POVERTY, FAMILY SIZE AND SOCIETY IN INDIA : A CRITICAL REVIEW

by

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Certified that the dissertation entitled "Poverty, Family Size and Society in India: A Critical Review", submitted by Mr. Rashid A. Ansari is in partial fulfilment of six credits for the degree of Master of Philosophy of this University. The dissertation has not been submitted for any other degree of this University or any other University, and is his own work.

I recommend that this dissertation be placed before the examiners for evaluation.

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CHAPTER I

A PROFILE OF INDIA'S POPULATION AND POPULATION POLICIES

1. Introduction

Hardly a single day passes without some mention being made somewhere of the dangers posed by the crushing overpopulation in India. Statements of this kind have come so fast and thick from such a variety of writers, thinkers and politicians that poverty in India is easily equated with overpopulation; and quite predictably the poor are held responsible for their poverty. But if the poor could be left to their poverty and to the millions that issue from their supposed "over-fertility", then the note of urgency would perhaps be absent in the proclamations and analyses of overpopulation. More often than not the fear is that the poor will drag down the rest of the world (in many analyses the saner half) by their ill advised, reckless increase in numbers.

In the following pages of this dissertation we shall try to examine the more common arguments that relate the problem of overpopulation to the poor and indigent.

The arguments that do so do not always use the same building blocks. The ingredients differ widely and so do the range of theoretical persuasions that furnish them. The query that has served us as a guiding thread in writing these pages is: Do the poor have larger families, or is it because they are poor that it seems they are more numerous? Relativity in perception is a common theme, and we feel that it would be worthwhile to pursue this tack in examining the various issues that relate poverty to overpopulation.

But poverty again is not an ahistorical quotient sans variability. The kind of poverty that is related to overpopulation is not the poverty one encounters in the main streets of Chicago or in the aesthetized down-at-the-heel impecuniosity of the Soho or the Latin Quarters. Poverty here is overwhelmed by the incubus of stagnant social development where no ground is given, no quarter yielded, to even a minimum of human dignity, let alone the quality of spiritual life. Poverty then has to be seen in terms of social development, and naturally, therefore, our examination of poverty and population cannot neglect this dimension either.

Let us briefly present some of the positions taken on the relationship between poverty and overpopulation just to give an idea of the range of the problem we are about to encounter.

First there is the "irrationality" thesis. The poor do not know what is good for them, have no concern for the long-term effects of population increase on society and on themselves. They are weighed down by hoary tradition, by fatalism and by an irrational pride in their overfecundity.

Closely related to the irrationality thesis is the "information gap" thesis. This thesis subscribes to all the arguments mentioned above but adds that a realistic way out of the impasse is to counter irrational ideology by scientific and technical information along with multiplying family planning services.

In direct contrast to the above two theses comes the "rationality" thesis. This says that the poor reproduce more because it is good for them. In a backward peasant economy, this thesis argues, every child is an economic asset. The merit of this thesis is that it brings in the social dimension quite pointedly. But the surprising fact is that unwittingly it seems to accept the argument that the poor do indeed heartily contribute to overpopulation.

Another variant of the rationality thesis is that the poor produce more because of the low quality of health (especially maternity and child health) services

which lead to high infant mortality. Therefore, to make sure that a sufficient number of children survive, the poor often end up with many more. Interestingly, however, in all the major views mentioned above and put forward by experts on population it is accepted that the poor reproduce more. And if there is "only one earth" - an early canard that rings truer every day - then at some point even the "rationalists" might have to accept as justified the population experts' obsession with the poor, though they may not necessarily agree with the manner of their intervention.

The above is to give a brief foretaste of things to come as we proceed with this dissertation. But before we get down to a close scrutiny of these views and the facts adduced in their support, and, of course, to our somewhat "out-of-tune" contentions, it is necessary to acquaint ourselves with an introductory sketch on population and health services in India.

2. Population History of India

Population history of India from the earliest census reports has always raised overpopulation as a problem. There is no statement of any concern on these lines prior to the British presence in India. A glance at the table below shows that population growth began really

around 1921. The following table shows population growth from 1871 to 1961 including undivided India:

TABLE 1.1: POPULATION OF INDO-PAKISTAN SUB-CONTINENT 1871-1961
(Area Covered 1,582,989 sq. miles)

Year	Population total(million)	Increase (million)	Percentage increase
1871	256	-	-
1881	258	2	0.78
1891	283	25	9.69
1901	286	3	1.06
1911	304	18	6.29
1921	307	3	0.99
1931	339	32	10.42
1941	383	44	12.98
1951	438	55	14.36
1961	534	96	21.92

Source: D. Bhattacharya, An Inquiry into the Economic Law of Population Growth in India 1901-1921, New Delhi: Indian Statistical Institute, 1978, p. 5.

It is evident that population changes between decennial points have been marked by alternate cycles of

prosperity and decline or slow growth up to 1921. The worst famine of the century occurred in 1871-81. In the next decade there was a recovery. During 1891-1901, famines occurred on a large scale. The period 1901-11 was a bit better. But the next decade witnessed the worst possible influenza epidemic in 1918.[1]

It is clear that there was a breakthrough in the vicious cycle after 1921. This breakthrough might have been due to the development of the railway and road network which ended regional isolation, due to the growth of an irrigation system, and due to the diversification of agriculture with an increase in the area under commercial crops or due to the measures taken against epidemics. In other words, socio-economic conditions that caused famines and were responsible for high mortality, changed to some extent in spite of the structural stagnation of the economy as a whole.[2]

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1 D. Bhattacharya, An Enquiry into the Economic Law of Population Growth in India, 1801-1921, New Delhi, Indian Statistical Institute, 1978, pp. 1-8.

2 Ibid. See also B.T. Ranadive, Population Problem of India (C.N. Vakil, ed.), Calcutta: Longman Green, 1930.

The first decade, 1801-1810, was marked by war banditry, famine and pestilence in several regions of northern, southern and western India. The second decade 1811-1820 witnessed one of the worst cholera epidemics during 1817-1819 covering vast areas of the country. A devastating plague in Gujarat, widespread famine in Rajputana and Western India, and a severe fever epidemic in some districts of Madras must have caused a large depletion of the population.[3] The third decade, 1821-1830, was better, but famines prevailed in Sind, Bombay, Madras, North Western Provinces, Kashmir, and in part of Upper India, often accompanied by fevers and cholera. Assam was a victim of anarchy and war between 1817 and 1826; the population is estimated to have been reduced by half during this period.[4] The estimate of annual cholera mortality in British India was 2.5 million of which that of total death was 18 million during 1817-1830.

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3 Ibid.

4 Ibid.

TABLE 1.2: POPULATION OF INDIA 1801-1871
(Area 1,582,989 sq. miles)

Year	Population (million) Total	Change	Percentage change
1801	207	-	-
1811	215	+ 8	+ 3.86
1821	205	-10	- 4.65
1831	216	+11	+ 5.37
1841	212	- 4	- 1.85
1851	232	+20	+ 9.43
1861	244	+12	+ 5.17
1871	256	+12	+ 4.92

Source: P.C. Mahalanobis, and D. Bhattacharya, "Growth of Population in India and Pakistan, 1801-1961", Artha Vijnan, March 1976.

