divorced	

Codes for Q.N. 12

01 Agriculture	06 Pension
02 Service	07 Dependent
03 Business	08 Student
04 Household work	09 Foreign employee
05. Daily Wages Worker	10 Don't know

(13)	What is the main source of drinking water for members of your household ?	Piped water……....1 Dugwell…….2 Tube well……...…3 Other…….96
(14)	What kind of toilet facilities does your household have ?	Flush toilet……1 Ventilated toilet…....2 No facility…….3 Other…….96
(15)	Do you share this toilet facility with other household ?	Yes……1 No…….2
(16)	Does your household have: 1. Electricity 2. Computer 3. Radio 4. Television 5. Telephone 6. Bicycle	Yes No Electricity…..1 2 Computer..... 1 2 Radio…….1 2 Television…..1 2 Telephone…..1 2 Bicycle……..1 2
(17)	Does your family have any agricultural land ?	Yes……1 No…….2
(18)	If yes, which types of land are using ?	Own……1 Rented……2 Other……..3
(19)	What is your family occupation ?	Agriculture……1 Service……..2 Wage…….……2 Other……10
(20)	How much annual income of yours ?	Rs.....
(21)	How long have you been living	Year ☐☐

	continuously in this place of residence ?	Always……95
(22)	In what month and year where you born ?	Month…….. Don't know……96 Year……. Don't know……(96)
(23)	How old are you (complete age)	…….
(24)	Have you going to school ?	Yes……1 No…….2
(25)	Do you usually watch television?	Yes……1 No…….2
(26)	Are you married or unmarried ?	Yes……1 No…….2
(27)	If currently married, are you living with your husband ?	Yes……1 No…….2
(28)	Does your husband have any other wife beside yourself ?	Yes……1 No…….2
(29)	If yes, how many other wives does he have ?	Number…… Don't know……..96
(30)	First I would like to ask about all the births you have had during your life. Have your ever given a birth ?	Yes……1 No…….2
(31)	Do you have any sons or daughters to whom you have give birth who are now living with her.	Yes……1 No…….2
(32)	How many sons live with you ? and how many daughter live with you ?	Son at home ☐☐ Daughter at home ☐
(33)	Do you have any son's or daughters to whom you have given with who are alive	Yes……1 No…….2

	but don't live with you ?	
(34)	Have you ever given birth to a boy or girl who was born alive but later died ?	Yes……1 No…….2
(35)	How many pregnancies have you had that didn't end in a live birth ?	Pregnancy losses ☐
(36)	Did you give any birth during the last twelve month period ?	Yes……1 No…….2
(37)	If yes, how many sons and daughters gave you birth in the twelve month period ?	Son ☐☐ Daughter ☐☐
(38)	Are you pregnant now ?	Yes……1 No…….2
(39)	How many children, do you want to give a birth ?	Number……..
(40)	What is the ideal number of children in your views ?	Son……1 Daughter……...2 Total……..3
(41)	Where do you give birth.	Home……..…1 Health post…….2 Hospital……..3 Other place…….4
(42)	Have you heard any kind of family planning ?	Yes……1 No…….2
(43)	If yes, which ways or method have you heard about ?	Female sterilization..1 Male sterilization…..2 Pill…….3 IUD……...4 Injectables…….5

		Norplant……6 Condom……7 Withdraw……..8
(44)	Have you or your husband ever used anything or tried in any, why to delay getting pregnant ?	Yes……1 No…….2
(45)	Are you or your husband currently used any method to delay getting pregnant ?	You……1 Husband.....…….2
(46)	If yes, any side effects of this method.	Yes……1 No…….2
(47)	If yes are you treatment of side effect ?	Yes……1 No…….2
(48)	Where do you get the family planning method ?	Hospital…….1 Pharmacy……..2 Health post……3 Shop……..4 Friends……..…5
(49)	How many children have you born when you first started going contraception .	Son ☐☐ Daughter ☐☐