

**FERTILITY BEHAVIOUR IN AN INDIGENOUS CHAMAR
COMMUNITY**

**(A case study of Siddharthanagar
Municipality, Rupandehi)**

A Thesis

**Submitted to Department of Sociology Tribhuvan University in
Partial Fulfillment for the Requirements
for the Master Degree of
Arts in Sociology**

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2018

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LETTER OF RECOMMENDATION

I certify that this thesis entitled “**Fertility Behaviour in an Indigenous Chamar Community**” was prepared by Mr. Deepak Kafle under my supervision. The researcher has fulfilled the criteria prescribed by the Central Department of Sociology. I hereby recommend this thesis for final evaluation and approval.

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APPROVAL SHEET

This is to certify that the Thesis entitled “**Fertility Behaviour in an Indigenous Chamar Community**” written and submitted by Mr. Deepak Kafle has been examined and approved by the Department of Sociology in partial fulfillment of the academic requirements towards the completion of Master of Arts in Sociology.

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ACKNOWLEDGEMENT

Foremost, I would like to express my sincere gratitude to my Supervisor, Mrs. Shanti Devi Adhikari for the continuous support to my research, for her patience, motivation, enthusiasm, and immense knowledge. Her guidance helped me in all the time of research and writing of this thesis.

Besides my supervisor, I would like to thank the Head of Department Mr. Laxman Timilsina for his insightful comments and encouragement and which is incited me to widen my research from various perspectives. In the course of completion of this thesis report, I express sincere thanks to all staff members of Bhairahawa Multiple Campus.

At this moment, my special thanks goes to Mr. Bipin Kumar Shah for supporting and finalizing of this thesis. Similarly, I would like to thank all my respondents and other concerned persons of my study area, who provided their valuable time, feelings, experiences, information and kind support etc. during my field work. Credit also goes to Siddharthanagar municipality, different ward members and Chamar community providing numerous data.

Finally, I must express my very profound gratitude to my parent and to my wife Mrs. Sujata Poudel for providing me with unfailing support and continuous encouragement throughout my years of studies and through the process of researching and writing this thesis. This accomplishment would not have been possible without them.

Mr. Deepak Kafle

2018

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ABBREVIATIONS

CBS	:	Central Bureau of Statistics
CDPS	:	Central Department of Population Studies
DHS	:	Demographic Health Survey
FP	:	Family Planning
FPM	:	Family Planning Methods
ICPD	:	International Conference on Population Development
INGO	:	International Non-Government Organizational
IUD	:	Intra Uterine Devices.
KAP	:	Knowledge Attitude and Practice
CEB	:	Child Ever Born
MOH	:	Ministry of Health
MOPE	:	Ministry of Population and Environment
NFFPS	:	Nepal Fertility and Family planning Survey
NEHS	:	Nepal Fertility and Health Survey
NGO	:	Non-Government Organization
PRB	:	Population Reference Bureau
SPSS	:	Statistical Programme for Social Service
TFR	:	Total fertility Rate
UN	:	United Nations
UNEP	:	United Nations Fund for Population Activities

CHAPTER - I

INTRODUCTION

1.1 Background of the study

The child bearing performance of individuals, couples, groups of population is called fertility. It indicates the actual level of reproductive performance determined by social, culture, psychological as well as economies and political factor. Fertility differs by fecundity- the physiological capability of the man, woman or couple to produce a live birth. The term fertility is commonly used to cover all aspects of reproduction. The most of the measures of fertility are related to mother.

Fertility behaviour is the process of giving birth which is interacted with the ambient environment. The environment is different in different societies. Besides the degree of interaction of the environmental variables which different within the biological limits of human fertility several social cultural, psychological as well as economic and political factors are found the operate and these are responsible for determining the level and differentials of fertility (Bhende and Kanitakar 2005).

Fertility is considered as major components of population growth, particularly in developing countries. Generally, high fertility is considered as a great obstacle in enhancement of the society. Thus, fertility could also be expressed as one of the indicators of development (Das, 2005).

Human fertility is a very complex process relating not only to biological components but also to social and economic components of the society because reflecting the complexity of this aspect of human behaviour. It is influenced by lot of biological, sociological and economic factors (CBS, 2012)

Traditionally Nepalese societies are famous for high fertility. Children are taken as a symbol of well being both socially and economically. It is disgraceful for a couple that particularly the wife not to have children. High fertility is designed because by producing children, preferably sons a woman raise her status in the family (CBS, 2012).

Marriage usually takes place at very early ages in Nepal. Some studies have demonstrated that an increase in female age at marriage contributes reduction in fertility. This is also true in case of Nepal where the inverse relationship between age at marriage and fertility has been observed (Chhetri, 1993).

Fertility rate in Nepal is still high. In many developing countries high fertility is associated with the level of income, education, child survivors, and cultural religious factors. In addition family planning, in general, has an important role to play in reducing fertility.

Cast ethnicity is an explanatory variable to determine the way of life and fertility behaviour of Nepali women like other studies the life time fertility or children ever born was found the highest among the untouchables.(Niraula and Shrestha, 1997)

High economic value of children with socio-economic tradition favoring sons, low status of women in the society, low literacy rate and low use of birth control measures are some of the significant factors that contribute to high demand for children and high fertility in the country. The fore, generally a society take as a longer period of time to transfer from the fertility to low fertility (Das, 2005).

Age at marriage has been increasing over the years. Then also female marriage still takes place relatively at early ages. Caste, ethnicity an explanatory variable to determine the way of life and fertility behaviour of Nepali women like other studies (PRB, 2016).

The total fertility rate (TFR) of Nepal in 2016 A.D was recorded as 2.5 which is comparatively high to some of the neighbouring countries in Asia 2.4 in Sri Lanka, 2.4 in India, 2.1 in Bhutan, 2.1 in Bangladesh. In 2001 the CBR of the country was estimated at 30.5 which declined to 21.8 by 2011 A.D. However, the CBR declined in 2011 A.D

compared to 2001 A.D. It is higher than in India 21.6, Bangladesh 18.8, Maldives 3, Sri Lanka 16 in same period (PRB, 2016)

Literacy is another important determining factor of fertility. According to census of 2011 Nepal's literacy rate is only 65.5% for both sexes and only 57.4% female are literate which is very low. Occupation is also determining factor of fertility. Nepal is also pre-dominantly agricultural country and majority of the woman are involved either in agricultural work or in domestic work as house wife.

1.2 Statement of the problem

In Nepal, people morally tend to marry in early ages. Some of them marry before teenage and most of them in the late teenage which results into a longer span of marital and child bearing period with substantially a higher fertility. Additionally prevailing high infant and child mortality, particularly in rural settings is further responsible to motivate the mother to give more births in Nepal.

Nepal is multi-ethnic country. Fertility culture differs by ethnic groups. Chamar is under the ethnic groups. Low socio-economic status of women in the society have higher number of children, higher infant mortality rates, favoring sons, low literacy rate etc. These are some main factors that contributing high level of fertility. In Nepal irrespective of caste and ethnic group has string cultural stress to cause high fertility.

In Chamar community generally fertility affects by this low age at marriage and their low socio-economic cultural and demographic variables contraceptives prevalence method is also effective component of fertility behavior. Due to low use and lack of knowledge about contraceptives method this community has been seen higher level of fertility. So, the increasing number of their children is unknowingly being over burden for them and decreasing their economic status. However they want to overcome their poverty problem by producing more children as economic assets to earn more money by working. The study specially seeks answer to the following research questions.