The fourth decade 1831-1840 was one of the worst. According to the Famine Commission of 1880, there were two severe scarcities and two intense famines in the northern, western and southern parts of India, epidemic fever and small-pox in Bengal, and a very extensive cholera epidemic in Bengal, Madras and the North-Western Provinces. Kashmir was considered to have lost 75 per cent of its population by the early 1930s due to the cumulative effects of

anarchy, famine, natural calamities and several outbreaks of cholera. The fifth decade, 1841-1850, though marked by a severe scarcity in Bombay and prevalence of cholera in certain areas, was relatively free from calamities. The period, 1851-1860, also saw famines and droughts in the North-West Provinces and Madras as well as cholera in several districts of Orissa. The political turmoil of 1857 also caused some dislocation of economic life. The period 1861-1870 was however much worse. There were devastating famines in different regions. These were responsible for the death of one fourth of the population of Orissa, and for a high rate of mortality in west and north Bengal, Rajputana, Punjab, Madras and the Central Provinces.[5]

After 1921, the progressive control of epidemics of cholera and plague facilitated an acceleration in the rate of population growth which now was between 1 and 1.3 per cent. The growth rate was virtually stable during 1931-1951 partly because of the Bengal famine of 1942-43, and because of the dislocation caused by Partition and the subsequent large-scale movement of refugees across the Indo-Pak borders. Subsequently, the spraying of DDT helped to check the impact of malaria which used to cause

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5 Ibid., pp. 7-8.

fairly long lasting debility and contributed to a high level of mortality.

A virtual continuation of the growth rate was observed in 1941-51. The 1961 census indicated a much higher rate of population growth during 1951-61 than during 1931-51. The rate of growth was even higher during 1961-71, though expected to be a little less. The provisional results of the 1981 census indicate that the annual growth rate has continued to rise, albeit slightly, during the 1970s as well (see Table 1.3).

3. India in the International Perspective

India's population stands second only to China's, which has an estimated population of nearly one billion. The addition to India's population during 1971-81 was larger than the total population of Brazil or Japan which rank sixth and seventh in population size in the world as a whole. India's population growth in just ten years was more than five times the total population of Canada (24 million) and nine times the population of Australia (14.8 million). Over the last 30 years, India has added 323 million persons to its population (nearly 89.4 per cent), substantially more than the total population of the Soviet Union or the United States in 1981.

TABLE 1.3 : SELECTED POPULATION STATISTICS OF INDIA (1901-1981)

Census Year	Total population (million)	Average annual growth rate (per cent)	Density of population (per sq. km.)	Sex ratio males per 1000 females	Crude birth rate	Crude death rate	Percent of urban population	Literates as per cent of total		
								Persons	Males	Females
1901	238.03	0.30	77	1029	-	-	10.8	5.4	9.8	0.6
1911	252.0	0.56	82	1038	49.2	42.6	10.3	5.9	10.6	1.1
1921	251.2	-0.03	81	1047	48.1	47.2	11.2	7.2	12.2	1.8
1931	278.9	1.06	90	1053	46.4	36.3	12.0	9.5	15.6	2.9
1941	318.5	1.34	103	1058	45.2	31.2	13.9	16.1	24.9	7.3
1951	361.0	1.26	117	1057	39.9	27.4	17.3	16.7	25.0	7.9
1961	439.1	1.98	142	1063	40.9	22.8	18.0	24.0	34.4	13.0
1971	548.2	2.20	178	1075	41.1	18.9	19.9	29.5	39.4	18.7
1981	684.2	2.23	221	1069	33.3	14.2	23.7	36.1	46.6	24.8

Source: Parvin Visaria and Leela Visaria, "Indian Population Scene After 1981 Census : A Perspective", Economic and Political Weekly, Special Number, November 1981, p. 1729.

The rate of natural increase in India is not as high as that of countries like Nigeria, Bangladesh, Pakistan, Brazil or Nepal. But it is twice that of developed countries like the USA, the USSR and Japan. Because of a relatively higher death rate, the Indian rate of natural increase is only about one and a half times as high as China's. However, the annual addition to India's population (13 to 14 million) probably exceeds China's (11.5 million).

Data in Table 1.4 include information on the total land area and also on the density of population per square kilometer of arable land area. Although the available data on arable land are not quite reliable or comparable between countries, India is less densely populated than Japan, Bangladesh, Sri Lanka or Indonesia, though its density is much higher than that of China, USA, USSR, Brazil and Nigeria. Because nearly 70 per cent of the Indian labour force depends on agriculture for its livelihood, the density of population of arable land in India is a serious matter.

4. History of Family Planning in India

4.1 Development of Modern Medicine in India

The development of modern medical services in

TABLE 1.4 : KEY STATISTICS ABOUT WORLD'S TEN MOST POPULOUS COUNTRIES AND NEPAL AND SRI LANKA - 1981

	Country	Population estimate mid 1981 (million)	Total area (1,000 km)	Persons per sq. km. arable land	Estimated Vital Rates (per 1,000 population) Birth rate	Death rate	Rate of natural increase (per cent)
1	China	985.6	9,597	309	18	6	1.2
2	India	688.6	3,288	381	33	14	1.9
3	USSR	268.0	22,402	44	18	10	0.8
4	USA	229.8	9,363	53	16	9	0.7
5	Indonesia	148.8	2,027	524	35	15	2.0
6	Brazil	121.4	8,512	58	32	8	2.4
7	Japan	117.8	372	2,145	14	6	0.8
8	Bangladesh	92.8	144	954	46	20	2.6
9	Pakistan	88.9	804	356	44	16	2.8
10	Nigeria	79.7	924	178	50	18	3.2
11	Nepal	14.4	141	358	44	20	2.4
12	Sri Lanka	15.3	66	592	29	7	2.2

Source: P. Visaria and L. Visaria, "India's Population Scene After 1981 Census : A Perspective", Economic and Political Weekly, Special Number, November 1981, p. 1728.

India date back to the eighteenth century.[6] They were first established by the East India Company who utilized the services of army doctors. In the beginning only curative medicine was practised in most of the states.[7] The concept of preventive medicine was first introduced in the British army in the form of vaccination against small pox. In 1863, for the first time, the Royal Commission of 1859 made a recommendation regarding the appointment of a Sanitary Commission in order to study and assess public health problems. Later on, on the basis of their reports, the prevention of diseases was taken up by the Presidencies of Madras, Bombay and Calcutta. Sanitary Commissions were appointed for many other states as well.[8]

In 1931, the European Conference on Rural Hygiene,[9] convened at Geneva by the health organization of the League

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6 Directorate General of Health Services, Report by the Committee of the Integration of Health Services, New Delhi: Ministry of Family Planning, 1976, p. 8.

