SOCIO ECONOMIC AND DEMOGRAPHIC IMPACT ON FERTILITY

(A Case Study of Urlabari VDC of Dhimal Community)

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BY

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Letter of Recommendation

The dissertation work entitled ***"Socio-economic and Demographic Impact on Fertility" (A Case Study of Urlabari VDC of Dhimal Community in Morang district)*** has completed by Mr. Tej Prasad Khanal under my guidance and supervision. I, therefore recommend the Dissertation Committee for the evaluation of this dissertation.

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APPROVAL SHEET

This dissertation entitled ***"Socio-economic and Demographic Impact on Fertility" (A Case Study of Urlabari VDC of Dhimal Community in Morang district)*** by Tej Prasad Khanal has been accepted as partial fulfillment of the requirements for the Master's Degree in Population Studies.

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ABSTRACT

This study deals with the ***"Socio-economic and Demographic Impact on Fertility" (A Case Study of Urlabari VDC of Dhimal Community in Morang district)*** in Urlabari VDC of Morang district. The primary data was collected from the study of community of Urlabari VDC. The analysis and interpretation of data were carried out by using frequency tables, cross tabulation, mean CEB with selected dependent and independent variables.

The study included 111 ever married women of reproductive age group from the same number of households. Out of the total Population, 48.5 percent are males and 51.5 females with the sex ratio of 94.26.

Among the total Population of 711 aged 6 years and above, 62.1 percent of both sexes are found to be literate and remaining 37.9 percent are found illiterate. Similarly, among the total Population aged 6 years and above, 41.9 percent are involved in agriculture in both sexes. Likewise, among the total Population aged 10 years and above, 36.4 percent people are found married against 58.8 percent unmarried and 4.8 percent are found widow/widower.

Average number of children ever born among married women aged 15-49 years is found 3.19. Occupational status and use of contraception are found negatively associated with fertility. The majority of respondents are found illiterate. They are totally unknown regarding the overall situation i.e. political, social as well as the economic condition of the country.

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ACRONYMS

CBS	:	Central Bureau of Statistics
CDPS	:	Central Department of Population Studies
CEB	:	Children Ever Born
FP	:	Family Planning
HH	:	Household/s
IEC	:	Information, Education and Communication
INGO	:	International Non-government Organization
Govt.	:	Government
GOs	:	Governmental Organizations
MOH	:	Ministry of Health
NGOs	:	Non-government Organizations
NDHS	:	Nepal Demographic and Health Survey
Popn.	:	Population
PRB	:	Population Reference Bureau
NPC	:	National Planning Commission
SLC	:	School Leaving Certificate
SPSS	:	Statistical Package for Social Sciences
UN	:	United Nations
VDC	:	Village Development Committee

CHAPTER-ONE

1. INTRODUCTION

Nepal is a multi-religious, multi-linguist, multi-cultural and multi-ethnic country. There are different casts such as Brahmin, Chhetri, Limbu, Rai, Kami, Sarki etc in Urlabari VDC (i.e. study area). Urlabari VDC lies between Damak Municipality of Jhapa district in east and Pathari VDC in the west. The VDC area is 29 sq. km. It is the second populated area of the Morang district. There are 8 high schools, among them only two schools are governmental ownership and 6 private secondary schools. Similarly, there are 6 governmental primary and 8 private boarding schools and one multiple campus. There is one primary health center and more than 20 medical clinics. There is one post office in this VDC and still has no access of communication in ward number 8 and 9. Agriculture is the main occupation of the VDC's people.

1.1. General Background of the Study

Fertility is one of the main components of population growth. The study approaches of the fertility, before the Second World War, were mathematically oriented. It is only after Second World War, when North America experienced a “Baby Boom” that human fertility has been occupying the central position in population studies (Bhende and Kanitkar, 1996). Especially in our society women’s status refers to overall position. It is the result of socio-economic and cultural practices of the society, and it has also multiple effects on social, economic and demographic behaviours of the society. Generally, the status of women is considered as the living standard of women and it covers their educational attainment, occupation, of their and their husband's occupation, parental and postnatal health facilities, age at marriage, their knowledge, attitudes and practice of contraception and their decision making power regarding their own fertility. The population of Nepal increased from 18,491,097 in 1991 to 23,151,423 in 2001 and annual population growth rate

during that period was 2.25 percent. Such a high growth is attributed to high level of fertility in Nepal. However, the total fertility rate (TFR) has declined from 5.6 in 1991 to 4.1 in 2001. The high rate of population growth in Nepal is primarily due to persistent high fertility and declining mortality (CBS, 1996). One of the major causes is economic factors associated to contributing high fertility in Nepal. Therefore, the major impact on fertility is socio-economic development which has been considered.

In simple words, by biological point of view, fertility is the child bearing process of the individuals', couples or groups. Conventionally, most measures of fertility are related to women of child bearing ages. Therefore, fertility measures are also confined to mothers. Fertility is a complex process responsible for biological maintenance of the society. It is generally determined by the physiological factors and their interplay with social, cultural, economic and modernization factors. Fertility is the childbearing performance of individuals, couples, group or populations. Fertility performance is biologically restricted to women, normally of 15 to 49 years of age. Therefore, almost all fertility measures are also conventionally related to women. Different socio-economic and cultural variables are employed to explain the prevailing level of fertility in all societies. "Dhimal" is one of the backward ethnic groups in Nepal. They are residing throughout the nation especially in eastern region. However, Dhimal living in Urlabari Village Development Committee of Morang district are taken for the analysis of the demographic and socio-economic factors in determining fertility.

1.2 Statement of the Problem

Population of Nepal has been increasing rapidly since the past 6 decades mainly because of continuous and steady decline in mortality rates on the one hand and almost constant and high fertility rates on the other hand. The decline in mortality rates in developing countries is some what clear phenomenon than the phenomenon of high fertility levels despite various efforts made by the

government. The population of Nepal is 23.1 according to 2001 census, which grew at an annual rate of 2.25 percent per annum (CBS, 2002). If the current growth rate continues, Nepal will have a total population of around 46.2 million by the year 2031. Such high rate of population growth and characteristics are associated with the challenges to the sustainable economic development of a nation. For a small landlocked country with low economic development like Nepal, these challenges seem to be even more serious as 17 percent of land in Tarai which is cultivable, is also being converted rapidly into residential area mainly because of high population pressure created by high fertility.

For encouraging fertility, the most noted are low socio-economic status, low status of women, various social and religious norms and values that prevent people from accepting the using the means of family planning, high economic value of the children and so on. Such factors are playing even more important role in encouraging the fertility of the people in a backward community like Dhimal, where most of them may be seen busy in making their living by farming and working in low paid job. So it is an urgent need to explore out the key socio-economic and demographic factors that are likely to play important role for their fertility in a community and thereby to fight against them through the integration of population policy in development of the country. Although having good educational and occupational level of the fertility, it is seemed higher in this community.

1.3 Objectives of the Study

Objectives of this study are as follows:

- To identify socio-economic characteristics of Dhimal community.
- To identify the demographic variables of Dhimal community.
- To examine the relationship between socio-economic and demographic characteristics of Dhimal community.

1.4 Significance of the Study

Dhimal is such an ethnic group that covers small proportion in size in total population of Nepal. The socio-economic impact on fertility of Dhimal community is not yet analysed, so Dhimal community is taken for the study. Due to the absence of proper research about Dhimal community, the nation knows very little about them. So the nation has not been able to benefit from them by utilizing their service in various walks of national life. This research has tried to fulfill the gap between their own status and national status of Dhimal community. The significance of the study may be analysed as follows:

- There is no any research happened in this community before it.
- Findings of the study will be a key instrument for policy makers and planners, which will be important to improve the socio-economic condition of Dhimal community of Urlabari VDC.
- It will be useful to further researchers and help to local people to develop the awareness about their socio-economic and demographic condition.