1. What are the socio economic characteristics of chamar community?

2. What factors tended to lead the higher fertility in chamar community?

1.3 Objective of the study

Overall objectives

The overall objectives of this study assessed the fertility of chamar community.

Specific objectives

The specific objectives of this study are as follows:

1. To identify the socio economic characteristics of chamar community.
2. To find the causes of the higher fertility in the chamar community.

1.4 Significance of the study

Some ethnic groups of chamar community have still left behind from the main stream of the development. Through the concept of equal participation in each and every event has developed, because of their own norms and values and lack of education they are not in the main stream of development. Population growth has become one of the great challenges for the developing countries like Nepal. Some policies and programmers are implemented for the control of the rapid growth of the population, but still such groups community are not benefited and having high fertility.

This study concerned to find out various socio-economic and demographic aspects of fertility prevailing in Chamar community in Rupandehi district at Siddharthanagar Municipality.

1. This study is helpful for that person who works in NGO's and INGOs to launch the development program in the local level.
2. It is useful for local bodies of the government to identify the living standard of the Chamar people.

3. It is helpful for government planner and policy maker to make plan and policies related to fertility and population.
4. This study gives health fertility and social status of Chamar people, thus it is helpful for health and social worker.
5. It can be supported for social studies followers.

1.5 Organization of the study

The research study comprises of five chapters. The first chapter presents the background of the study, in its nature which starts with the background of the study statement of the problem, objectives of the study, significance of the study and organization of the study. The second chapters constitute the review of the literatures, theoretical review and empirical review conceptual framework. The third chapter deals with research methodology including selection of the study area, research design, nature and source of data, techniques, data processing and analysis and limitation of the study area. The fourth chapter introduces the background of the study area including socio-economic and high fertility rate. And finally the summary, conclusion and recommendations are presented in chapter fifth.

CHAPTER- II

REVIEW OF LITERATURE

This chapter review theories developed in the context of the study of fertility. Besides, it also puts slight glance about the empirical studies as well as the basis of these theories a conceptual framework suggested as guidance for the present study.

2.1 Theoretical Review

Demographers and social scientists are even today busy in search of a systematic theory which would provide explanations for changes in fertility lives and differential in fertility and which would also serve as a basis for predicting future fertility trends. This gap is in the knowledge of demographic phenomena despite the efforts made by several, scientificists to propound various theories of fertility (Bhendre and Kanitkan, 1996).

The theory which is based on the western experience is demographic transition theory. It summaries the historical shift of birth and death rate. The transition of population from a state of high fertility and high mortality to a state of low fertility and low mortality is demographic transition. The fertility decline has observed with advancements, industrialization and urbanization of the western countries.

David and Blake (2012) originally identified a set of eleven variables as intermediate variables frame works. This frame work focused on the complex process of childbearing involving a series of physiological events, starting with the union of the ovum and the sperm at the time of the heterosexual intercourse resulting conception and terminating with the successful gestation of the fetus and finally the childbirth. These eleven intermediate variables like biological, social, psychological and cultural factors which affects on individual fertility.

The direct determinants of fertility which is identified by John Bongarts (2014) is identified as proximate determinants of fertility which are biological and behavioral factors through social economic, psychological and environmental variables affect fertility. He has

identified seven set of proximate determining variables affect fertility as age at marriage and marital distribution, onset of sterility or menopause postpartum in fecund ability or post partum amenorrhea fecund ability or frequency of intercourse, use and effectiveness of contraceptives spontaneous intrauterine mortality and induces of abortion. Among these seven variables, the four variables age at marriage and marital disruption postpartum in fecund ability contraception and induced abortion has directly affected fertility behavior.

According to Davis a change in nuptiality pattern was one of the 'responses' contributing to the transitional decline in fertility in northern and Western Europe. However relationship between nuptiality pattern and fertility level during the major decline in these is not clear (Cited in UN, 2016).

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

Demand theory is also an important factor for determine the fertility. According to the theory, fertility is determined by current family size the spouses desired family size cost of living. If the cost of additional children raises and income and wealth remains constant then the number of children desired decline. Similarly if the cost of additional children remains constant and income increases then the desired number of children increases (Kourtsoyanmic, 2014).

Tuladhar (1989) examined that persistence of high fertility in Nepal using data from Nepal fertility survey, 1976 and found that higher mortality levels especially of the infant joint family system and early and universal marriage system, low education attainment working status especially of women are the main contribution factors of high fertility in Nepal. In underdeveloped societies the major variables namely age at entry into sexual union or as at marriage, permanent celibacy, contraception and sterilization have highest value which effect directly to keep the level of fertility (Tuladhar,1989).

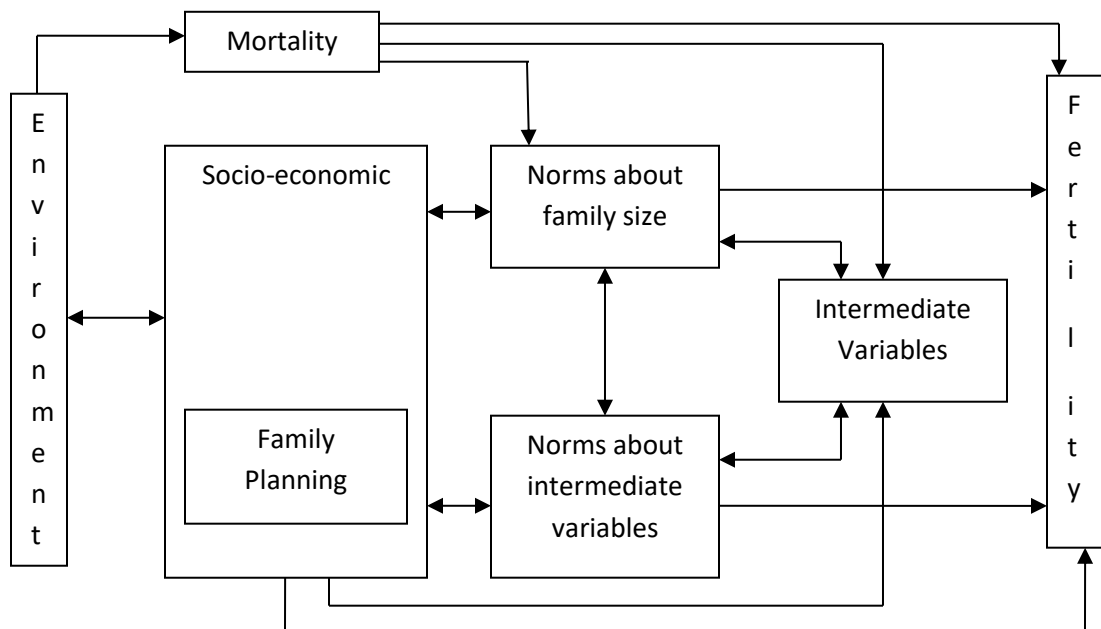
We have no single theory of fertility determination, socio-cultural, economic and demographic characteristics of the people affect the fertility level of country according to different explanation of fertility decline. So, we should understand the important of casual links between the socio-economic and demographic variables and the relationship with fertility (Aryal, 1997).

Dahal(1989) claims that cultural pronatalist Nepali society high economic and social value of children low education and social status of women poor health and insufficient nutritional intake, inaccessibility of family planning and its unmet demand are the determining factors of high fertility in Nepal.