7 See D. Banerji, Formulating an Alternative Rural Health Care System in India, Centre for Social Medicine and Community Health, JNU, New Delhi, 1976.

8 Directorate General of Health Services, op. cit.

9 European Conference on Rural Hygiene, Recommendations on the Principles Governing the Organization of Medical Assistance, Public Health Services and Sanitation in Rural Districts, League of Nation's Health Organization, Publication No. C-473, III, 1937.

of Nations, recommended the provision of rural health services through rural health centres. It defined a health centre as an institution for the promotion of the health and welfare of the people in a given area, which seeks to achieve its purpose by grouping under one roof, and co-ordinating in some other manner under the direction of a health officer, all the health of the area together with such welfare and relief organisations as may be related to general public health work. The primary health centre was considered the smallest agency required to meet the public health needs of the smallest rural area. The minimum programme of a small health centre was recommended to consist of (1) control of communicable diseases, (2) maternal welfare, (3) infant welfare including pre-school and school hygiene, (4) health education, (5) sanitation, and (6) first-aid in urgent cases.

In India between 1931-39, for the first time, seven model health centres were established in different parts of the country on an experimental basis with the assistance of the Rockefeller foundation.[10]

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10 Indian National Congress, National Planning (1948), National Health Report, Allahabad.

In 1937, an inter-governmental conference of Far Eastern Countries on rural hygiene[11] was convened at Bandung where emphasis was laid on the need for active participation of the local population in their own rural reconstruction and also on the need to combine preventive and curative services. It also stressed the need for auxiliary health personnel.

Until 1945, in India, the Central Government used to exercise the main health functions so far as government employees were concerned. On 1 December 1945, a separate health department was constituted, while a Director General of Indian Medical Services and Public Health Commissioners were appointed at the Centre. The States also appointed separate heads for the medical and health departments.

4.2 Development of Maternal and Child Health (MCH) Services upto 1945

The modern MCH programme is a recent development. Its beginnings were made in 1885, when the National Association for supplying Medical Aid by Women to the Women of India was established by the Countess of Dufferin at the personal recommendation of Queen Victoria.

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11 League of Nations, Report of the Inter-Governmental Far Eastern Conference on Rural Hygiene (1931), League of Nations Health Organization, Publication No. A-19, III, 1937.

The main objective of this Association was to provide medical education and medical relief to women and to supply nurses and midwives to hospitals. Private working women's hospitals, staffed by women doctors, were also established in several places.

Child health work was started for the first time in 1919 with the founding of the Lady Chelmsford All India League for Maternal and Child Welfare and the setting up of some centres for child health services. In 1931, the Indian Red Cross Society established a maternal and child welfare bureau in association with the Lady Chelmsford League and the Victoria Memorial Scholarship Fund.

4.3 Development of Family Planning Services Upto 1945

As early as 1925, a Maharashtrian doctor, R.D. Karve, started a birth control clinic in Bombay and in the 1930s, the Voice of Margaret Sanger,[12] the early prophet of family planning, was heard for the first time in the land. She made a number of disciples mainly

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12 Margaret Sanger was the first full time American evangelist to fight for the liberalization of birth control. Her motivation in the espousal of birth control, a term she coined first was single minded prevention of unwanted conception among married poor. For details see A.F. Guttamacher, Pregnancy, Birth Control and Family Planning, New American Library, New York, 1973, pp. 302-3.

society women anxious to prove that they had the good of the country at heart. She might have made more disciples had M.K. Gandhi chosen to lend the movement his support. However, he thought it was unnatural and did not do so.[13]

The first government sponsored birth control clinic was opened in 1930 by the Mysore Government. The Society for the Study and Promotion of Family Hygiene (the words birth control were not used) was founded in 1935; which was renamed Family Planning Society in 1940. Birth control clinics were opened by this society in different parts of the country. In 1938, the National Planning Committee of the Indian National Congress supported family planning. In 1940, T.B. Sapru moved a resolution in the Council of States for the establishment of birth control clinics.

The WHO Expert Committee on Maternity Care[14] had its first session in 1951 and defined maternity care as follows: "... the object of maternity care is to ensure that every expectant and nursing mother maintains good health, learns the art of child care, has a normal

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13 D. Moraes, A Matter of People, Lowe and Bydone Pvt. Ltd. New York 1974, Chapter I.

14 World Health Organization, Expert Committee on Maternity and Children Care, Technical Report Series No. 51, Geneva, 1952.

delivery and bears healthy children". The committee stressed pre-natal, natal, and post-natal care and also the need to limit the family. In 1954, the Second WHO Expert Committee on Public Health Administration[15] discussed the methodology of planning and integrated health programmes for local areas and considered the following health services as basic to the functioning of a rural unit: (1) MCH Care, (ii) communicable disease control, (iii) environmental sanitation, (iv) maintenance of records for statistical purposes, (v) health education for the public, (vi) public health nursing, and (vii) medical care. The Committee also considered the integration of maternal and child health activities into the general public health and medical services for the mother.

The health problems of mothers and children received increasing attention due to the fact that nearly one half of total death in all ages in British India took place among children under 10 years of age. Of this, nearly a half occurred among infants under one year of age.[16] A conservative estimate of the annual number of

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15 World Health Organization, Methodology of Planning and the Integrated Health Programme for Rural Areas, Technical Report Services, No. 83, Geneva, 1954.

16 See Census of India 1891, 1901, 1911 and 1921.

deaths among women in the reproductive age from causes associated with pregnancy was two lakhs. While the number of women who each year had to undergo varying degrees of disability and suffering from the same causes was likely to be about 4 million.[17] The Bhore Committee (1946) subsequently stressed the need for maternity and child care which should include education of the parents and the community, proper health care for children, propagation of child-rearing practices which emphasized breast feeding, an increase in the spacing of births, the recognition of pregnancy risk, immunization, the treatment of common ailments, environmental sanitation, physical education and many other aspects having a direct bearing on child health.[18]

5. India's Family Planning Programme since Independence

The official programme for family planning began in 1952 with clinics being started in various parts of the country which sought to promote voluntary family

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17 India, Government of, Health Survey and Development Committee (1946), Report, vol. 1, Calcutta, Government of India Press, p. 62.

18 Ibid., p. 62.

limitation.[19] Because of the absence of any previous experience regarding means of promoting family planning, the 1950s went by with little progress being made, except for some research and surveys, including the establishment of institutions that would train both population analysts and family planning workers. By March 31, 1961, some 1,379 rural and 575 urban family planning clinics had been set up. The expenditure incurred during the First and Second Five Year Plans (1951-56 and 1956-61) was less than 50 per cent of the modest allocation of Rs.6.5 million and Rs.49.7 million made for each Plan respectively. Towards the end of the Second Plan, India introduced sterilizations, mainly vasectomies, supported by a very modest incentive (about Rs.30) to the acceptors and sometimes also to the motivators. The Third Five Year Plan recognized the seriousness of population growth, and assigned high priority to the objective of "stabilizing the growth of population over a reasonable period", without specifying any clear target.[20] To take advantage of the possible valuable contribution of voluntary sterilizations to the Family Planning Programme, necessary facilities had to be provided at district and sub-district hospitals and PHCs

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19 Government of India, Ministry of Health and Family Welfare, Family Welfare Programme of India, New Delhi, Year Book, January 1981.