1.5 Limitation of the Study

- Only the Dhimal of Urlabari VDC has been considered in this study, so this study does not cover all Dhimal community of Nepal.
- Only some selected variables are applied to describe the status of Dhimal community and its relationship with fertility.
- The study has a small sample size, which is not representative of the larger population or national level and only the limited method is used.

1.6 Organization of the Study

This study is organized in seven major chapters. The first chapter describes about introduction, general background, statement of the problem, objectives of the study, significance of the study, limitation of the study and organization of the study. Chapter second describes about literature review both theoretical and empirical. Chapter third deals about methodology where

selection of the study area, research design, sampling procedure, sources of data, conceptual framework for the study, data collection technique, analysis and selection of the study variables are explained.

Chapter fourth describes and introduces the socio-economic and demographic characteristics of the study population and chapter five describes and introduces socio-economic and demographic characteristics of the respondents. The sixth chapter analysis fertility with the help of selected socio-economic and demographic variables by frequency, mean and cross tabulation and chapter seventh deals with summary, conclusions and recommendations.

CHAPTER-TWO

2. LITERATURE REVIEW

This chapter deals with the review of developed theories in the context of the study of fertility, because literature review is the mirror of the study. It gives information about both theoretical and empirical on the basis of developed theories on fertility. Likewise, a conceptual framework will be suggested as guidance for the present study.

2.1 Theoretical Literature Review

Human fertility indicates the actual reproduction performance of women or group of women. It is a complex process, which is responsible for biological maintenance of society. But there are several social, cultural, psychological, economic and political factors to determine of fertility of the process of fertility. These factors are responsible to determine level and differentials of fertility (UN, 1973; PP 64).

Fertility has two phenomenon while it operates one is its attitudes and another is behaviour. Couples make up their mind first by determining the tentative size of family they would like to have called attitudes then; they give birth of children called behaviour, on the basis of their attitudes. (Chalise, 1998; PP 1).

Fertility in a country may greatly influence the pattern of social and economic development. The rapid increase in population as a result of high fertility and declining mortality can do much to aggravate the development process. The management of fertility is thus recognized as one of the main factors in accelerating socio-economic development. Age at marriage place of residence, education and ecological zones are associated with this persistently high fertility in Nepal (NPC, 1988).

John Bongaart and Robert Potter (1983) modified the Davis and Blake (1956) framework. They collapsed 11 intermediate variables into seven factors to allow simple quantification and presented a simple model for analysing the relationship between intermediate variables and fertility. They are (i) proportions married among females, (ii) contraceptive use and effectiveness, (iii) induced abortion, (iv) duration of postpartum infecundability, (v) fecundability (or frequency of intercourse), (vi) spontaneous intrauterine mortality and (vii) prevalence of permanent sterility. But after analysing 41 various sample population, they claimed that 96 percent of total fertility behaviour could be explained by using only four variables. (i) proportion married among females, (ii) postpartum infecundability, (iii) prevalence of contraceptive use and (iv) incidence of induced abortion (Dahal, 1992; pp 1-16).

Spencer (1967) postulated fertility increase or decrease as a response to the progress of society and culture with respect to improvement in living standard of men and women (cited in Bhende and Kanitkar, 2003; pp129).

The theory of capillary presented by Arsene Dumont emphasized the fact that human violation has played important role in the fertility decline. This theory is based on the physical law of nature "the force of capillary". It concludes that the lower fertility is associated with the higher socio-economic development.

The theory of diffusion or cultural lag explains how the concept of birth control spread all over the world. According to this theory, in countries where fertility has been declining, attitude and practices conducive to diminishing fertility have been adopted first by the better educated, wealthier and high social status groups of the city population and transferred in the duration of time to intermediate and lower status groups and to the rural areas (Bhende and Kanitkar, 1994).

According to Bulatao and Fawcett (1983; pp 136-150) women who give first birth at a younger age are likely to have subsequent children more rapidly and end up with large families. It is found that different research of Nepal proved that current age of mothers had positive correlation with children ever born (CEB).

Economists have also developed models of fertility while explaining parental attitudes and fertility behaviours. The following economic concepts are used commodity, utility of children opportunity, cost, shadow price, demand theory on the economics of fertility. Two major schools of thought can be identified, the Chicago school approach and the socio-economic approach.

Confronted in the beginning of widespread rapid population growth in developing countries during 1930s and 1940s demographers such as Kingslay Davis, Warren Thompson, Frank Lorimer and Frank Notestein naturally identified the causes of faster growth as improvement in mortality (Dyson and Murphy, 1985). In those early days, there was no evidence to suggest that there had been rapid population growth resulted from mortality decline in the presence of high and more or less stable birth rate which was consistent with the main descriptive and theoretical statements contained in the early writings on demographic transition theory of which these scholars were key formulators.

Ronald Freedman's (1975) argument is that the intermediate variables are not always used to limit fertility and often their effect on fertility is an unintended result of cultural patterns. Freedman introduced two types of norms in his model, namely, norms about family size and norms about intermediate variables. The intermediate variables generally operate together with effects of norms about family size and norms about intermediate variables. Norms about family size are influenced by varying life style related to position in a status hierarchy. Status indicators, such as education, occupation, income, wealth, power, prestige, caste and general class indicators may influence the desired

number of children. Differences in life style may influence norms about intermediate variables directly or though norms about family size.

Social organization such as a family planning program that has a goal to reduce fertility may influence the norms about family size or norms about intermediate variables and may control intermediate variables, for instance, use or non use of contraception. Social organization such as a family planning program may involve. Without explicit reference, either of the norms or may influence the intermediate variables, which in turn affect fertility behaviour (Freedman, 1975, Cited in Tuladhar, 1989; pp 169-189).

Figure 1: Socio-Economic Analysis of Fertility

Source: Freedman, 1982.

Psychological factors generally determine fertility and their inter play with social, cultural economic and modernization factors. Similarly societies and population subgroups within society's categories by their socio-economic characteristics have different level of fertility. Moreover, fertility is determined by various socio-economic and demographic variables i.e. cast/ethnicity, religion, culture, women's education, occupation, son preference, use of contraceptive device, age at marriage which affect fertility behavios of any

group and community (Risal and Shrestha, 1989; pp 227). Notestein 1945 argued that a traditional society kept high fertility and high mortality.

Harvey Liebenstein (1979) in this well-known work economic backwardness and economic growth published in 1957 has formulated a theory that explains the factor which determines the number of children desired by each couple. This theory is based on the assumption that people make “rough calculation” regarding the utilities and disutility of children and then decide on the number of children they would like to have. Such calculations take into account the balance between the satisfaction and utilities obtained from and additional child the “cost”, both monetary and psychological of having an additional. (Here Liebenstein’s emphasis is mainly on the higher order births he is not concerned about the first two children at all).

The distributive justice hypothesis advocates for a redistributions of income and opportunities to bring down the fertility. Fertility could be successfully reduced through increased welfare, through a more equitable distribution of goods and services and opportunity is the major argument of this hypothesis labor intensiveness in industry land reform, widely spread paramedical health services, access to education, all combines, according to the hypothesis to create the condition for fertility decline (Iichman, 1975; pp 217-266).

Threshold hypothesis was developed within the theory of demographic transition but it does not depend on holding the long-term reciprocity of births and death as the key determinant. The hypothesis ultimately divides the world into those nations marked by low fertility “gross reproductive rate” with less than two” (GRR>2) and those with relatively high fertility (GRR$\geq$2). The two groups shows a substantial difference on indicators of income per capita energy consumption, ‘urbanization, non agricultural activities, hospital beds, life expectancy at birth, infant mortality, early marriage, female literacy, newspaper

circulation, radio receivers and cinema attendance (Iichman, 1975; pp 217-266).

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 importance of causal links between the socio-economic and demographic variables, and their relationship with fertility (Aryal, 1997; pp 1-10)

2.2. Empirical Literature Review

This subsection presents the review of empirical literature related to fertility.