Ronald Freedom (2005) developed a model for the sociological framework of fertility. This model is also based on Davis and Blake. Freedom has envisioned environmental factors and socio-economic structure influencing on fertility through a series of intermediate variables (as age at marriage and practices of contraception). He introduces three types of norms which are norms about family size and norms about intermediate variables. The norms which are influenced by economic condition and verifying life style related to the position in a status hierarchy in no which in turns about family size and other some status indicators.

Such as education, occupation, income, wealth, power, prestige, caste and there are also general class indicators that may jointly influenced the desired number of children. People have different life style and they may influence norms about intermediate variables directly or through norms about family size. Family planning programme is considered as one of the social programme that has a goal to reduce fertility that may influence the norms about family size and norms about intermediate variables which in turn affect fertility behavior (Tuladhar,1989).

Figure – 1 Sociological Framework for Study of Fertility



Source : Freedom, 2005

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

2.2 Empirical Review

There are various empirical evidences obtained by different authors using different methods by examining the relation of parental fertility values and behavior. This subsection presents the review of empirical literature related to fertility.

2.2.1 Age at marriage and fertility

Age at marriage is the most of the societies in the beginning a woman's exposure to the risk of child bearing. Age at marriage is a main determinant of the duration and tempo of fertility in a population. Consequently age at marriage and proportion of women never married are important proximate determinants of fertility (Bogrts, and potter, 2014).

Marriage is most essential event in Nepal because Nepalese society doesn't allow sexual union of unmarried people .so marriage play a vital role for determining fertility, family formation process starts after the marriage. Higher age at marriage directly related to the low fertility of individuals as well as social level (K.C et al; 1993).

The Nepalese society is characterized by early and nearly universal marriage. Marriage usually takes place early and by the age of 30 almost every women is already married. Early and universal marriage practices in Nepal results in long term social and economic consequences including higher fertility. If a mother gets pregnant during her early teen ages then the health of both the mother and the child is adversely affected (MOH-2017).

The increase in age at marriage has a negative impact on fertility for the basic reasons. First, women who marry later have a shorter reproductive life span and second the factors that affect the age at marriage also affect the desired family size norms thereby reducing fertility. For example, if a women marries later because she is studying then her fertility will also be lower as her desired family size is smaller (MOPE, 2016)

According to Nepal fertility and family planning survey, the completed fertility of Nepalese women who get married in the age of less than 13 years had 6.0 mean numbers

of children even born while the women who got married in age of 25 years and above had 2.8 average number of children ever born per women.(MOPE, 2016).

Education and non agricultural employment opportunities have proven as factors affecting to rise as at marriage. Women should have an access to free education up to higher level to increase the proportion of women in different non agricultural and non- household sector job creation for women must be attempted by government and non government endeavors.

Education is one of the factors which affect on age at marriage. Therefore the men and women have a higher singulate mean as at marriage than their counterparts. This relationship is more propounded among female then male. For men the singulate mean age at marriage is 21.2 for the illiterate and 23.6 for the literate. The corresponding for women are 17.6 and 20.8 respectively.

Age at marriage is one of the determinants of fertility. Some studies have demonstrated that and increase in female age at marriage contributes to a reduction of fertility. There is inverse relationship between age at marriage and fertility in Nepal. Even though legal age at marriage for boys and girls are 21 years and 18 years respectively. Early marriage still has been practiced in Nepali society due to different socio-cultural norms and values. In Nepal, age at marriage is found to be lower for females was 15.4 years and 19.5 years for males in 1961. It increase 19.5 years for females and 22.9 years for males in 2001.It shows that, age at marriage is increasing for both sexes in Nepal. Thus age at marriage has been proved as one of the important factors responsible to determine the level of fertility. Therefore, the examination of fertility by age at marriage provides much clear ways to arrest the problem of high fertility in Nepal.

2.2.2 Education and Fertility

Education is one of the most important variables to determine fertility behaviour of human beings. The relationship between education and fertility is more pronounced in less developed countries than in developed countries. A study conducted showed high fertility

among the women with elementary level of education than graduate in USA (UN 2006). The relationship between education and fertility is two way traffic. In which high fertility countries have to invest more in education but education enhancement eventually help to fertility decline. As an example in Nepal the average number of CEB is 1.2 for literate women especially for primary education and 1.5 for graduate which is lower than illiterate with CEB 2.8 (CBS 2012).

There is strong negative relationship between fertility and parents education especially that of mother. NFS survey of 2011 has shown that the mean number of CEB among literate is 2.3 compared to the illiterate women 3.3 which is lower almost 1 child. Women literate husband were also having fewer mean CEB than those with illiterate husband. The 2011 census shows that CEB for illiterate women is 2.4 which was only 1.9 for literate women.

The level of fertility declines with increase in educational level of females. The same applies for literacy status. Higher the level of females literacy in a community, the lower the fertility. This also implies that the level of fertility should be lower for the literate female compared to the illiterate females (CBS, 2012).

According to the NFHS survey 2011, the total marital fertility rate (TRMFR) among with secondary level of education is lower (4.0) than among women with no education (6.2) which is difference of 2.2 children and also indicated that wives educational status was more instrumental in reducing fertility than the husband. Likewise FHS 1996 showed a strong relationship between education and fertility. Women with at least secondary education have TFR of 2.5 which women with no education children and also indicated that wives educational status was more instrumental in reducing fertility than the husband. Likewise FHS 2016 showed a strong relationship between education and fertility. Women with at least secondary education have TFR of 2.5 which women with no education which women with no education with TFR of 5.1.

2.2.3 Occupation and Fertility

Occupation of the husband has been widely recognized as one of the influencing factor on fertility. Relating high fertility has been associated with agriculture and mining lower rate of fertility has been associated with professional classes in urban industrial countries (UN, 2006).

The employment of women outside of the home or in the farm reduced the level of fertility behavior. The world fertility survey showed women who do modern types of works marry an average 2.4 years later than who do domestic work and agricultural works which is very remarkable to reduce the fertility level (Kattel, 2001).

Female in different occupations are found to have different fertility levels. The mean number of CEB per ever married women is highest for the farm fish workers and sales workers which is 2.7 but the lowest fertility is observed among the professional administrative and clerical workers with 1.1 less than farm workers that is 1.6 (CBS, 2012). The CBS information emphasized that there is remarkable difference between white colour and blue colour occupation groups of women.

Adhikari (1992) Risal and Shrestha (1989) found that the work status of women was inversely related with mean number of CEB. Occupation also increases mean age at marriage and is one of the determinants of fertility behavior. Risal & Shrestha in 1989 found that the mean age at marriage is 20.2 yrs for administrative workers and 17.1 years for the women who work in farm and agriculture.

Occupation especially of the husband has been probably the most widely utilized index of socio-economic status in the study of fertility differentials. Changes in occupational distribution of the population of industrially advanced countries have accompanied the general declines in fertility. Relatively high fertility has been associated with the primary industries, particularly agricultural and mining while lower rates of fertility have been associated with the professional classes white colour workers and urban industrial workers (UN, 2006)

In Nepal husbands status of work plays an important role for declining fertility level of example, women whose husband were engaged in farm occupation had higher fertility 3.27 mean CEB than that of non-farmer 3.19 mean CEB for women (Neupane, 1997).