20 Ibid.

and also through mobile units which would service camps in rural areas. Soon the limited role of clinics in the programme was recognised and an "extension approach" was launched. It required auxiliary nurse-mid-wives (ANMs), attached to the PHCs, to visit, inform and motivate individual women in their homes and to encourage the use of contraceptives to space and limit the number of children. The couples were to choose freely from among sterilization, various mechanical and chemical contraceptives, and the rhythm method, in keeping with the "Cafeteria" approach. It was in the early 60s that officials forwarded the goal of reducing the Indian birth rate from more than 40 per 1,000 population, around 1962-63, to 25 per 1,000 population by 1973.[21]

Following the introduction of the IUD (Lippes loop) in the Family Planning Programme in early 1965, even a United Nations' mission shared the optimism of government officials that the Indian birth rate could be lowered by about one-third in ten years and that the rate of population growth could be reduced to one per cent by 1985. To realize these objectives, a Commissioner for Family Planning was appointed in 1965 and a full-fledged

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21 Ibid.

Department of Family Planning was set up under the Ministry of Health in 1966.[22]

TABLE 1.5 : BUDGET OUTLAY AND ACTUAL EXPENDITURE ON FAMILY PLANNING: 1951-56 TO 1980-85

Five Year Plan Period		Budget Outlay under Public Sector			
		All Developmental activities (million Rs.)	Family Planning (million Rs)	Family Planning as per cent of total development outlay	Actual Expenditure on Family Planning (million Rs.)
First	1951-56	23,560	6.50	0.03	1.45
Second	1956-61	48,000	49.70	0.10	21.56
Third	1961-66	75,000	269.76	0.36	248.60
Annual	1966-69	67,565	829.30	1.23	704.64
Fourth	1969-74	159,020	3,150.00	1.98	2,800.40
Fifth	1974-79	393,220	4,970.00	1.26	4,090.00
Sixth	1980-85	975,000	10,100.00	1.04	-

Source: P. Visaria and L. Visaria, "Indian Population Scene after 1981 Census : A Perspective", Economic and Political Weekly, Special Number, November 1981, p. 1759.

22 P. Visaria and L. Visaria, "Population Scene after 1981 Census : A Perspective", Economic and Political Weekly, Special Number, November 1981, pp. 1727-80.

A major innovation introduced in the Family Planning Programme in 1968 was the sale of condoms through the country's six largest producers and distributors of consumer goods. Today some 350,000 retail shops in the urban and rural areas stock and sell condoms. The All India hospital post-partum programme, which aims to motivate women to come to hospitals for delivery or abortion, was launched in 1969.[23]

In the early 1970s the Indian Family Planning Programme undertook some major initiatives. These were:

(a) The setting up of mass vasectomy camps with higher than usual incentives (about Rs. 100), they began first in Kerala in 1970 and subsequently spread to almost all the states of India by 1972-73. They were withdrawn during 1973-74.[24]

(b) The passing of the Medical Termination of Pregnancy Act of 1971 which went into effect in 1972. This Act permits abortion up to 20 weeks on health grounds and further persumes that a pregnancy that results despite the use of a contraceptive may be assumed to constitute a grave injury to the mental health of a pregnant woman.[25]

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23 Ibid.

24 Ibid.

25 See Medical Termination of Pregnancy Act (Act of 1971), Lucknow: Eastern Book Company, 1976, p. 3.

(c) The sharp decline in the number of sterilizations during 1973-74, after the discontinuation of mass vasectomy camps, led to some questioning of whether the Family Planning Programme could really progress without rapid socio-economic development.[26]

At the the World Bucharest Conference, the then Minister of Health and Family Planning coined the new famous slogan that "development is the best contraceptive".[27]

Within a few months of the Bucharest Conference, the Health Minister declared that India was launching "an entirely new programme in family planning", under which family planning would be offered as part of a package deal together with maternity and child welfare services, malaria eradication, etc. The reference was to the Multipurpose Workers (MPW) scheme suggested by a Committee in 1973, and accepted under the Fifth Five Year Plan (1974-79), which was to convert more and more national programme workers into multipurpose workers who would pay special attention to the task of motivating couples to adopt family planning while providing necessary services.[28]

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26 P. Visaria and L. Visaria, op. cit.

27 See Karan Singh's Statement in "Politics for People", People, 1, 5 IPP, London, 1974, p. 18.

28 See P. Visaria and L. Visaria, op. cit.

An internal Emergency was declared in India in June 1975. Although the 20-point programme announced immediately after the declaration of Emergency did not include any reference to family planning, it later became a key element of the 5-point programme of Sanjay Gandhi, whose fervour for checking population growth had a significant impact on the course of events during 1975-77. Due to nationwide excesses committed in the implementation of target goals of sterilization, Mrs Gandhi's Government lost its legitimacy and was subsequently overthrown in the 1977 Lok Sabha Elections.[29]

The Janata Party which came to power in March 1977 recognized the need for checking the growth of population. It promised to pursue a vigorous family planning programme on a "wholly voluntary" basis and "as an integral part of the comprehensive policy covering education, health, maternity and child care, family welfare, women's rights and nutrition". To highlight the shift, the programme and the executive department of the central government were renamed Family Welfare Programme and Family Welfare Department respectively.[30]

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29 R.G. Davidson, "Political Will and Family Planning : The Implication of India's Emergency Experience", Population and Development Review, vol. 5, no. 1, March 1979, pp. 29-59.

30 V.A. Pai, Panandikar, et al., Family Planning under Emergency : Policy Implications of Incentive and Disincentive, New Delhi, Radiant Publishers, 1978.

The population policy statement of the new government, announced in June 1977, was essentially similar to that issued in April 1976. It emphasized the government's anxiety to promote through the family welfare programme "the total welfare of the family and the community", without any "compulsion, coercion or pressure of any sort" while the need to reduce the birth rate to 30 per 1,000 and 25 per 1,000 by 1978-79 and 1983-84 respectively was reiterated. The term "target" was replaced by the term "expectations of achievement" with respect to various methods.[31]

A major beginning was made during 1977-78 with the inauguration in October 1977 of a scheme to appoint community health workers (CHWS), later named Community Health Volunteers or CHVS, who would work part-time to meet elementary curative needs and who would look after the promotion of the preventive aspect of health. Each village with a population of 1,000 would select one of its residents to work as CHV, the doctor in the PHC would assist and guide him, after a 10 to 12 week training period. The CHVs were expected to help in motivating couples to practice family planning.[32]

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31 Planning Commission, Sixth Five Year Plan, 1980-85, New Delhi, 1981, p. 389.