2.2.1 Fertility Differentials by Socio-economic Status

2.2.1.1 Education and Fertility

"The educational attainment of couples has a very strong bearing on the number of children born. Educational attainment, especially of women, is one of the indicators of modernization and the status of women in society" (Bhende and Kanitkar, 2004, seventh edition, pages 312-313). 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 primarily level education than graduate in USA educational attainment also reflect the socio-economic status of the people. The macro economic modal of fertility reduction also include education as one of the important determinant of fertility especially in developing countries. The relationship between education and fertility is 2 way traffic, in which high fertilities countries have to invest more in education and educational progress eventually help in fertility decline.

The empirical study based on Nepal fertility survey data, 1976 has shown that the number of children ever born among literate women was 2.3 compared to 3.3 illiterate women. Women with literate husband also have

fewer mean numbers of children ever born 3.0 than those with illiterate husband 3.5. With regard to level of education women with no education have mean CEB of 3.3 compared to 2.2 among those with some education and women whose husband have no education have mean CEB of 3.6 as opposed to 2.3 among those whose husband have some education (Nepal FP/MCH project, 1997 cited in Risal and Panta 1998).

In a high fertility country like Nepal, not many studies have been conducted on the relationship between the educational attainment of the women and her family size. So far it has been possible to study the effects of the educational attainment of women on fertility especially in rural areas of Nepal.

2.2.1.2 Age at Marriage and Fertility

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 marriage. In population where use of contraception is low, early marriage leads to longer exposure to child bearing. Therefore, early and universal practice in Nepal results in long term social and economic consequences including higher fertility (MOPE, 2004).

Marriage usually takes place at very early ages in Nepal. Some studies have demonstrated that an increase in female age at marriage contributes to a reduction in fertility. It is also true in the case of Nepal where the inverse relationship between age at marriage and fertility has been observed In Indonesia (1987, it was found that a five year delay in age at first marriage was associated with bearing between 0.75 and 1.1 fewer children than average (5.1 child). (Chhetry, 1993).

According to Nepal fertility and family planning survey (NIFPS 1986), the completed fertility of Nepalese who get married at the age of less than 13 years is 6.0 mean number of children ever born while the women who get

married at the age of 25 years and above had 2.8 average number of children ever born per women (MOPE 1987).

Tuladhar (1989) examined the mean number of CEB to currently married women aged 15 to 49 years by age at marriage, using data from Nepal Fertility Survey 1976. He found that those women who are married at age less than 15 years, 15 to 17 years, 18 to 19 years and 20 years and above have 3.59, 3.15, 2.81, and 2.83 mean live birth whereas in 1987 in Sir Lanka the average number of children ever born found for 5.6 for women married before 15 years, 2.6 for 22 to 24 years and 3.1 for all currently married women respectively (SDHS, 1987). This is indicating that a negative correlation between the age at marriage and fertility.

Marriage is combination of two opposite sexes. The early age at marriage provides the chance to experience all the reproductive period of women. A woman enters into the reproductive period after her first menarche and completes after menopause. Many empirical studies conducted to find the relation between fertility and age at marriage reveals that there is inverse effect of age at marriage to fertility. Those women, who are marriage late, have less number and low total fertility rate. The child bearing activities are legalized only after marriage in almost all the countries of the world. In the South Asian countries this phenomenon plays the active role because a girl has no culturally respects if she bears the baby before her marriage. Therefore, higher the age at marriage, lower the fertility and lower the age ate marriage higher the fertility.

2.2.1.3 Occupation and Fertility

Occupation is also one of the important factors for determining the status of women. Generally, mainly employed women tend to have smaller families than these who are not employed. Females in different occupation are found to have different fertility levels. The mean numbers of CEB per ever married women is highest for those involved in farm (2.7) and sales workers

(2.7). Similarly, the lowest is observed among the professional and technical (1.6) and electrical workers (1.6). This could be due to the social status and time available to working women for raising children (CBS1995:78-79).

UN (1987) found that in every region women with an occupation in modern sectors of economy had the smallest number of CEB than women involved in traditional sector of economy. Those who had never worked are likely to have slightly fewer children in an average than women in traditional occupation but more than women involved in any of the other occupational group. In Asian countries, the difference in mean CEB was found to be 2.2 children between women who worked and who did not. The differences in mean CEB between women who had never worked since marriage and those who had never worked varied by only 0.8 children in Columbia and Panama, 0.3 children in Indonesia, 0.2 children in Sir Lanka (cited in DAs, 1998). BCD survey, 1996 shows that to some extent, the occupation of the husband had more explanatory capacity than that of the occupation of women themselves for fertility determination in Nepalese women.

A study conducted in 1992 in three villages near Kathmandu indicated that the women in agriculture had 3.63 CEB, 3.62 for women engaged in trade, 3.52 for women engaged in services, for women who are studying. (Acharya, 1996)

2.2.1.4 Infant Mortality and Fertility

Numerous studies have demonstrated a strong relationship between mother's pattern of fertility and the change of her children is survival. Typically, infant and young children have a higher risk of dying if they are born to very young or older mothers, if they are after short interval or if their mothers have already had many children. Therefore, it has been argued that high infant and child mortality is a cause of high fertility in many societies, because there is always need of new child to compensate. Infant mortality rate

is higher in most developing countries like Pakistan (85), Bangladesh (65), India (60), Mozambique (119), Zambia (95), and Nepal (64), whereas the fertility rates are also higher in these countries. The total fertility rate Pakistan (4.8), Bangladesh (3.0), India (3.0), Mozambique (5.5), Uganda (6.9) and Nepal (3.7) (World Population Data Sh0eet, 2005, PRB). Infant mortality rates ceases (stop) the lactation that helps to shorten post partum in fecund-able period and resumption of ovulation occurs, hence the mother is ready to conceive another baby. The death of children reduces the child carrying, responsibilities, child caring mothers in some cultural sleep separately from her husband the absence of child resumes sexual activities the parents desire to replace the dead children which new one. It further helps to increate the complications of pregnancy maternal mortality and infant mortality and child mortality due to low birth weight and malnutrition. The distributions of the health services, mortality and mortality status of the people are closely related to the fertility performance. The developing society have high crude death rate due to ageing the does not reflect the high fertility. High fertility countries have also high maternal mortality.

2.2.1.5 Family Planning and Fertility

Various socio-economic factors such as level of educational attainment, place of urban/rural residence and occupational status are important to use of contraceptive. So the contraceptive use is inversely related to level of fertility. In Nepal, high fertility is mainly due to the lack of demand of family planning (Tuladhar, 1989).

2.2.1.6 Desired Family Size and Fertility

There is a direct linear relationship between desired number of children and fertility, which may be related with age and parity of women. The majority of currently married fecund women do not want more children, when they reach the age of 30 years and above. By that age, the majority of them would

have four or more surviving children and two or more surviving sons (Tuladhar, 1989).

2.2.1.7 Status of Women and Fertility

Nepal's planned intervention to uplift the status of women began with the Sixth Five Year Plan (1980/81 – 1984/85). This plan attempted to increase employment for women but creating opportunities in both formal and informal education, involving women in agricultural training, cottage and other small industries as well as population control activities. In addition, the plan took as a goal to reform laws and regulations that inhibits women's participation in development. “The status of women in Nepal” summarized by (Dahal, 1992) study that among the high caste groups (Bharamins/Chhetri) the authority structure is male dominated; women can not make their decisions, and they have no independent sources of income an property. Among the women of Varagaonle, Longrung Rais and Kham Magar, they have liberal social structure, which permits them to have own choice in marriage, give the number of birth of child, residence and int eh accumulation of property. Likewise, Newar, Tamang and Tharu women can make their own decision within the family and have their own independent in decision making (Dahal, 1992).

2.2.1.8 Sex Preference, Insecurity, Economic Value of Children and Fertility

In most of the developing countries, like Nepal, preference for the sons exists due to various economics and social reasons which influence the fertility level. Old age security is the main reason to prefer male children is developing countries. Countries with poor social security system have higher son preference. Higher old age support and lower first involved to raise the children is the main reasons for higher fertility in developing countries.