2.2.4 Contraceptive Use and Fertility

Contraceptive use is expected to be inversely associated with the level of fertility; contraceptive use itself is affected by various socio-economic factors such as level of educational attainment income and occupational characteristics of people. The persistent of high fertility in Nepal is mainly due to the lack of popular demand of family planning (Tuladhar, 1989).

Contraceptive use was considered as one of the four most important “proximate determinants” of aggregate level of fertility. Furthermore it generally assumes the principle role in transition to lower fertility (Bongaart and potter, 2014).

Various studies in the past have shown that use of contraception has a strong negative association with fertility. It is accepted that contraceptive was the principal intermediate variables responsible for the shift of high fertility to low fertility during the late nineteenth and early twentieth century (UN, 2006).

Literacy is one of the determining factors increasing use of contraception. Widespread illiteracy prohibits women from the access to information education and communication material. The ICPD has recommended equal participation of both men and women in decision making related to number of children. Even though, the literacy of women is more catalyst to prolong the spacing and reducing fertility, literacy of husband is equally important. More than one fourth (26.5%) of the literate women were using contraception in age group 15 to 29 years, which is almost highly by 3.7 percentage than that of the prevalence of women with their literate husband. Similarly the highest percentage of use of any method by literate women in these ages was observed as 42% for 25-49 age group. It is also found that a few literate women aged 15 years did not use contraceptives (Acharya, 1999).

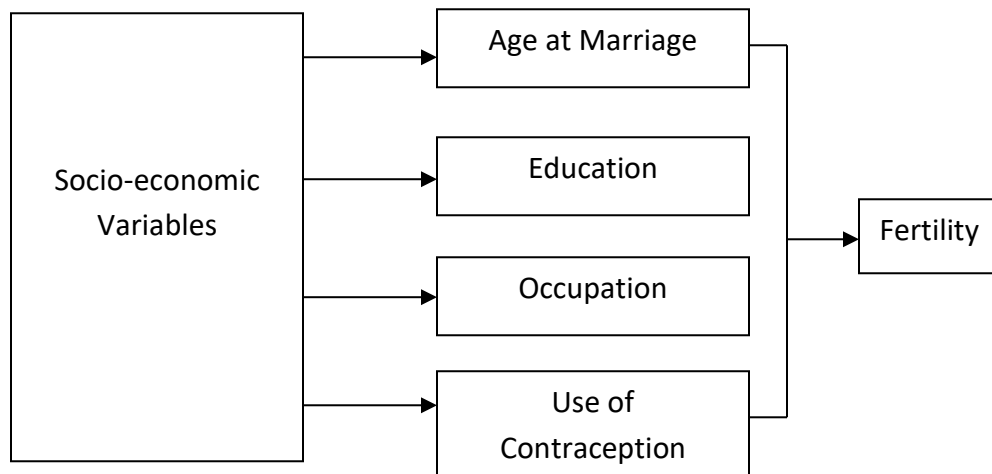
2.3 Proposed Conceptual Framework

This study of fertility behavior is complex phenomena, justified by the proceeding discussion and also establishing the relationship among various conceptual framework with various socio-economic variables for the study of population.

The number of CEB to a particular women in the reproductive age is taken as dependent variable, which is one of the best indicator of fertility analysis of the study of population.

The following proposed conceptual framework set out in figure considered that the age at marriage, education, occupation, child loss experience are the independent variables and they combinely determined the level of contraception. Here the use of all they determine the fertility or CEB. Hence the fertility dependent on variable.

Fig. 2. Proposed Conceptual Framework



Independent Variables

Dependent Variables

After the theoretical and empirical literature review it can be concluded that Chamar's community fertility is closely associated with both the theoretically and

empirical perspective. According to Caldwell's "theory of intergenerational wealth flow" the fertility is high if children are economically useful to parents and low if children are economically not beneficial to the parents.

The Chamar community is closely related with Caldwell's "theory of intergenerational wealth flow" because Chamar's children are economically useful to parents due to low socio-economic condition therefore Chamar's community fertility seems high. According to Tuladhar (1989) higher mortality levels, especially of infants, joints family system, early and universal marriage system, low education attainment, working status of women are the main contributing factors of high fertility in Nepal which is closely associated with Chamar community resulting high fertility.

Chamar's high fertility is also associated to empirical literature review. In Chamar community marriage usually takes place early. Therefore early marriage practice in Chamar community result in long term social and economic consequences including higher fertility. The level of education both men and women are very low. Most of the people of Chamar community engaged in agricultural sector as a wage labour as their main occupation. Women with higher child loss experience had higher CEB which seems in Chamar community. And finally contraceptive use is very low in Chamar community. These all variables directly affect the level of fertility of Chamar.

CHAPTER - III

METHODOLOGY

Methodology is the way of get reliable and valid information. Methodology helps to obtain the objective of study. This study follow the methodology under the following steps.

3.1 Rationale for the selection of the study of area.

The study area is situated in western development region in Lumbini zone at Rupandehi district Siddharthanagar municipality ward no. 2,3,7,10 out of the total 13 wards .Till now nobody has studied deeply according to the basic of sociologically in this area at the same time the researcher is the closest to the Chamar Society and he used to teach health and population in school level so his interest goes on to choose the topic the fertility behaviour of Chamar society. Chamars are the native born of the Terai region. Thus the Siddharthanagar Municipality has been chosen purposively for the research study..

3.2 Research design

The research is designed according to the need of the study. Mainly, in this study adopted descriptive research design and explanatory research design is used.

3.3 Nature and sources of data.

In the research the primary and secondary data is collected. Primary data is taken from the field work survey like questionnaire schedule; interview, observation and secondary data is taken from municipality records, district development community, school, books, writer's writing, news, newspaper, journals, bulletins etc. Nature of the data is quantitative and qualitative both according to the need of researcher.

3.4 Universe and sampling.

Rupandehi district, Siddharthanagar municipality ward no.2, 3, 7, 10 are the study area. The universe of this study is 120 households of Chamar Community. Among them, 60 female population from 60 households are selected by using the non probability convenient sampling technique in this study. To fulfill the objectives set in this study, information are collected from the women of reproductive age group 15 to 49 years.

3.5 Data collection techniques

The techniques of data collection, which is followed in the study, are as follows:

3.5.1 Questionnaire schedule

A questionnaire is a research instrument consisting of a serious of questions and other promotes for the purpose of gathering information from respondents. Although they are often designed for statistical analysis of the responses, questionnaires have advantages over some other types of surveys in that they are cheap, do not require as much effort from the questioner as verbal or telephone surveys, and often have standardized answers from the questioner as verbal of telephone surveys, and often have standardized answers that make it simple to complete data. However, such standardized answers may frustrate users. Questionnaires are also sharply limited by the fact that respondents must be able to read the questions and respond them. The individual questionnaire was used to gather information from ever married women age (15-49) years. The information were focused on aged at marriage, educational attainment knowledge, use of family planning marital status and other fertility behaviour of Chamar Commnity. Thus, for some demographic groups conducting a survey by questionnaire may not be concrete.

3.5.2 Interview method

An interview is a conversation between two or more people where questions are asked by the interviewer to elicit facts statements from the interview. Interviews are the standard part of journalism and media reporting, but are also employed in many other

situations, including qualitative research. The qualitative research interview seeks to describe and understand the meaning of what the interviewees say. This method is mostly focused on the introduction of Chamar Community, conversation power and about drinking water etc. such positive responses were collected.