32 Ibid.

In a further move to curb population growth, the Child Marriage Restraint Act was amended during 1977-78 to raise the minimum age of marriage from 15 to 18 years for girls and from 18 to 21 years for boys.

6. Population Policy Statements of 1976 and 1977

(a) The population statements[33] of 1976 and 1977 both proposed to raise the minimum age of marriage.

(b) Both the statements approved the payment of monetary compensation or incentives to the acceptors of sterilization and IUDs.

(c) Funds outside the family planning budget were to be allocated to States doing well in family planning to encourage them to launch innovative promotional programmes and to improve the health infra-structure.

(d) Both the statements approved the need to increase female education and to improve the nutritional level of children. Health and family welfare were an important component of an Adult Education Programme, launched in 1977-78.

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33 For full text of the statements see Government of India, Ministry of Health and Family Planning, Family Welfare Programme Year Book for 1975-76 and 1976-77, Ministry of Family Welfare, New Delhi.

(e) Group incentives or special awards were to be given to the medical profession, to teachers, to co-operative societies, to labour in the organized sector and to panchayats that reported best overall performance in family planning.

(f) Various measures were suggested to facilitate the communication of family planning issues and to motivate couples to limit the size of families. Beginning in 1977-78, a large number of "orientation training camps" have been organized at the block level for opinion leaders in villages.

(g) Mass-media and audio-visual aids were to be used extensively to emphasize the need for checking population growth and to convey information about the available methods of family limitation.

(h) Donations for family welfare purposes were made tax-deducible.

(i) Government support for research in reproductive and contraceptive techniques was continued.

7. Long Term Goals

On the recommendations of a Working Group on Population, appointed in 1978, the Sixth Plan envisages "the long term goal" of reducing the net reproduction rate

(NRR) to unity by 1995 for the country as a whole. The implicit objective for 1996 is to lower the birth rate to 21 per 1,000 (from the official estimate of 33 per 1,000 in 1978) and to raise the percentage of couples effectively protected against the risk of conception to 60 per 1,000 (from 22.8 per 1,000 at the end of December 1980).

The Population Policy Statement[34] of 1976 gave tacit approval to states introducing compulsory sterilization if they felt that "the facilities available with them" were adequate to meet the requirements" ensuing from such action. It was apparently the judgement of those who formulated the National Population Policy that "Public opinion is now ready to accept much more stringent measures of family planning" than before. The Small Family Norm Committee,[35] however, had ruled out any scope for "the use of force, coercion or compulsion of any kind" in its report of 1968. Public debate on the subject had been sparked off by the Minister for Health and Family Planning's query at a symposium on "Bucharest : A Year After", held at New Delhi on September 1, 1975, as to whether India should "think of the unthinkable" - a statutory limitation of

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34 Population Policy Statement, op. cit.

35 India, Government of, Small Family Norm Committee, Report (1968), New Delhi.

family size - because the targeted birth rate was likely to be difficult to achieve by the end of the Fifth Plan. In his note to the Prime Minister, the same Minister, who favoured development as the best contraceptive, saw "no alternative but to think in terms of introduction of some element of compulsion in the larger national interest". This view found an echo in the Prime Minister's statement at the 31st Annual Conference of the Association of Physicians of India on January 22, 1976, that "some personal rights have to be kept in abeyance for the human right of the nation - the right to live, the right to progress".[36]

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36 The Hindustan Times (New Delhi), January 23, 1976.

CHAPTER II

THEORIES OF POPULATION AND EVALUATION OF POPULATION POLICIES

1. Population Problem - What it Means?

Here in India, we understand the population problem to mean the following:

(a) Indian population is characterized by high birth rates and high death rates.[1]

(b) There is high infant, child and maternal mortality as well as high fertility in India.[2]

(c) India is predominantly agricultural and three fourths of its population lives in the villages.[3]

(d) One half of India's population live below the poverty line, unable to get the minimum required calories of 2200 per day.[4]

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1 See Census of India, 1981.

2 Ibid.

3 See Government of India, Ministry of Information and Broadcasting, India 80, New Delhi, Publication Division, p. 11; also Census 1981.

4 See V.M. Dandekar, "On Measurement of Poverty", Economic and Political Weekly, July 25, 1981.

(e) Per capita income in India is very low. It is not uncommon for the poor in this country to go without one square meal a day.[5]

(f) The poor in India are unable to resist virulent diseases as they suffer from chronic want of food and other means of subsistence.[6]

(g) India is only partially industrialized.

(h) Agriculture in India is entirely dependent on the vagaries of rainfall without having any "viable" system of irrigation.[7]

(i) The number of landless people is very high and most of the labour is concentrated in the agricultural sector.[8]

(j) Access to employment, medical facilities, health care, sanitation, and education is very low.[9]

The poor in India are often blamed for breeding more and for thus adding to the existing problem of scarce

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5 Ibid.

6 See D. Banerji, Population Issues in Health, Population and Nutrition, Centre for Social Medicine and Community Health, JNU, New Delhi, 1978. See also his "Measurement of Poverty and Under Nutrition", Economic and Political Weekly, September 16, 1981, pp. 1579-82.

7 D. Bhattacharya, An Enquiry into the Economic Law of Population Growth, 1801-1821, Indian Statistical Institute, New Delhi, December 1978, pp. 1-8.

8 India 80, op. cit.

9 D. Banerji, op. cit.

resources. The Western media constantly publicizes that the world's population and resource crisis is the outcome of the burgeoning population of India, China and Bangladesh. India is especially blamed for having added a population equal to that of the USSR's since independence and for adding every year 13 million people - a population equal to that of Australia's, thereby creating unbearable pressure on the social infrastructure of employment, agriculture, health, energy resources, and education.

2. Family Planning Strategy - An Overview : Commanding from the Heights

Discussions of India's population problem almost invariably revolve round its rapid growth, the measures of control undertaken the various policies which go under the name of family planning (now family welfare), as well as past and present achievement. Questions related to how India's population lives, works, takes birth and dies, which are vital and closely linked with the growth and control of population, if considered at all, are relegated to a low priority.[10]

It has come to be assumed in India, particularly in elite circles, that family planning is good for the

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10 A.R. Kamat, "Quality and Control of India's Population", Economic and Political Weekly, vol. 15, no. 13, March 29, 1980, pp. 635-7.

country. Government propaganda has fostered the impression that the biggest single problem in India is its population. If only we had had fewer babies it is presumed "Garibi" would have been "Hataoed"[11] a long way back. Most of the assumptions on which India's development policies are formulated, including population planning and birth control, are derived from the historical experience and scientific knowledge of developed countries. A thorough neo-colonial intellegentsia, fostered by our colleges, universities and research institutions, cannot possibly imagine that there can be any knowledge except that handed down by the schools of Western industrialized countries.[12] This in itself may not be so bad except that by the time this knowledge reaches India and is applied, it is generally obsolete in its home territory.[13] The Government of India, its bureaucracy and intellegentsia, have time and again welcomed the "western message" and swallowed it hook, line and sinker. Foreign aid

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11 The slogan "Garibi Hatao" was given by Mrs Indira Gandhi during the 1969 elections.