2.3 Proposed Conceptual Framework

The literature review provides sufficient background to conceive a conceptual framework of the study by establishing relationship among various

socio economic and demographic variables. In socio economic variables (education and occupation) demographic variables (age at marriage, child loss experience and contraceptive) which have direct influence on fertility are considered in this study. This framework includes occupation and education as independent socio economic variables and age at marriage and child loss experience and contraception prevalence as intermediate demographic variables which have direct or indirect influence on dependent variable on fertility.

The conceptual frame work deals with different selected socio-economic, demographic and intermediate variables relating with fertility of Dhimal community, which is presented in below as:

Figure:2 Proposed Conceptual Framework

The study of socio economic determinants on fertility is a very complex phenomenon which is justified by the preceding discussion of various literatures. However, this study has been trying to find out effect of independent variables (socioeconomic and demographic variables) on dependent variable mean CEB.

CHAPTER -THREE

3. RESEARCH METHODOLOGY

The different techniques, methods applied in the study are deal in this chapter. This chapter also reflects the overall mirror of the study.

3.1 Introduction of Study Area

Nepal is a multilingual and multicultural country. People of different religion, different ethnic groups reside in the different parts of the country.

Dhimal community, probably one of the most depressed ethnic groups of Nepal, is found in Eastern Part of the Country. This ethnic group has been facing different circumstances. Being ignorant and noble behaviours, they are easily cheated by another superior class. They are being depressed from the very beginning. So, the different programs for their upliftment are required otherwise the overall development of the country will be failed as they constitute one of the major groups of the country.

Urlabari VDC is one of the important village of Morang district. This study is directly concentrated on Dhimal community of Urlabari VDC of Morang district. This community has low socio-economic condition even though they in habitat mixing with other cast/ethnic groups. This study is concentrated to expose the hidden reason of high fertility of Dhimal community of Urlabari VDC.

This community consist the population of Brahmin, Chhetri, Limbu, Rai, Kami, Sarki etc. There are different cast ethnic group of people residing in this VDC.

3.2 Source of Data

This study based on primary as well as secondary data collection of Dhimal community. Primary data was collected from field survey by using structured questionnaires.

3.3 Sample Design

The sample survey was designed for the population of Dhimal community only which was selected from 1 and 6 ward of UrlabariVDC in Morang district of the total 9 ward as the study area. In this community total population was recorded as 22854. Among them total number of males 11667 and females were 11187 (Source: Dhimal Development Community Office).

From each of the selected ward 1and 6, the HH were selected 35 and 76 respectively. For the reliable data collection more than 75 percent HH was taken as the sample design. On the other hand my desire sample HH was 111, because only those 2 wards was the populated residential area of Dhimal community in this district.

3.4 Questionnaire Design

Questionnaire was developed in two types: household and individual. The HH questionnaire was introduced for collection of HH information and individual questionnaire was introduced for collection of individual information only eligible women age 15-49 years. The type of questionnaire was both open ended and close ended.

3.5 Method of Data Collection

Out of the total HH (2392) of this VDC only 111 HH was taken for this study. The simple random sampling method was used for collecting the information of that ethnic group for the study. Unfortunately, 111 respondents are found due to the absence of 3 eligible women reproductive age 15-49 years at the time of field visit.

3.6 Analysis of Data

The collected data were entered into computer Data Base Program. Entire questionnaires were manually edited before entering the computer. Require tables are generated by SPSS software program.

To analyze the collected data, frequency table and cross tabulation are used.

CHAPTER-FOUR

4. SOCIO-ECONOMIC AND DEMOGRAPHIC CHARACTERISTICS OF THE STUDY AREA POPULAITON

In this chapter the socio-economic and demographic characteristics of Dhimal community are described and analyzed.

4.1 Age-sex Structure

Age and sex are basic characteristics or the biological attributes of any population which affects fertility, mortality and migration behaviour. Age and sex structure not only reflect the present demographic situations of population but also give the basis for the study of past as well as future demographic situations of the population. Age, sex and migration play very important roles in the study of population dynamics.

Table 4.1 Distributions of Study Population by Age and Sex

Age Group	Male		Female		Total		2001Census
	Number	Percent	Number	Percent	Number	Percent	Percent
0-4	10	2.9	28	7.6	38	5.3	12.1
5-9	51	14.8	40	10.9	91	12.8	14.1
10-14	41	11.9	55	15.0	96	13.5	13.1
15-19	46	13.3	32	8.7	78	10.9	10.5
20-24	24	7.0	35	9.6	59	8.3	8.9
25-29	31	9.0	29	7.9	60	8.4	7.6
30-34	27	7.8	35	9.6	62	8.7	6.5
35-39	27	7.8	29	7.9	56	7.8	5.8
40-44	19	5.5	16	4.3	35	4.9	4.8
45-49	10	2.9	16	4.4	26	3.7	4.1
50-54	20	5.8	11	3.0	31	4.4	3.4
55-59	11	3.2	13	3.6	24	3.4	2.6
60+	28	8.1	27	7.4	55	7.7	6.6
Total	345	100.00	366	100.00	711	100.00	100.00

Source: Field Survey 2007 and CBS 2001

The percentage of total population is found highest (13.50) in the age group 10-14 followed by 5-9 and 15-19 years. The lowest percentage of population 3.38 are observed in the age group 55-59 years.

The percentage of male population is highest in the age group 5-9 and lowest in the age group 0-4 and 45-49 years representing 14.78 and 2.90 percent respectively. Likewise, the percentage of female population is highest in the age group 10-14 and lowest in the age group 50-54 years representing 15.03 and 3.01 percent respectively of the total population in the study area. Any age groups are not found similar to national figure 2001; all age groups are found different (Table 4:1).

Figure 4:1 Percentage Distributions of Study Population by Age and Sex

4.2 Sex Ratio

The sex composition of a population is expressed by sex ratio. It is calculated by dividing the total number of males to that of females multiplied by 100. It shows the number of males per 100 females. According to this definition, the sex ratio above 100 indicates an excess of males and the ratio below 100 indicates an excess up females in a population at any point of time. Simply by looking at the sex ratio, one can have the clear picture of the composition of population.

Table 4.2 Distributions of Study Population by Age Group and Sex Ratio

Age Group	Field Survey	Census 2001
0-4	35.7	105.8

5-9	127.5	103.5
10-14	74.6	102.5
15-19	143.6	96.4
20-24	68.6	91.8
25-29	106.9	90.9
30-34	77.1	94.6
35-39	93.1	98.2
40-44	118.6	100.0
45-49	62.5	102.7
50-54	181.8	105.8
55-59	84.6	106.5
60+	103.7	103.1
Total	94.3	99.8

Source: Field Survey 2007 and CBS 2001

Table 4.2 represents the sex ratio by five years age interval, which shows highest for the age group 50-54 and lowest for age group 0-4 years 181.8 and 35.7 respectively compared to corresponding to sex ratios of 105.8 for both age group according to 2001 census. The overall sex ratio of the study population is found 94.3 compared to corresponding to sex ratio of 99.8 in 2001 census.

4.3 Dependency Ratio

This is another measure of the study on the structure of population. The number of dependents per 100 workers is computed on the basis of three broad age groups below 15 years, between 15-59 years and 60 years and above. The population in the age group 15-59 years is considered as the working population, population below 15 years as the young dependent group and population 60 years above is considered to be old dependents. The ratio of the young dependents to working population (15-59) years multiplied by 100 gives the young dependency ratio and the ratio of the old dependents to the working

age population (15-59 years) gives old dependency ratio where as, the sum of these two ratios gives the total dependency ratio.