3.5.3 Observation

Observational research (or field research) is a type of correlation (i.e., no experimental) research in which a researcher observes ongoing behavior. This type is organized below by the extent to which an experimenter intrudes upon or controls the environment. It is a social research technique that involves the direct observation of phenomena in their natural settings. This differentiates it from experimental research in which a quasi-artificial environment is created to control for spurious factors, and where at least one of the variables is manipulated as a part of an experiment. This method is mostly focused to find out environmental conditions such as information related to toilet systems, position of modern amenities (facilities) etc.

3.5.4 Fieldwork survey

Field research or field work is the collection of information outside of a laboratory, library or workplace setting. The approaches and methods used in field research vary across disciplines. For example, biologists who conduct field research may simply observe animals interacting with their environments whereas social scientists conducting field research may interview or observe people in their natural environments to learn their language, folklore, and social structures.

3.6 Data processing and analysis

The data processing and analysis is an important process in the research protocols. After collecting the data from the study site, the data were edited then the data were classified and

tabulated to make more clear, scientific and analytical. Lastly it was analyzed in the base of tabulation.

3.7 Limitation of the Study area

The study is based on the sample size of Siddharthanagar municipality 2, 3, 7, 10. So the finding may not be generalized to the district and national level. This study is control only Chamar women aged 15 to 49 years.

CHAPTER - IV

FERTILITY BEHAVIOUR IN AN INDIGENOUS

CHAMAR COMMUNITY

Administratively, Nepal is divided in 75 districts. The districts have been regrouped into 14 zones to promote development of the country. Rupandehi is one of the terai districts of Lumbini zone of the western development region. One of the famous municipality (Nagarpalika) is Siddharthanagar Nagarpalika is the gateway to the Lumbini the birth place of Lord Buddha. It is one of the important business and industrial centre of the Nation. It is the headquarter of Rupandehi District. The total population of Siddharthanagar Nagarpalika was 63483, where male 31673 and female 31810. Among them Chamar population was approximately 2192 which was 3.45%. The literacy rate of the Nagarpalika was 78.94%/ The population growth rate of Siddharthanagar Nagarpalika was 6.7%. Average family members of the Nagarpalika was 5.7% Population density was 3012 per sq km. Total land area of Siddharthanagar Nagarpalika is 36.03 sq km.

This study is directly concentrated to Chamar community of Siddharthanagar Nagarpalika of Rupandehi district because this community was low socio-economic condition and larger family size even though they inhabit mixing with other caste/ethnic groups. The study is concentrated to expose the hidden reasons of high fertility as fertility behaviour of Chamar community in Siddhartha Nagarpalika.

Brahmin, Chhetri, Muslim, Magar, Gurung, Newar, Yadav, Kurmi, Kalwar, Chamar, etc are different caste/ethnic groups of people residing in this Nagarpalika. There are 11 primary schools, 5 lower secondary and 22 high schools. 6 different colleges are running in the Nagarpalika. 10 Madarsa one medical college with teaching hospital is running in Nagarpalika. Life expectancy at birth is 67.5 yrs. Most of the people are having the facilities of electricity water and telephone. All wards are joined by road to the main city area.

The background characteristics of the population as well as reproductive age group of women is the very important aspect for the study of fertility behaviour of Chamar community. The background characteristics may be divided into two categories such as socio-economic and causes of high fertility and use of family planning method.

4.1 Socio-Economic Characteristics

Education, Occupation as well as income of the household and respondents is the socio-economic characteristics of the study.

4.1.1 Education

Education is the major socio-economic factor, which enhances the social, political and economic development and quality of life of people. Only the populations aged 6 years and above were interviewed to obtain the literacy status of the study population by sex. Literacy status is associated with other various factors as occupation and income etc. The literacy status of Chamar community as reported by field survey 2017 is mentioned below in the table.

Table 1 : Distribution of study population aged 6 years and above by literacy Status

S.N	Literacy Status	Population	
		Number	Percentage
1.	Illiterate	372	52.10
2.	Primary Level	247	34.59
3.	Lower Secondary	45	6.30
4.	Secondary	25	3.50
5.	SLC passed	8	1.12
6.	Intermediate & above	14	1.96
7.	Informal Education	3	0.42
	Total	714	100

Source : Field Survey, 2017

The above table shows that 52.10 percent of the respondents are illiterate and 47.9 percent are literate i.e. there is the majority of illiterate persons in both sex combinely. The literacy status is very low among Chamar community. Among 807 population, 714 excluding under 5 population were asked about their literacy 34.59 percent were accounted that they have completed primary level education. Only 6.30 percent were completed lower secondary level and 3.5 percent were studied up to secondary level. Only 6 persons that is 1.12 percent were passed S L C and 14 person i.e. 1.96 percent intermediate and above. And only 3 persons (0.42%) had informal education. This data shows that most of the chamar people have low economic condition which caused high illiteracy rate (i.e. 52.10%). Very few Chamar people are economically good so, they have passed intermediate and above and achieved some other informal education. The educational status of the study population was found in very low level.

4.1.2 Educational Status of Respondents

Education plays a significant role in determining fertility level therefore educational status of eligible women has been recorded to achieve the objective of the study.

Table 2 : Educational status of the respondents

S.N	Educational level	Respondents	
		Number	Percentage
1.	Illiterate	47	78.33
2.	Literate	13	21.67
	Total	60	100
	Among Literate		

i.	Primary Level	7	53.85
ii.	Lower Secondary Level	3	23.07
iii.	Secondary Level	2	15.38
iv.	SLC passed	1	7.70
	Total	13	100

Source : Field Survey, 2017

Among 60 eligible women only 13 that is 21.67 percent were able to read and write 47 i.e. 78.33 percent were illiterate. Among the literate 7(53.85%) were completed primary level. 3(23.07%) were completed Lower Secondary level etc. There was no any single woman who had taken Non-formal education. Due to low economic condition and early marriage most of the respondents are illiterate and few are literate due to good economic condition. Only one respondents passed SLC due to suitable age marriage and good economic condition. Though the educational institutions are very close to them the literacy rate of women of Chamar community is very low which has resulted high fertility.

4.1.3 Educational Status of the Husbands of the Respondents

Though for the study of fertility behaviour women are taken in the consideration but all the women are not free to make decision about the children. The educational attainment of the husband also plays an important role to make the decision about the number of children in the family.

Table 3 : Educational Attainment of the Husbands of the Respondents

S.N	Literacy Status	Respondents	
		Number	Percentage
1.	Non formal education	38	63.33
2.	Primary	14	23.33
3.	Lower secondary	5	8.33
4.	Secondary	1	1.66
5.	SLC and above	2	3.33
	Total	60	100

Source : Field Survey, 2017

Table 3 shows that 63.33 percent (38) husbands were taken non-formal education, due to influence by mass media and from surrounding. 23.22 percent (14) were taken primary education, 8.33 percent (5) reported that they have completed lower secondary level, 1.66 percent (1) secondary level and 3.33 percent (2) were S L C and above. Two respondent's husbands have passed SLC and above due to suitable age marriage, good economic condition and social influence.

Majority of the respondent's husbands were got only non-formal education which directly affects the fertility behaviour.

4.1.4 Occupational Status of the Study Population

The occupational status of the study population was categorized into seven groups namely Agriculture, Agricultural daily wage labour, Non agricultural daily wage labour, service, Foreign employment, Household worker and Dependent. For this study Agriculture means those who have got their own land and farming there. The occupational status of the study population aged 10 years and above is given below.