12 See Surajit Sinha, "Is there an Indian Tradition in Social Cultural Anthropology : Retrospect and Prospect", Journal of Indian Anthropological Society, vol. 6, 1971, pp. 1-4.

13 B.K. Roy Burman, "Critique of Maurice Freedman's Report on Social and Cultural Anthropology", Man in India, no. 54, June 2, 1974, pp. 129-44.

schemes, international agencies and foreign foundations have frequently stepped into ginger up the government and bureaucracy on the one hand and the academia on the other.[14]

Ever since the family planning programme was introduced, we have been entertained by a variety of tricks. At first it was the fertility cycle with the rosary; later it was the loop, and later still it was the condom. Now, it is the vasectomy and tubectomy - with a variety of pills thrown around. All these methods are known to have adverse side effects on the human body. So that the problem besides being a physical one becomes a mental, and moral one as well.

This is not to suggest that the problem of India's rapidly growing population (was or is) not a real problem, or that contraceptive technology should have been rejected outright. The question at issue is the universal acceptance of the offered solution to the problem - with a few honourable exceptions. Many demographers and other academics have produced a plethora of KAP (knowledge, attitude and practice) studies on contraceptive methods.[15]

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14 A.R. Kamat, op. cit.

15 For different KAP surveys see Kamala G. Rao, Studies in Family Planning, New Delhi, Abhinay Publication, 1974.

The results, which were in a sense built into the questionnaires and the methods of administering them, proved to the satisfaction of the survey demographers and their national and international patrons that the Indian adult population was overwhelmingly in favour of family limitation and the use of contraceptives. Almost every body realises now that these KAP surveys were a kind of command performance to bolster the policy programme which the West had already decided was to be applied in India.[16]

A similar emulative exercise took place when it came to the actual type of contraceptive to be used and vigorously propagated, particularly among the poor sections. Sometimes there was the cafeteria approach that was adopted, sometimes the IUD was recommended while at other times the remedy of sterilization was vigorously put forward.[17] These shifts in emphases were probably advocated by foreign advisors on contraceptive technology. Here also there was little independent thinking or careful tryouts on a

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16 See for example A. Bose, et. al., Population in India's Development, 1947-2000, New Delhi, Vikas Publishing House, 1974.

17 For a systematic development of Family Planning Programme see Government of India, Ministry of Health and Family Welfare, Family Welfare Programme of India, New Delhi, January 1981.

long enough period with the necessary after care and follow up. And there was little undertaken by way of research to evolve an effective, easy to administer and agreeable contraceptive suited to Indian conditions and based on indigenous resources and technology.[18]

As Indian dependence on Western foreign aid and technical knowhow increased, the pressure from donor countries and international institutions for a more and more rigorous implementation of population control also increased. Expenditure on population control rose from Rs.2 crores in the Second Five Year Plan to Rs. 10,100 crores in the Sixth Five Year Plan.[19] An extensive and farflung health and family planning bureaucratic structure came into being. Then, during the 1960s, followed the era of incentives and disincentives. Higher power family planning publicity drives were launched aimed at putting pressure on the poorest and most vulnerable sections of the population to accept the contraceptive of sterilization.[20]

Extending knowledge about birth control methods, improving their feasibility and availability may be

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18 D. Banerji, op. cit.

19 Ibid.

20 A.R. Kamat, op. cit.

necessary parts of population policy, but as Mandelbaum has suggested, they are not enough to relieve India's population burden.[21] Indeed the many projects on Family Planning underaken in India have perhaps for this reason failed to attain their objectives, in spite of protracted planning and huge investments.[22]

Asok Mitra[23] admits that the burden of India's population has become intolerable and will become still more intolerable between now and 2000 A.D. According to Mitra, each age group of five years from age 5 to 44 in India's age pyramid is likely to accumulate an extra 20 million persons of each sex between 1971 and 2000; or a total addition of 320 million extra human beings, exclusive of the population that will die between 1971 and 2000.[24] Mitra's conclusions are: Firstly, that there has not been any structural change in the social, technological or economic state of India or in the structure of its

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21 D.G. Mandelbaum, "Social Components of Indian Fertility", Economic and Political Weekly, Annual Number, February 1973, p. 155.

22 K. Dandekar, "Possible Targets and Their Attainment in the Field of Family Planning in India during 1966-76", Artha Yojna, vol. 8, no. 3, 1976, pp. 239-49.

23 A. Mitra, India's Population : Aspects of Quality Control, vol. I and II, New Delhi, Abhinav Publications, 1978.

24 Ibid. See Introduction.

population since 1951; that the instruments in the hands of the poor with which they can work for their betterment are in fact fewer today than they were in the early fifties (because of rising unemployment and skewed income distribution); that a high death rate and a high birth rate occupies most of the social pyramid, possibly up to 70-75 per cent of its height. Secondly, that the catalysts for improvement in the quality of life are female literacy and education, the non-household employment of females, and improvement in public health leading to a palpable and enduring reduction in infant and child mortality. These form the core of any rudimentary development in the quality of life and sustain a steady reduction in fertility. Thirdly, Mitra accepts that there is a small but definite decline in the birth rate since the late sixties and particularly since 1970. It is possible to continue this decline further he feels by attaining a minimum improvement in living conditions, and through social transformation and technological progress.[25]

3. Theories on Population

In order to appreciate the full range and depth of the assumptions that lead to certain family planning

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25 Ibid.

pronouncements, and in order also to understand the consequences of such policies, it is important to examine the extant theories on population and the points of their dissonance.

Thomas Malthus in his well known "Essay on the Principle of Population",[26] which appeared in 1878, pointed out the disparity between the growth of population and the means of subsistence. He observed that unless otherwise checked, it is the natural tendency of population to increase geometrically, by doubling almost every 25 years, whereas food production can at best increase arithmatically at a small constant rate over that produced initially. The discrepancy thus arising between the means of livelihood and the size of the population is corrected by wars, epidemics, famines, limitation of marriages, birth control, abortion, and other methods of checking population growth. As a clergyman, he was critical of abortion and the like, and suggested "moral restraint" and prolonged celibacy coupled with chastity.

3.1 Neo-Malthusians

The kernel of Malthusian thinking has influenced scholars for generations in spite of the decisive attacks

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26 Thomas Malthus, First Essay on Population, 1798 with notes by James Bonar, Printed for the Royal Economic Society, MacMillan and Co., London, 1926.

made on it by Karl Marx and Frederick Engels[27] in the mid nineteenth century. It has survived till today and various sophisticated researches on population are inspired by it. In the changing circumstances the original theory has been modified and now it is known as "neo-Malthusian theory". According to this theory, the present unprecedented rate of population growth makes increasing demands on limited natural resources, and this results in diminishing returns and in halting social and economic development. Therefore, to achieve a given rate of economic growth, an ever increasing rate of investment becomes necessary. Since high rate of growth of population means more dependants on those who are engaged in production, there remains very little saving which consequently limits the possibilities of meeting the demand for higher investment. Ultimately economic growth and social development are obstructed by the rapid rise of population. And unless this trend is deliberately checked, it will inevitably, it is argued, devastate human society.