Table 4.3 Distributions of Study Population by Dependency Ratio

Dependent Group	Field Survey	2001 Census
Child age 0-14	52.3	71.9
Old age 60+	12.7	11.1
Total	75.0	83.0

Source: Field Survey 2007 and CBS 2001

Table 4.3 shows that child dependency ratio is 52.3 in the study population. It is found to be lower compared to the national data according to 2001 census. Old dependency ratio is 12.7 in the study population which is lower compared to national figure from census 2001. Total dependency ratio is 75.0 in the study population which is lower compared to the national figure of 2001 census.

4.4 Occupational Status

Occupation refers to any works which are applied for the conduction of their life. It has also direct connection to fertility. It is determined by tradition, skills and qualification which affect fertility. The question about the occupation was asked to the population who were at the age of ten years and above.

Table 4.4 Distributions of Study Population aged 10 years and above by Occupation

Occupation	Number	Percent
Agriculture	282	41.9
Home industry	16	2.4
Job/service	9	1.3
Trades	22	3.3
Household work	13	1.9
Students	238	35.4
Others	93	13.8
Total	673	100.00

Source: Field Survey 2007

Table 4.4 shows that of the total 673 population age ten years and above by occupation. 35.4 percent population has their main occupation as student. Similarly, 41.9 percent 10 years and above population are engaged in agriculture. The lowest percentage (1.3%) of people in the study area is found engaged in job/service.

Figure 4.2 Distributions of Study Population aged 10 years and above by Occupation

4.5 Educational Status of the Study Area Population

Education is one of the most important variables which plays a vital role in all developing society and indirectly affects variables like fertility, mortality, health condition, income, occupation, living standard and so many others. Thus, it is necessary to know the situation of education in the study area. The distribution of educational status of study population with age five years and above is shown below.

Table 4.5 Distributions of the Study Population Aged Six years and Above by Literacy and Level of Education

Educational status	Number	Percent
Illiterate	255	37.9
Literate	418	62.1
Total	673	100.00
School Attainment Level of Literacy Group		
Non formal education	77	18.42
Primary level	154	36.8
Lower Secondary level	82	19.6
Secondary level	88	21.1
SLC passed	17	4.1
Total	418	100.00

Source: Field Survey 2007

Table 4.5 shows study population with 37.9 percent illiterate against 62.1 percent literate. Among literate study primary level education account for 36.8 percent followed by secondary level 21.1 percent. Likewise, 18.42 percent have non-formal education. Similarly, lower secondary, secondary and SLC passed appeared with the 19.6, 21.1 and 4.1 percent respectively in the study area.

Figure 4.3 Percentage Distributions of the Study Population Aged Five years and above by Literacy and Level of Education

4.6 Marital Status of the Study Area Population

The study of nuptiality deals with the frequency of marriage, where union between persons of opposite sexes involves rights and obligations fixed by law and custom, with the characteristics of persons united in marriage and with the dissolution of such unions. The marriage is the primary events in process of family formation. The marital status of the study area population of aged 10 years and above shown in Table 4.6.

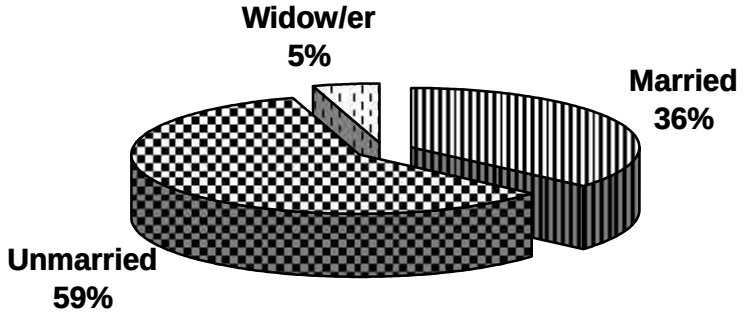
Table 4.6 Distributions of marital Status of the Study Area Population by Aged 10 years and Above

Marital Status	Number	Percent
Married	212	36.4
Unmarried	342	58.8
Widow/er	28	4.8
Total	582	100.00

Source: Field Survey 2007

Table 4.6 shows study population with 36.4 percent married against 58.8 percent unmarried percent. Among the total number of study are population 4.8 percent population are found widow/er.

Figure 4.4 Percentage Distributions of marital Status of the Study Area Population by Aged 10 years and Above



4.7 Land Holding Status of Households

Land holding status also indicates the socio economic status of the HH. As seen Table 4.4, 41.9 percent of populations in this community are engaged in agriculture. A significant percentage 33.3 has less than 15 kattha land. It is shown in the Table Number 4.7.

Table 4.7 Distributions of HH of the Study Area Population by Land Ownership

Land	Number	Percent
Less than 5 Kattha	16	14.4
6-10 Kattha	18	16.2
11-15 Kattha	37	33.3
16-20 Kattha	22	19.8
21-25 Kattha	6	5.4
26-30 Kattha	2	1.8
Above 30 Kattha	10	9.0
Total	111	100.00

Source: Field Survey 2007

In this study, above table shows that the 33.3 percent HH have 11-15 Kattha land followed by 19.8 percent HH having 16-20 Kattha, whereas only 9

percent have above than 30 Kattha land. Similarly only 14.4 percent are found having less than 5 Kattha land. It is shown in the table number 4.7.

Figure 4.5 Percentage Distributions of HH of the Study Area Population by Land Ownership

4.8 Family Size Status of the Household

Number of family member also indicates the socio-economic status of the HH. The percentage distributions of total population by family size is presented in Table 4.8.

Table 4.8 Distributions of Total Population percentage by Family Size

Family size	Number	Percent
1-4	7	6.3
5-6	54	48.6
7-12	50	45.0
Total	111	100.00

Source: Field Survey 2007

Table 4.8 shows that about forty eight percent (48.6%) have family size of 5-6 followed by 45 percent of 7-12 family size. It also shows that only 6.3 percent of the respondents have family size of 1-4.

4.9 Religion and Mother Tongue

After the restoration of democracy in 1990 the issue of religion has become a sensitive topic in ethnical group. The study area population has to be found all of them are Hindu. Similarly, their mother tongue is found entirely Dhimal.

4.10 Types of Family

Types of family is an another important aspect of socio-economic status of HH. In this community, 55.9 percent respondents are from nuclear family and 44.1 percent from joint family. This figure shows that nuclear family is in increasing trends than past.

4.11 Types of House

The type of house also represents the status of socio-economic condition of the HH. Table 4.9 presents the study area population by types of house.

Table 4.9 Distributions of the Study Area Population by Types of House

Types of House	Number	Percent
Cement/brick	2	1.8
Stone/mud	36	32.4
Bamboo/grass	58	52.3
Others	15	13.5
Total	111	100.00

Source: Field Survey 2007

Above table shows that only 1.8 percent of houses are made by cement/brick whereas the 52.3 percent houses are made by bamboo/grass. Among the total sample HH 79.3 percent house's roof are found made by hay and followed by tin 19.8 percent and only 0.9 percent (i.e. 1) house's roof are found made by cement. Similarly, among the total HH 72.1 percent have found

own their toilet against 27.9 percent have not found own their toilet facility. Likewise, 84.7 percent respondents have electronic media (especially radio) access in their HH and 15.3 percent respondents do not have anything.

4.12 Household Income of the Study Area Population

Family income in a HH plays an important role in fulfilling the basic needs of the individual and family. Quality of life also depends upon the income of the people.

Table 4.10 Percentage Distributions of Study Population by Income Source

Income source	Number	Percent
Agriculture	88	79.3
Trades	6	5.4
Domestic industry	2	1.8
No occupation	14	12.6
Live stocks	1	0.9
Total	111	100.00

Source: Field Survey 2007

Table 4.10 shows that 79.3 percent HH depend upon agriculture followed by 5.4 percent upon trades against 12. 6 percent without any income source in households.

4.13 Drinking Water and Electricity Facility in Household

Another aspect of socio-economic status of the study area population is drinking water resources and electricity access. Among the total HH, 78.1 percent are found to depend upon their own Tuebel resources and 19.8 percent depend upon the cup/stream resources. Except 2,3 4 number ward of Urlabari VDC, there is no pipeline drinking water access for other wards.