Table 4 : Distribution of study population (aged 10 years and above) by occupational status

S.N	Occupational Status	Population	
		Number	Percentage
1.	Agriculture	40	5.60
2.	Agricultural daily wage labour	56	7.84
3.	Non agricultural daily wage labour	151	21.14
4.	Service	25	3.50
5.	Foreign employment	25	3.50
6.	Household worker	158	22.12
7.	Dependent	256	35.85
8.	Others	3	0.42
	Total	714	100

Source : Field Survey, 2017

Table 4 shows that 5.60 percent of total population reported that their main occupation is agriculture and they have not their own land for farming 7.84 percent were engaged in agricultural daily wage labour. They don't have field for farming 21.14 percent reported that they are non-agricultural daily wage labour, 3.50 percent were in service and 3.50 percent were in foreign employment 22.12 percent of the total population that is women were household worker they were not engaged in any other economic activities. Likewise 35.85 percent of the total populations were dependent. Those respondents who are engaged in agriculture they have high fertility rate because they think that children are the source of income. Similarly those respondents who are engaged in service and foreign employment have less fertility rate because they think children are burden in their work.

4.1.5 Occupation status of the Eligible Women

Besides the household occupational status of the family eligible women occupation play an important role in determining the family size as well as fertility level of the population. Hence this study goes ahead investigating the occupational distribution of the eligible women which is given below in the Table 5.

Table 5 : Distribution of respondents by occupation

S.N	Occupation	Respondents	
		Number	Percentage
1.	Agriculture	27	45.00
2.	Wage labour	15	25.00
3.	Service	2	3.33
4.	Household Work	16	26.67
	Total	60	100

Source : Field Survey, 2017

Table 5 represents that majority of the respondents are engaged in agriculture. So, they have high fertility rate because they think that children are useful in their agriculture field as a source of income. Agriculture and daily wage labour in agriculture are merged for the study 26.67 percent of the respondents are household worker and 25 percent of them are in wage labour in non-agricultural sector. Only 3.33 percent of them are in service in some government and private institution. Similarly service holder respondents have less fertility rate because they think children are burden in their work.

4.1.6 Husband's Occupation and Income

The occupational status as well as income of women's husband plays an important rate of fertility behaviour. The occupational status of women's husband is given below.

Table 6 : Distribution of respondents according to husband's occupation

S.N	Occupation of husband	Respondents	
		Number	Percentage
1.	Agriculture	25	41.67
2.	Daily wage labour in agriculture	14	23.33
3.	Non agriculture labour	17	28.33
4.	Service	2	3.33
5.	Foreign Employee	2	3.33
	Total	60	100

Source : Field Survey, 2017

The table 6 shows that 41.67 percent of women's husband were found whose occupation was agriculture 23.33 were engaged in daily wage labour in agriculture. Due to this occupation they think that children are the source of income so they produce large number of children which caused high fertility rate. Likewise 28.33 percent were engaged in non agriculture labour, were as 3.33 percent were in service and 3.33 were as foreign employee. Similarly service holder respondents have less fertility rate because they think children are burden in their work.

4.1.7 Distribution of Household by Income

The level of income has some influence in determining the level of fertility. So. The income of household has been recorded during field survey which is given below in the table no. 7.

Table 7 : Distribution of respondents according to household income

S.N	Household income per month (In Rs)	Respondents	
		Number	Percentage
1.	3000-5000	5	8.33
2.	5000-7000	10	16.67
3.	7000-9000	32	20.00
4.	9000-11000	17	28.33
5.	11000+	16	26.67
	Total	60	100

Source : Field Survey, 2017

Table 7 shows that 8.33 percent of household have their monthly income 3000-5000. Their source of income is very less because they are uneducated and they did not have any income generating skills. Similarly 16.67 percent which were 5000-7000. 20 percent of house hold are having their monthly income 7000-9000 and 28.33 percent of them are having their income Rs 9000-11000. Likewise 26.67 percent are having their monthly income Rs 11000 and above because they are educated and they are skillful person.

Table 8 : Distribution of respondents according to sufficiency of household income

S.N	Sufficiency of households income	Respondents	
		Number	Percentage
1.	1-3 months	5	8.33
2.	4-6 months	30	50.00
3.	7-9 months	20	33.33
4.	10-12 months	5	8.33
	Total	60	100

Source : Field Survey, 2017

Table 8 shows that the majority 50.00 percentage is able to run their family by income cost only for 4-6 months. 33.33 percent is able to run family by income cost for 7-9 months. 8.33 percent are very hardly able to run their family by income cost for 1-3 months 8.33 percent earn money for 10-12 months. Above data shows that 8.33% of the respondents were earning only up to 3 months because they have no sufficient land, they have no any other skills to do other works, they are illiterate etc. Similarly 8.33% earn money for 10 to 12 months because they have land, they are skillful and educated. Majority of the study population is suffered from the poverty.

4.1.8 Access to Drinking Water and Sanitary Facility

The status of the public health, nutrition health facilities water and sanitary facilities depend upon the level of socio-economic condition. The source of drinking water and types of latrine facilities of the household are given below.

4.1.8.1 Sources of Drinking Water

All the household had tube well facility for the main sources of drinking water in the study areas. Tube well water is normally considered as safe source of drinking water. But in the tube well water arsenic is found if depth is not sufficient.

Table 9 : Source of Drinking Water

S.N	Sources of drinking water	Number	Percentage
1.	Tube well	60	100
	Total	60	100

Source : Field Survey, 2017

Due to lack of knowledge of safe drinking water some of the respondents have used arsenic water.

4.1.8.2 Latrine/Toilet Facility

Latrine/Toilets Play an important role to make environment neat and clean. It saved us from different kind of diseases. Record of having toilets and not having toilets are given below:

Table No. 10 : Latrine/Toilet Facility

S.N	Toilet Facility	Number	Percentage
1.	Having Toilet	25	41.67
2.	Open Field	35	58.33
	Total	60	100

Source : Field Survey, 2017

Only 41.67 percent that is 25 respondents out of 60 respondents reported that they have got toilet facility. 41.67% of respondents are found using toilet because they are literate, economically good and influenced by mass media. 58.33 percent of them didn't have any kind of toilet facilities, they are using open field as toilet. They passed out urine and stool in open field because most of them are illiterate and economically weak. The importance of the sanitary use of toilets is least understood in the Chamar community. Some of them pass stools around their houses and on the road side. It seems that the sanitary use of toilet is very poor in this community.

4.1.9 Status of Modern Amenities

The information on the availability of Radio, Television, cycle, Electricity was collected from the survey. These facilities indicate the modern amenities.

Table 11 : Percent distribution of respondents according to modern amenities at home

S.N	Modern amenities	Respondents	
		Number out of 60	Percentage out of 100
1.	Nothing	2	3.33
2.	Radio	30	50
3.	Television	25	41.70
4.	Cycle	55	91.70
5.	Electricity	50	83.33

Source : Field Survey, 2017

Table 11 shows that 3.33 percent of the respondents don't have any kind of facilities because they use to stay in other's house as a servant. Above 50 percent of them have Radio, whereas 41.70 percent have Television and 83.33 percent of them have electricity. 91.70 percent of them have cycle as a means of transportation. Most of the respondents have used cycle as a means of transportation because they have to go long distance for their work. Respondents having good source of income were facilitated by electricity.