Malthus' first essay on population was published in 1798. The last quarter of the 18th century, following

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27 See R.K.L. Meek, Marx and Engels on Population Bomb, Berkeley Calif.: Rampart Press, 1971.

28 Thomas Malthus, op. cit.

the industrial revolution, witnessed a significant increase in birth rates as well as death rates. Malthus referred to opposite tendencies in a cyclical form - one of them was the biological urge to procreate and the other was a set of positive and preventive checks to growth. The most important of the checks was the means of subsistence. He believed that in history, population always tended to abide by the limits set by subsistence and was contained within this limit. Factors like want, famine, child mortality were all understandable in terms of misery and vice. Malthus has presented, for all practical purposes, a theory of vicious cycle of population.

The classical theory of subsistence wage is based on the Malthusian theory of population and on the concept of diminishing returns in agriculture. With a rise in wage rates it is felt there will be more marriages, more births, a larger population and a greater supply of labour. This will, in turn, reduce wages leading to higher mortality and will thus reduce numbers until the wage rate is pushed to the subsistence level. In other words, income per head will be at equilibrium with a given population at the subsistence wage rate. Beyond this equilibrium point, an increase in population will be wiped out by a natural

Process.[29]

The vicious cycle is a process of a "circular constellation" of forces tending to act and react upon one another in such a way as to keep a poor country in a state of poverty. Essentially a poor country has a low per capita income, therefore a low rate of saving, and, in turn a low rate of investment which results in a low level of income and so the process goes on. Ragnar Nurkse assumed that as "man produces less than his critical amount of subsistence, a cumulative downward movement will follow. Malthusian positive checks are able to assert their influence only in a poor country".[30]

Neo-Malthusians argue that population must be proportional to the resources so as to achieve the best economic effect - underlying this is the concept of "optimal population" (i.e. the number of people who with the available resources and the existing level of technology would produce the highest level of living). Based on this concept are popular terms such as "overpopulation" and

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29 D. Bhattacharya, An Enquiry into the Law of Population Growth in India, 1801-1921, presented at the Xth International Congress of Anthropological and Ethnological Society, New Delhi, December 1978.

30 R. Nurkse, Problem of Capital Formation in Underdeveloped Countries, Bombay: Oxford University Press, 1966.

"underpopulation". All these terms are used in a way that suggests that they are self explanatory and have some absolute significance. The fact that they are related to a specific time, space, and purpose is often ignored.

Govind argues that in the interest of the people it is necessary to put a check on the growing population, because increasing population is likely to worsen the already existing imbalance between poverty for the many and affluence for the few.[31] Hallen employs the Malthusian theory of population in India (food versus population situation) and postulates the necessity for an adequate population policy to "maintain" the population, if not decrease it.[32] Similarly Rao[33] observes that most of the economic ills in India have their roots in over-population. According to Rao, population growth has nullified the technical advances made to improve the quality of life. Unlike the developed countries, in developing countries like India, where labour is abundant and capital scarce, population growth is a liability rather than an asset.

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31 H. Govind, "Population and Poverty", The Hindustan Times (New Delhi), November 24, 1980.

32 G.C. Hallen, "Population Explosion - Need for Evolving a Scientific Population Policy for India", AICC Economic Review, vol. 18, no. 2, 1967, pp. 23-28.

33 S. Rao, "Population Growth - Some Emerging Issues", The Indian Express (New Delhi), May 30, 1978.

The immediate effect of population growth is on consumption because more mouths are added without a corresponding increase in the number of working hands. It affects, unfavourably, per capita income and also perpetuates inequalities in income and wealth.[34]

Accelerated growth of population is also linked with the substantial decline in mortality with practically no decline in fertility, resulting in a widening of the gap between birth rates and death rates.[35] The problem is therefore to educate people about the benefits of a small family through individual and group contacts and to change the social and cultural mores that favour uncontrolled reproduction.[36]

A vigorous family planning campaign is advocated by Patel[37] who finds that all the efforts to increase production and the employment rate have been nullified

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34 Ibid.

35 S. Chandrashekhar, "Population Problem in India", Family Planning News, vol. 10, no. 1, January 1969.

36 Ibid.

37 N.T. Patel, "Rising Population and the Economy", The Economic Times (New Delhi), March 12, 1977.

by the increase in population. Sen,[38] Sanyal[39] and Sehgal[40] are also in favour of checks on the growth of population. They also list out the benefits of a small family.

Cassey[41] has suggested that an all out educational drive is necessary so that every villager knows what family planning means and gets acquainted with the methods that can be used. Cassey believes that the message of family planning has not yet reached the masses and hence the family planning programme has not been able to make a substantial impact on the public mind. Therefore, educational experts and professionals, rather than administrative staff, should be entrusted with the task of educating people in family planning practices. Through this people will be made to realize the impact of population growth on their economic, physical and social well being.[42] Mayawanti[43] through her survey found that the main obstacle

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38 A. Sen, "Need for Expansion of India's Family Planning Services", Journal of Indian Medical Association, 32, 1959.

39 See S.N. Sanyal, "Population Problem in India", Journal of Indian Medical Association, vol. 20, no. 5, 1951, pp. 215-20.

40 See Sehgal, "Small Family Better Living", Yojna, vol. 12, no. 18, 1968, pp. 34-36.

41 R.C.D. Cassey, "India's Major Problem I, Possible Solution to Population", Journal of Family Welfare, vol. 6, no. 3, 1960, pp. 21-29.

42 Ibid.

43 R. Mayawanti, "Family Planning : Impact on Social Attitude", The Hindustan Times (New Delhi), September 8, 1976.

to the Family Planning Programme is the low literacy level of the Indian family, combined with the age-old reticence of Indian women in most communities. Social attitudes of a large number of married couples who have a traditional bias for a son also play a role. Until and unless citizens in general become conscious through a well planned mass-media education programme of the fact that unrestrained procreation is harmful to both mother and children it is not possible to persuade people to use contraceptives.[44] Effective motivation may one day encourage people to see the "family planning drive" as a "family protection drive".[45]

Ashok Khosla considers poverty a type of "pollution".[46] According to Khosla the pollution of poverty arises from both a deterioration of the resource base as well as from the production of wastes. The primary cause of this problem is excessive population and its rapid and continued growth - this requires an immediate increase in the production of food, fibre, wood and other materials. There is little unused cultivable land left

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44 Ibid.

45 N.S. Balasubramanium, "Sociological Aspect of High Birth Rate in India", AICC Economic Review, vol. 17, no. 9, 1966, pp. 15-18.