Similarly, 72.1 percent households have the access against 27.9 percent who have no access of electricity facility.

CHAPTER-FIVE

5. SOCIO ECONOMIC AND DEMOGRAPHIC CHARACTERISTICS OF RESPONDENTS

This chapter deals with the socio-economic and demographic characteristics of Dhimal women (15-49 years) only living in the study area.

5.1 Age Distributions of Respondents

Age of women is one of the demographic factors which influences on fertility. The general age pattern of women of fertility is that the level of fertility is increased with the increment of age of women. Table 5.1 shows the respondents' age classified by five years age group.

Table 5:1 Distribution of Respondents Women (15-49 years) by Five years Age Group

Age Group	Number of Respondents	Percent	NDHS 2001
15-19	-	-	10.8
20-24	11	9.9	19.0
25-29	19	17.1	19.1
30-34	28	25.2	16.4
35-39	26	23.4	13.4
40-44	13	11.7	11.8
45-49	14	12.5	9.6
Total	111	100.00	100.00

Source: Field Survey 2007and NDHS 2001

Total 111 women were contacted during the study for interview. Data shows that maximum number of women 25.2 percent are found in 30-34 age

groups in comparing to 16.4 percent according to NDHS 2001. This is followed by age group 35-39 years 23.4 percent and 25-29 age groups with 17.1 percent.

Lowest numbers of women are in 20-24, and 40-44 which are respectively 9.9 percent and 11.7 percent of total women. Not a single respondent from 15-19 age groups is found in the study area. Table 5.1 shows that the out of the total respondents, 52.2 percent fall in the peak of their reproductive life, 20-34 years of age. The percentage of respondents in age group 40-44 is found, about the same as corresponding figure 11.8 percent in 2001; but the respondents of other age groups are found much different.

Figure 5.1 Distributions of Respondent Women (15 – 49 years) by Five year Age Groups

5.2 Educational Status

Educational status is one of the most important factors for determining fertility level. It also depicts the socio-economic background of the respondents. It is essential to know the literacy status of the study population in order to examine the factors determining fertility in any community. Educated women understand the consequences of population growth and they use the means of family planning and do not give the preference for son.

Table5:2 Distributions of Respondents by Literacy and Level of Education.

Educational status	Number	Percent
Illiterate	78	70.3
Literate	33	29.7
Total	111	100.0
Level of Education		
Non formal education	7	21.2
Primary level	11	33.3
Lower Secondary level	9	27.3
Secondary level	6	18.2
Total	33	100.0

Source: Field Survey 2007

Table 5:2 shows the educational status of the respondents where out of 111 women with age 15- 49 years 70.3 percent respondents are found illiterate and 29.7 percent respondents are literate. In the study area majority of the respondents are found unable to read and write. Similarly 27.3 percent women have attained in lower secondary level followed by 18.2 percent women have attended in secondary level education. No one respondents of the study are having passed the SLC level.

Figure 5.2 Percentage Distributions of Respondents Literacy

Similarly, reasons for not schooling is found 29.5 percent with low economic status followed by 59.0 percent with not educating reason and out of total respondents 11.5 percent reported that there is no educational trend.

5.3 Respondent Women by Age at Marriage

Age at first marriage is the one of the most important factor for changing the fertility rate of the spouse. If the people do early marriage then their fertile periods remains long and there is the probability of high fertility. On the contrary getting marriage in matured and appropriate age helps in producing required and few children.

Marriage usually takes place at early age and is almost universal in Nepal. This tendency is also seen in the study area due to socio-cultural and religious belief which ultimately results high level of fertility. Age at marriage is classified into four major groups which are given below.

Table 5.3 Distributions of Respondent Women (15-49 years) by Age at Marriage

Age at Marriage	Number	Percent
10-14	2	1.8
15-19	78	70.3
20-24	25	22.5
25-29	6	5.4
Total	111	100.0

Source: Field Survey 2007

The above table shows that 70.3 percent women are married between the age groups 15-19 years followed by 22.5 percent who married between the age group 20 -24 years. Similarly, 5.4 percent women are married between age 25-29 years and only 1.8 percent women are married below age 15 years.

Figure 5.3 Percentage Distributions of Respondents Women (15-49 years) by Age at Marriage

5.4 Respondent Women by Children Ever Born

Number of children ever born (CEB) play vital role to increase population in the world and is shows measures of fertility.

Table 5.4 Distributions of Respondent Women (15-49 years) by number of CEB

Number of CEB	Number	Percent
0	6	0.0
1	14	13.3
2	15	14.3
3	35	33.3
4	17	16.2
5	11	10.5
6	9	8.6
7	4	3.8
Total	111	100.0

Source: Field Survey 2007

Table 5.4 shows that 33.3 percent have 3 number of CEB followed by 16.2 percent have 4 number of CEB. Likewise, 14.3 have 2 CEB and 13.3 have 1 number of CEB, 8.6 have 6 and 3.8 percent have 7 number of CEB respectively. Similarly 94.6 percent of respondents have give birth to any children against 5.4 percent have not give birth to any children.

5.5 Knowledge and Use of Family Planning (FP) Methods

It is an essential factor in promoting family planning services. The prevalence of family planning method is associated negatively with fertility. Some of the devices are being exist for birth spacing and fertility control.

Table 5.5 Distributions of Respondents Women (15-49 years) by Knowledge and Using Family Planning Method.

Heard of Method	Number	Percent
Yes	60	54.1
No	51	45.9
Total	111	100.00
Methods known		
Condom	11	18.3
Injectables	57	95.0
Foam tablets	7	11.7
Female sterilization	21	35.0
Total	60	100.00

Source: Field Survey 2007

Table 5.5 shows that only 54.1 percent women have heard about the FP methods. Out of total population of 60 women 95.0 percent are known about injectables FP and followed by 35.0 percent are known about female sterilization of FP methods.

Figure 5.4 Percentage Distributions of Respondents Women (15-49 years) by Knowledge and Using Family Planning Method.

5.6 Respondents by Ever Used of Contraception

Ever use of contraception refers to use of a method at any time with no distinction between past and present use. It is reveals the success of programme promoting the use of family planning.

Table 5.6 Distribution of Respondents by Ever used of Contraception

Ever used of contraception	Number	Percent
Yes	18	16.2
No	93	83.8
Total	111	100.0
Method		
Condom	4	22.2
Injectables	12	66.7
Foam tablets	1	5.6
Others	1	5.6
Total	18	100.0

Source: Field Survey 2007

Above table shows that among the total respondents only 16.2 percent are found users of contraception against 63.8 percent non-users. High percent 66.7 is found that the injectables method users followed by 22.2 percent condom.

5.7 Respondents by Currently Using of Contraception

Current use of contraception is defined as the proportion of women and men who reported they were using a family planning method at the time of interview. The level of use is the most widely used and valuable measure of the success of family planning progrmmes.

Table 5.7 Distribution of Respondents by Currently Using of Contraception

Currently used of contraception	Number	Percent
Yes	13	72.2
No	5	27.8
Total	18	100.0
Method		
Condom	1	7.7
Injectables	11	84.6
Foam tablets	1	7.7
Total	13	100.0

Source: Field Survey 2007

Table 5.7 shows 72.2 percent are currently using any methods of family planning whereas 27.8 percent are not using among 18 numbers ever users of family planning.

Similarly, currently usesr of injectables 84.6 percent are found as highest contraceptive devices than others followd by condom and foam tablets 7.7 percent.

5.8 Occupational Status of Respondents

Occupational status is another determinant of fertility. It has also very close relation with fertility; thus it is necessary to know the distributions of occupation of eligible women. It is shown in Table 5.6.

Table 5.8 Distributions of Respondents Women (15-49 years) by Occupational Status.