4.2 Family Planning Characteristics

Family Planning is the most determining factor in fertility behaviour knowledge and practice of family planning methods changes the existing trend of fertility in any population. There is also an inverse relationship between contraception and fertility. The distribution of respondents about family planning methods is given below.

4.2.1 Contraceptive Knowledge of Respondents

Every eligible women were asked about the knowledge of family planning either they have heard or not and use or not is shown in the table.

Table 12 Percentage distribution of respondents by knowledge of family planning methods

S.N	Have knowledge about FPM	Number out of 60	Percent
1.	Yes	40	66.67
2.	No	20	33.33
	Total	60	100
	Knowledge of FPM	Number out of 60	Percent
i.	Pill	30	50.00
ii.	IUD	15	25.00
iii.	Male Comdom	32	53.33
iv.	Norplant	9	15.00
v	Kamal	5	8.33

Source : Field Survey, 2017

Table 12 shows that the 66.67 percent of the eligible women heard about family planning method because they are literate, they were influenced by different mass media, they took part in different family planning training. 33.33 percent had never heard about the method and knowledge of family planning because they are illiterate and they have low economic status.

Out of total women who had heard or have knowledge about family planning 50 percent were heard about pills. 53.33 percent were familiar with condom, 8.33 percent have knowledge about Kamal, 25 percent have knowledge about IUD. Only 15 percent have knowledge about Norplant. It seems that the majority of respondents have heard, at least any method of family planning method.

4.2.2 Source/Media of knowledge About Family Planning Method

There are various sources from where the respondents know about family planning methods. The main sources are as shown below in the table 13.

Table 13 : Distribution of respondents by source of knowledge for family planning methods

S.N	Sources	Respondents	
		Number out of 60	Percentage
1.	Radio	20	31.67
2.	T V	25	41.67
3.	Husband	21	35
4.	Relatives/Friends	50	83.33
5.	Health workers	17	28.33

Source : Field Survey, 2017

Table 13 shows that the respondents who had knowledge about family planning methods. Above data shows that the majority of them heard about the methods from Relatives or friends i.e. 83.33% Mostly they heard from their relatives and friends because they are connected with them in agriculture work and in different occasions.

41.67 percentage heard from T V. 35 percent of them heard from their husband, 31.67 percent from Radio, Whereas only 28.33 percent heard from health workers because most of the time they were busy in their own household work. So they are very less contact with health workers.

4.2.3 Use and Non-use of Family Planning Method

Fertility depends upon the using contribution of contraceptives. Among the ever heard, if they have used it sometimes which are known as ever users, who are currently using any one of the method they are currently users. And these who are not using currently among the ever users who are knows as currently non users. The distribution of respondents by ever users of contraception is presented in the Table 14.

Table 14 : Distribution of respondents by ever users and non use of family planning methods

S.N	Ever users and non users	Number out of 60	Percent
1.	Ever users	29	48.33
2.	Non users	31	51.67
	Total	60	100
S.N	Family Planning methods	Number	Percentage
i.	Pills	10	34.48
ii.	Condoms	12	41.75
iii.	IUD	2	6.90
iv.	Kamal	3	10.33
v	Norplant	2	6.90
	Total	29	100

Source : Field Survey, 2017

The Table 14 shows that 29 respondents that is 48.33 percent were ever used means of family planning. They used family planning method because they are literate, influenced by mass media, they are busy in their job and they know the importance of small family. Among the ever users the majority of the respondents 41.75 percent had used condom because it was available everywhere and easy to use, followed by pills were 34.48. Likewise 10.33 percent respondents had used Kamal, where as 6.90 percent and 6.90 percent respondents had used Norplant and IUD respectively. It seems that the attitude and practice of family planning in Chamar community is very low. 51.67% of respondents have not used family planning method due to illiteracy, they believe in superstitions believes, they feel shy to buy family planning device etc.

Table : 15 Distribution of respondents by reasons for not using family planning methods

S.N	Reason	Numbers	Percentage
1.	Due to long distance	3	9.67
2.	Do not know the place of available	10	32.25
3.	Due to afraid of losing health	10	32.25
4.	Due to want of another child	3	9.67
5.	Husband Disagree	4	12.90
6.	Religion	1	3.22
	Total	31	100

Source : Field Survey, 2017

Table 15 shows that out of 31 respondents, who were not using means of family planning, 32.25 percent were not used due to afraid of losing health and 32.25 percent were not used because they don't know the place of availability. Likewise 12.90 percent reported that their husband are disagreed to use the means of contraception and 9.67 percent reported that they were in the want of another child. Only 3.22 percent were not used because of religious. Due to illiteracy and low economic condition they did not know the place of availability and they think that children are gift of god.

4.3. Nuptiality Characteristics

Marital status is an important demographic characteristics of population associated with fertility. It involves biological social economic, legal and religious aspects. The marital status of the study population aged to years and above is shown below by sex.

Table 16: Percentage distribution of total population aged 10 years and above by marital status

S.N	Marital Status	Population	
		Number	Percentage
1.	Married	261	69.04
2.	Unmarried	109	28.84
3.	Widow/er	8	2.12
	Total	378	100

Source: Field Survey, 2017.

Table-16 Shows the percentage distribution of total population by Marital Status aged 10 years and above were 69.04 percent of the total population were married, 28.84 percent were unmarried and 2.12 percent of the population were widow. In Chamar community due to illiteracy and low economic condition caused early marriage which increased the percentage of married women. At the same time some the Chamar women were educated and influenced by other castes of the society result suitable age marriage.

4.3.1 Marital Status of Respondents

Marital Status is the one of the most important factors which effects fertility behavior.

Table 17: Marital status of respondents

S.N	Marital Status	Respondents	
		Number	Percentage
1.	Married	60	100
	Total	60	100

Source: Field Survey, 2017

Table-17 shows that all the respondents are married. No one is widowed. No one has reported that they are divorced. Most of the respondents were illiterate due to that early marriage were prevailing in Chamar community.

4.3.2 Age at Marriage of Respondents

In Nepal, with parental consent legal minimum age at marriage for both girls and boys have been set at 18 yrs. If the boys and girls want to marry on their own will then the minimum legal age at marriage for both girls and boys is 20 yrs. In many ethnic groups, this was hardly followed in the beginning and the mean age at marriage was quite low than this. In some societies, girls are still married at younger ages resulting high fertility (MOPE 2017). The distribution of ever married women by age at marriage is given below.

Table 18: Distribution of respondents by age at marriage

S.N	Age at marriage	Respondents	
		Number	Percentage
1.	Below 10 years	10	16.67
2.	10-16 years	28	46.67
3.	17 and above	22	36.66
	Total	60	100.00

Source: Field Survey, 2017

Above Table-18 shows, the majority (46.67) of the total eligible women were married at the age group of (10-16 yrs), followed by the age group below 10 years that is 16.67 percent and remaining age group i.e. 17 and above were 36.66 percent only. Marriage below 10 years and up to 16 years were high in Chamar society due to illiteracy of parents, low economic condition of parents, lack of legal age marriage information, lack of strict rules and regulation of government, due to religious and superstitions believes etc. It shows the early age at marriage among Chamar Community.