Occupational Status	Number	Percent
Agriculture	79	71.8
Trades	1	0.9
HH work	12	10.8
Non-capable	2	1.8
No occupation	1	0.9
Labor	16	14.5
Total	111	100.00

Source: Field Survey 2007

Table 5.6 shows the occupational status of the respondents. Out of the total, 71.8 percent respondents are employed in agricultural work representing highest percent, followed by 14.5 percent in labor and 10.8 percent in household work.

Figure 5.5 Percentage Distributions of Respondents Women (15-49 years) by Occupational Status.

CHAPTER-SIX

6. FERTILITY BY SOCIO-ECONOMIC AND DEMOGRAPHIC VARIABLES

This chapter presents the effect of the different socio-economic and demographic factors on fertility which is measured by mean numbers of children ever born to women of reproductive age 15-49 years. The number of CEB is one of the reliable indicators for fertility.

6.1 Mean CEB and Age of Respondents

Age of the women is one of the demographic factors influencing fertility. It is expected that as the age of married women increase the mean number of children ever born. The results of survey are presented in Table 6.1.

Table 6.1 Mean number of CEB of Respondents by Age Group

Age Group	Number of Women	Mean CEB	CEB NDHS 2001
15-19	_	_	0.2
20-24	11	1.3	1.3
25-29	19	2.1	2.7
30-34	28	3.2	3.7
35-39	26	3.7	4.5
40-44	13	4.7	5.2
45-49	14	3.7	5.7
Total	111	3.19	2.7

Source: Field Survey 2007 and NDHS 2001

Table 6.1 shows that the mean number of child ever born 3.19. Mean number of CEB born by women of age group 20-24 which is the lowest CEB in this table. The highest number of CEB 4.69 is born by women of age group 40-44. If we compared with NDHS figure, it is more or less similar. It can be seen as follows:

Figure 6.1 Mean CEB of Respondent with NDHS, 2001

6.2 Mean CEB and Age at Marriage

Age at marriage plays a vital role in affecting fertility. Higher age at marriage is associated negatively with the mean number of CEB among the women. Lower age at marriage is associated positively with the mean number of CEB among the women. The age at marriage is shown in the Table below.

Table 6.2 Mean CEB and Age at Marriage of the Respondents

Age at Marriage	Number of Women	Mean CEB
10-14	2	6.50
15-19	78	3.22
20-24	25	3.12
25+	6	2.00
Total	111	3.19

Source: Field Survey 2007

Table number 6.2 shows the mean number of children ever born by age at marriage. It shows that higher the age at marriage lower the mean number of children ever born. The highest mean number of children ever born 6.5 is observed for women who were married between 10-14 years age group followed by 15-19 year is 3.22. The mean number of children ever born 3.12 is observed for women who were married at the age of 20-24 years. The children ever had born 2. 00 is observed for women who were married at age 25+. At

last, fact is that, if age at marriage of women is higher, the birth intervals might be lower.

Figure 6.2 Mean CEB and Age at Marriage of the Respondents

6.3 Mean CEB and Education of the Respondents

Education of women is one of the main factors for affecting fertility. Literatures have shown that educated women are more aware of the issue of their quality of children that non-educated. Education has indirect impact upon fertility which affects level of fertility.

Table 6.3 Mean CEB and Education of the Respondents

Literacy Status	Number of Women	Mean CEB
Literate	33	2.18
Illiterate	78	3.62
Total	111	3.19
Educational Status		
Non-formal	7	2.14
Primary	11	2.64
Lower Secondary	9	2.11
Secondary	6	1.50
Total	33	2.18

Source: Field Survey 2007

Table 6.3 shows that CEB of illiterate women is higher than literate women. Literate women have 2.18 mean number of CEB whereas illiterate women have 3.62 mean number of CEB. This study shows that lower the educational level higher the fertility. The mean number of CEB with primary level education is 2.64 and lower secondary 1.8 and secondary 1.50 observed respectively.

Figure 6.3 Mean CEB by Literacy

6.4 Mean CEB and Occupation of the Respondents

There is close relationship between occupation and number of CEB. Women involving in agriculture and HH work produce more children than the women involving in other sector.

Occupation is also one of the important factors for determining the status of women. Generally, mainly employed women tend to have smaller families than these who are not employed.

Occupational status of women is one of the major indicators of fertility differentials. Occupation of women differs from one to another due to various social and economic reasons. The result of this study survey is presented as below.

Table 6.4 Mean CEB and Occupation of the Respondents

Occupational Status	Number of Respondents	Mean CEB
Agriculture	79	3.53
Trades	1	1.00
HH work	12	3.00
Non-capable	2	1.00
No occupation	1	1.00
Labor	16	2.38
Total	111	3.19

Source: Field Survey 2007

Table 6.4 shows the occupational status of the respondents by children ever born. The higher mean CEB 3.53 is observed among women who are engaged in agriculture followed by house worker 3.0. The lowest mean CEB 1.0 is observed among women who are engaged in trades. Higher than mean CEB 3.53 is observed among women who are engaged in agriculture activities.

Figure 6.4 Distributions of respondents by mean CEB and occupation

6.5 Mean CEB and Ideal Number of Children of the Respondents

There is close relationship between ideal number of children and fertility. Higher ideal number of children leads to higher number of children.

Table 6:5 Mean CEB and Ideal number of Children of the Respondents

Ideal number of Children	Mean CEB	Number
2	1.67	15
3	2.76	45
4	3.68	31
5	4.13	15
6	5.67	3
7	6.00	2
Total	3.19	111

Source: Field Survey 2007

Table 6.5 shows that the higher ideal number of children indicates the higher the mean number of CEB. It also proves the some women reporting more than 7 children have reported 6.00 mean CEB whereas women reported only 2 children has 1.67 mean number of CEB.

Figure 6.5 Ideal Number of Children and Number of Respondents

6.6 Mean CEB and Ever Used Contraception by Respondents and their Husbands

A couple's desire and ability to manage women fertility and her choice of contraceptive methods are in part of affected by their status, self image and sense of empowerment. Contraceptive methods are used to control high fertility. Table number 6.6 depicts the respondents mean CEB and ever used of contraception.

Table 6.6 Mean CEB and Ever Used Contraception by Respondents and their Husbands

Ever used of Contraception	Mean CEB	Number
Yes	3.06	18
No	3.22	93
Total	3.19	111

Source: Field Survey 2007

Table 6.6 shows that 18 numbers of respondents have used the contraception whose mean CEB is 3.06 and remaining respondents have not ever used the contraception whose mean CEB is 3.22 out of total respondents. There is no significant different between users and non-users of contraception due to the lack of educational and socio-cultural factors.

Figure 6.6 Mean CEB and Ever Used Contraception by Respondents and their Husbands

6.7 Mean CEB and Currently Used of Contraception by Respondents and their Husbands

A woman's desire and ability to manage her fetility and her choice of contraceptive methods are in part of affected by her status, self image and sence of empowerment. Contraceptive methods are used to lower fertility.

Table 6.7 Mean CEB and Currently Used of Contraception by Respondents and their Husbands

Currently Used of Contraception	Mean CEB	Number
Yes	3.38	13
No	2.20	5
Total	3.06	18

Table 6.7 shows that higher mean CEB 3.38 among the currently users of contraceptive method than non-users 2.20. Because of their completion to desire more children before using the contraception, data are exist in higher than the non users among users.

CHAPTER-SEVEN

7. SUMMARY, CONCLUSIONS AND RECCOMMENDATIONS

This chapter attempts to summaries the whole study condition and recommendations for the future plans and programs.

7.1 Summary

This study covers 111 HH and same number of ever married women of reproductive age 15- 49 years of Dhimal community of Urlabari VDC in Morang district. This study has examined the socio-economic and demographic impact on fertility and analyzed the relationship with socio-economic and demographic variables. This study based on primary data by asking the two types of questionnaire: household and individual. Household questionnaires are used for the any member of the households. Individual questions are asked to all 15-49 years ever married women of the households.