From the socio-economic characteristics of the study population, it can be concluded that the socio-economic status of Chamar community is very low. Socially it is difficult to survive the life because their source of income is very low. Majority of the people are engaged in daily wage labour in agriculture and non agricultural sector as their main occupation. Most of the people have tube well for the source of safe drinking water, very less people of this society was used toilet facilities. Rarely this societies were utilizing modern facilities less number of respondents were using family planning method etc. Most of them are married in the early age.

CHAPTER – V

SUMMARY AND CONCLUSIONS

This is the closing chapter of the study. It presents the summary of the study with its major findings. It also contains conclusion.

5.1 Summary

This study has been carried out to examine the fertility behavior of Chamar community of Nepal. Fertility is the natural capability to produce offspring. As a measure, fertility rate is the number of off spring born per mating pair, individual or population. Fertility differs from fecundity. The research is based on primary data collected from the field survey like questionnaire schedule, interview, observation were conducted in Siddharthanagar Municipality 2, 3, 7 and 10, Rupandehi. Non probability convenient sampling techniques were used in the study. To examine the differential in fertility by identifying socio-economic characteristics and caused for high fertility. Some selected socio-economic variables and few demographic components have been considered, Such as age at marriage, education of women, occupation of women, use of contraception etc were taken as independent variables and mean CEB was taken as dependent variables. The main findings obtained by the analysis of data are as follows.

Total 60 female population from 60 household were recorded in the study area. The family size was bigger than the average family size of Nepal. Literacy status of the study population was low. It was only 21.67%. Few of the eligible women only (7.70%) have passed SLC. Among the literate women only 15% were passed secondary level and 53.85% were passed primary level. Thus, Chamar women possessed low educational status. Besides children (below 10 years) 28.84% of the sampled population were found unmarried in their marital status where as 69.04 % were recorded as married and 2.12% were reported as widow or widower. None of the reported that they were separated of divorced. 16.64% of respondents got married at the age of below 10 years. 46.67% of them got married in the age of 10-16 years. Only 36.36 % of them got married at the age of 17 and above. It seems

that the age of marriage is low in this community. Out of total population of age 10 years and above most of the participated in economic activities. Out of the total household near about 26.67% household had income above 11000 per month. Only 8.33% households were able to regulate their family cost hardly 10-12 months.

Most of the household had hand pipe for the source of drinking water. And only 41.67% house hold had toilet facility. So it seems that the sanitary facility is very low in Chamar community. Out of 60 house hold 50% household had radio, 41.70% had TV and 91.70% had cycle and 3.33% of house hold did not had any kind of facility.

Out of respondents 66.67% were heard about family planning and 33.33% were not heard about family planning. 83.33% respondents were reported that they got knowledge about family planning from relatives and friends and 31.67% got information about FPM from health workers. Among the current non-users of family planning methods most of them were found having reason fear of side effect for non using any method of family planning. Strong concentration between the age at marriage and mean CEB was found It was inversely associated with women who had married at the age below 10 years. It was inversely associated between occupation of respondents and mean CEB. The mean CEB highest is found whose occupation is Daily wage labour and lowest mean is for the women who are in service.

5.2 Conclusion

In conclusion many characteristics about which information (research study) obtained in the field surveys were useful in analysis of fertility behavior. The main conclusion drawn from the analysis are started below.

1. Age at Marriage and Fertility

By the research study in relation to mean CEB (fertility) and age at marriage come to end in the conclusion that lower age at marriage is associated with the cause of high fertility. The relationship between age at marriage and fertility was significantly inverse correlated.

So the findings enforce to rise the age at marriage for the reduction of fertility in the study areas.

2. Literacy status of women and fertility

The findings from the study shows the conclusion that literate women have lower fertility behavior than to the illiterate and this supports that precious studies very low level of the literacy status of women of the study area is associated to high fertility culture. This study incorporates to increase the literacy status and especially the educational level.

3. Occupation of women and fertility

Higher level of occupation plays an important role to reduce fertility. Those women working in agriculture had relatively high level of fertility as compare to the woman of working in non-Agriculture daily wage labour. But there were very few women engaged in non-agricultural sector and play role in decline fertility in this community.

4. Ever user of Contraception and Fertility

Low fertility level was observed with ever use of contraception practice in the comparison of never user of contraception and fertility is negatively associated between each other.

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ANNEX

Questionnaires

1. What is your caste\ethnicity?
 - a. Chamar
 - b. Yadav
 - c. Gupta
 - d. Other
2. In which religion do you belong to?
 - a. Hindu
 - b. Muslim
 - c. Christian
 - d. Other
3. In which occupation mainly your family depended?
 - a. Agriculture
 - b. Daily wage labor in Agriculture
 - c. Daily wage labor in non agriculture sector service
 - d. Service
 - e. Foreign employee
 - f. Others
4. Is your family able to regulate family cost from the occupation?
 - a. Yes
 - b. No
5. If wage labor what is the monthly income of your household?
 - a. Rs
6. If no, for how many months
7. Does your household have following facilities?
 - a. Radio
 - b. TV
 - c. Cycle
 - d. Electricity
 - e. Others
8. What is the main source of drinking water in your home?
 - a. Tube well
 - b. Well
 - c. Other
9. Do you have toilet facility?
 - a. Yes
 - b. No
10. If yes, what type of toilet facility does your household have?
 - a. Traditional
 - b. pit
 - c. bush\field
 - d. others

Individual questionnaire (15-49 years)

11. How old are you?

Completed years.....

12. Can you read and write?

13. Have you ever gone to school?

a. Yes b. No

14. If yes, what was the highest class you passed?

Completed class

15. Have you ever taken informal education?

a. Yes b. No

16. What is the education of your husband?

Completed class

17. What is your occupation?

a. Agriculture b. Wage labour c. Service d. Household work

e. Other

18. What is your husband occupation?

a. Agriculture b. Daily wage labour in agriculture c. Daily wage labour in non agriculture sector d. Service e. Foreign employee household work f.

Other

19. What is your monthly income of your household?

Rs.....

20. How old were you at the time of your first marriage?

Completes years _____

21. What is your marital status?

- a. Married b. Separated c. Divorced d. Widowed e. Others

22. What is the total no of children ever born?

- a. Boys b. Girls c. Total

23. Have you any interest to give birth to additional children?

- a. Yes b. No

24. Have you ever heard a family planning method?

- a. Yes b. No

25. If yes from where?

- a. Radio b. T.V c. Husband d. Relative / friends e. Health workers f.
Others

26. Which method has you heard of?

- a. Pills b. IDU c. Depo d. Condom e. Norplant f. Kamal
g. Withdrawal h. Safe period i. others

27. Have you ever used any method of family planning?

- a. Yes b. No

28. If yes which method have you used?

Name of a method

29. If no, why?

- a. Lack of knowledge b. Lack of memory c. Pair of side effect d. Cause of
husband e. Others

30. How many children have you given birth when you started to use contraception?

- a. Son b. Daughter c. Total

31. If yes which method?

Name of a method

32. If yes why?

- a. Don't want more children
- b. Because of family pressure
- c. To remain healthy for a long time

33. If no why?

- a. Due to long distance
- b. Don't know the place of available
- c. Due to afraid of losing health
- d. Due to want of another child
- e. Due to side effect
- f. Expensive
- g. Husband disagree
- h. Religion
- i. Family decision
- j. Others

34. Is it easy to obtain contraception methods?

- a. Yes
- b. No

35. Do you want to use any method in future?

- a. Yes
- b. No

36. If yes what method is that?

Name of the method