The major findings of the Study Summarized as follows:-

- Among 111 HH, there are 711 persons; out of them 48.5 percent are male and 51.5 percent are females. The sex ratio of the study population is found to be 94.3 which is less than the national figure of 99.8 according to 2001 census (Table 4.2)
- The total dependency ratio is 75.0 while it is 52.3 child dependency and 12.7 percent for old dependency ratio. The total dependency ratio of 75.0 is less than national figure 83.0 from 2001 census (Table 4.3).
- Out of total population 6 years and above 37.9 percent are illiterate and 62.1 percent are literate (Table 4.5).
- Out of total population aged 10 years and above 41.9 percent are engaged in agriculture sector, followed by 35.4 percent student, 1.3 are service work and 1.9 percent house work.

- Out of the total population aged 10 years and above 36.4 percent are married 58.8 unmarried and 4.8 percent are widow/er (Table 4.6).
- Out of 111 HH 100.00 percent are Hindus.
- 100 percent people are speaks Nepali language.
- Out of 111 respondents, 71.8 percent are engaged in agriculture sector, while only 0.9 percent reported their occupation as trades (Table 5.8).
- Out of 111 respondents, 70.3 percent are illiterate and 29.7 percent are literate (Table 5.2).
- Out of 111 respondents, 33.3 percent have 3 CEB but 13.3 percent have 1 CEB (Table 5.4).
- Out of 111 respondents, 54.8 percent have desire at least 1 son with other child and 62.1 have desire any child.
- The mean CEB of 4.7 is highest for women whose age group is 40-44 years at the time of field survey. Similarly the mean CEB of 1.3 is found in the age group 20-24 years (Table 6.1).
- The mean CEB is higher with illiterate respondents than that of literate respondents. The figures are 3.62 for illiterate respondents and 2.18 for literate respondents (Table 6.3).
- The mean CEB is found highest 3.5 for women who are engaged in agriculture and the mean CEB is found lowest 1.0 for women who reported their occupation as trades (Table 6.4).
- The highest CEB 3.4 is found for those respondents who are users of contraception and the lowest CEB 2.2 is found for those who are non-users (Table 6.7).

7.2 Conclusions

- The longer duration of marriage is seen playing a significant role in increasing the number of CEB.
- The education of women seems playing an important role in decreasing the mean number of CEB in the study area. Women showing illiterate women having high CEB.

- Occupation has also seen playing an important role for the reduction of fertility. Most of the women are engaged in agriculture in the study area and HH works, so they are found to have children which mean higher fertility. Similarly income is also important cause of increase fertility. Higher the level of income, lower the CEB is found in the study area.
- Knowledge and use of family planning methods especially female method are found high but use of FP methods before first birth is very insignificant. There is high level of contraceptive use only after the first birth. This indicates that couple tends to give first birth soon after marriage. This may be because of making the marriage life strong.

7.3 Recommendations

Based on the findings and conclusion made in this study, following recommendations may be fruitful for the advancement in the respective issue.

- To reduce the fertility, informal education and FP related awareness creation program should be given for married women.
- Government should be encourage people to have small family size such as policy of taxation, prize system, credit system, job opportunity, etc.
- The study area dominated by agriculture. There are more people engaged in unproductive sector. So to transfer excess people from agriculture to productive sector, some big industries should be established in specific area from govt. and private sector.
- Local authorities should be properly instructed to plan, implement, monitor and supervise population programs.
- Respected Ministry can play a crucial role in strengthening for grass-root level organizations.
- There should be strong integration between government, GOs, NGOs and other social organization in terms of implementation of any programs.
- The poverty alleviation programs should be launched.
- There should be guarantee of the job at least one person from each HH.

- Local level and central level government staff should also be involved and made responsible for designing, implementing and supervising the all population related programs.
- Since level of women's education status seems effective in rising age at marriage, emphasis should be given on improving education level of women by educating all girls of school going ages. For this, education for girls should be encouraged to improve the length of school years.
- To reduce fertility, there should be IEC service and availability of contraceptive methods in order to increase prevalence of contraceptive use.
- Women should be increasing the duration of breast feeding period for reducing fertility.
- Men and women should be given equal rights to marriage and divorce.
- The concept of not discrimination is recognized as a right.
- Effective and essential programs should be launched to promote their skills and attitude.
- Means of FP should be provided in the study area so that high fertility level should be launched.
- Support and assistance (theoretical and economic) should be provided to the local community organization.
- Non-formal education and various awareness programs should be launched.
- There must be reservation system for their employment facilities.
- The political commitment should be implemented into reality for the effective change in this community.

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TRIBHUVAN UNIVERSITY
Central Department of Population Studies (CDPS)
(This information will be secrete, it will be used only for M. A. Thesis Purpose)

QUESTIONNAIRE DESIGN

Name of the Village:-
Ward No.-
Respondent's Name.-

Respondent No.:-
Household No.:-
Types of Family: Nuclear/ Joint

Household Questionnaire

S. N.	To be asked all of the family members				To be asked for members above5 years				Eligible women
	Name of Member	Relation with head of household	Sex	Age	Current occupation	Literacy	Education level	Marital status	
	1	2	3	4	5	6	7	8	9
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
11.									

Sex Code
Male: 1
Female: 2

Literacy Code
Yes: 1
No: 2

Education Code
Non-formal Education: 98
Formal Education: 1 to 10
I. A.: 12
B. A.: 15
M.A.: 17

Occupation Code
Agriculture: 1
Home Industry: 2
Job/Service: 3
Trades: 4
Daily Wages: 5
Household Work: 6
Student: 7
Others: 98

Marital Code
Unmarried: 1
Married: 2
Widow/widower: 3
Divorce/Separated: 4

A. Household Socio-Economic Characteristics

10. What is your religion? ……

11. Can you speak Nepali Language? Yes / No

12. What is your mother tongue? ……

13. What type of house is using for your family? ……..

(I) Cement/Brick (II) Stone and Mud (III) Bamboo/ Grass (IV) Others

14. What material is use for roof of your house? ……

15. How much do you have land? ……

16. What is the main source of income? ……..

17. Do you have your own toilet? Yes / No

18. Have you radio/TV in your house? Yes / No

19. What is your water resource? ……..

20. Do you have the facility of electricity in your house? Yes / No

B. Individual Questionnaires (Asked to Only Married Women)

Socio-economic and Demographic Information

21. Age:- …….

22. Age at Marriage:- …….

23. Education:- ……

24. Occupation:- ……..

25. Working Place:- Out side home/ Inside home

26. Main cause of No Schooling:- …….

Reproduction

27. Have you give birth to any children? Yes / No

28. If yes how many no. of Sons living with you?.....

29. How many no. of daughters living with you? ……

30. How many no. of sons not living with you? ……..

31. How many no. of daughters not living with you? ……..

32. Have you any children were died after born alive? Yes / No

33. If yes how many were died? Sons ……Daughters …… Total ……..

34. Total no. of children ever born (CEB)…….

35. Have you lost any children? Yes / No

36. If yes how many children? ……..

37. What is the ideal no. of children in your opinion? Sons……Daughter…..…….

Family Planning

38. Have you known the name of means of family planning or contraceptives? Yes / No
39. Have you ever used the contraceptives? Yes / No
40. If yes, which methods? ……..
41. Reason for using method…….
42. If no, why don't you or your husband using any method?

Health Problem	Not available	Religious Causes	No Need
Desire for Son	Desire for Daughter	Rejection of Household	Costly
Others			

43. Have you currently using the any contraceptives? Yes / No
44. If yes, what is it? ……
45. Reason for using method…….
46. If no, why don't you or your husband currently using any method?

Health Problem	Not available	Religious Causes	No Need
Desire for Son	Desire for Daughter	Rejection of Household	Costly
Others			

47. Do you desire to give birth further more child? Yes / No
48. If yes, how many sons do you want? ……
49. How many daughters do you want? ……..
50. What is the main cause for such number of child? ……
……

❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋❋❋ ❋