46 A. Khosla, "Population and Environment", in A. Bose, et al. (eds), Population in India's Development, 1947-2000, New Delhi: Vikas Publication House, 1974.

in India. This forces increasing reliance on more intensive agriculture. The consequent use of fertilizers, pesticides and other modern techniques which cause increasing strain on the economic system, can lead to a deterioration in the quality of the final product and in the nutrients of the soil. Khosla, therefore, believes that unless a Malthusian catastrophe intervenes, the population will more than double during 1970-2000. This means that in order to just maintain the level of the quality of life existing in 1970 the whole physical infrastructure presently available will have to be doubled.[47]

3.2 Structuralists

In direct contradiction to Malthusian natural theory Marx and Engels[48] insisted that it was impossible to speak of any generally applicable law of population which was the same for all times and places. They argued that the population process is related to social organisation. Its growth depends on diverse factors - such as the level of productive forces, the relations of production, the state,

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47 Ibid., pp. 50-51.

48 The arguments of Karl Marx and Fredrick Engels on Population have been reproduced in R.L. Meek (ed.), Marx and Engels on Population Bomb, Berkeley Calif.: Rampart Press, 1971.

the laws governing mortality, political and other ideas, religion and the geographical environment. Accordingly, each socio-economic formation has its own historically transient law of population. With regard to overpopulation, Marx observed that it was purely related to a particular set of institutional arrangements existing in a society at a particular historical time and space. For instance in a capitalist society, there is capital accumulation which forces the migration of workers, and creates relative overpopulation manifested in unemployment. That is to say that overpopulation is built into the very system of capitalism. He made a distinction between the "means of subsistence" and the "means of employment" and observed that poverty is caused by the pressure on the means of employment and not on the means of subsistence.[49] By this Marx implies that social relations present a formidable obstacle to the productive use of human resources and thus create an artificial scarcity of the means of subsistence.[50] Engels subsequently declared that Malthus' theory of population was a declaration of war on the working classes.[51]

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49 Ibid.

50 Ibid.

51 F. Engels, The Condition of Working Class in England, London, Allen and Unwin, 1950.

Joshi's[52] observation is that Malthus' theory became an essential part of the colonial theory of poverty and economic backwardness. Western scholars with liberal impulses and a sincere belief in the civilizing role of the West, feel deeply disturbed by widespread poverty and economic stagnation. They find themselves in a "moral discord" created by the assertion of lofty principles on the one hand and the negation of these principles in actual life, on the other. Caught in this state of moral anxiety, they look eagerly for an explanation which seems to exonerate the colonial regime from responsibility for the economic ills of the colonial countries. The Malthusian doctrine was thus revived as the "overpopulation" thesis by liberal writers on the economic problems of colonial countries.

The underdeveloped world, it is often argued by some scholars, is not poor in resources. Nature has distributed its bounty unevenly, and this is to the advantage of the Third World. The major problem is that social relations of production impede the exploitation

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52 P.C. Joshi, "Population and Poverty - The Moral Discord", in A. Bose et al. (eds), Population in India's Development, 1947-2000, New Delhi: Vikas Publication House, 1974.

of resources and the distribution of profits.[53] Referring to the case of India Gough[54] argues that Indian soil is so fertile that it can give at least three crops per year provided further intensification of cultivation is undertaken. Similarly Susan George[55] notes that the Indian soil is the best in the world and can be used for multiple cropping.

A.R. Desai in his book Urban Family and Family Planning in India runs down the Family Planning Programme in India as an aggression of the rich on the poor. He draws an analogy between the Indian experience wherein the rich feel themselves threatened by the poor and the similar fear expressed by rich nations vis-a-vis the poor nations. The former imagining themselves threatened by the poor nations, have for the last twenty years relentlessly advocated population control as the major panacea for the latter's ill rather than economic development.[56] Mandelbaum,

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53 Ibid. See also Werner Plum, Industrialization and Mass Poverty, trans. by Furtmuller (1977), published by Frederich Ebert Stiftung Bonn-Badd Godesburg, Federal Republic of Germany, pp. 104-20. See also J. Pathy, "Population and Development", Economic and Political Weekly, vol. 11, no. 30, July 24, 1970, pp. 1124-30.

54 K. Gough, "The Green Revolution in South India and North Vietnam", Monthly Review, vol. 9, no. 8, January 1978, pp. 10-21.

55 Susan George, How the Other Half Dies, New York: Penguin Books Ltd., 1980.

56 A.R. Desai, Urban Family and Family Planning in India, New Delhi, Abhinav Publication, 1974.

similarly argues that the burden of excessive population is a long-term problem, and a family planning programme cannot yield much in the way of material benefit or relief in a few years. Urgent, immediate dilemmas tend to overshadow long-range fundamental concerns, even though national leaders are often aware that the immediate pinch is only a symptom of a greater underlying problem.[57]

The World Population Conference[58] held in Bucharest in 1974 was divided and there were two divergent and opposing views which were put forward. The first, held by many affluent nations, was that population is the only real problem facing the world today and that all our energies, funds, attention and all our ingenuity should be used to stem the growth of population. The other view, which was mainly expressed by some countries of Asia, Africa and Latin America, was that the question of population was really being overplayed, and that the problem was primarily that of development and economic growth, and that all the money, time and expenditure being put into population control could more effectively and usefull be diverted towards economic development. The term over-

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57 D.G. Mandelbaum, "Social Components of Indian Fertility", Economic and Political Weekly, Annual Number, February 1973, p. 151.

58 The view expressed by different statesmen are those reported in "Politics for People", People (London), vol. 1, no. 5, 1974, pp. 18-35.

population seems popular because with it all vital problems like unemployment, poverty and many other such phenomena can be explained away.[59]

In India 40 per cent of the population is below the poverty line and large sections are just a little above it. Of the top ten per cent who can be considered better off only a small section enjoy the standards of Western affluence.[60] The structure of industrial production and social relations has so far been strongly biased in favour of the consumption pattern of this small better-off section of the population. Even agriculture and animal husbandry with all their recent progress, have not contributed much towards the satisfaction of the bare nutritional needs of the bulk of the population. This underlines the sharply skewed pattern of income distribution, manifest in massive unemployment and underemployment at the grass-root level. Whatever income transfer occurs through infrastructural development or provision of welfare services remains grossly inadequate since the mass base of income generation is extremely fragile. There is need for a redistribution of production and consumption on

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59 Pathy, op. cit.

60 B.N. Ganguli, et. al., "The Future Quality of Population", in A. Bose, et. al. (eds), Population in India's Development, 1947-2000, New Delhi, Vikas Publishing House Pvt Ltd., 1974.

a large scale. Mere redistribution of consumption, unaccompanied by a change in the structure of production is not enough. A fundamental restructuring of our life-style, our economic base, and our outlook for the future will occur only if profound changes in the socio-economic system also take place.[61]

4.11 Ideas and Concerns that Govern Family Planning in India Today

The very first census in India raised the Malthusian issue in 1881. Since then the census has been undertaken every ten years. The Government of India was one of the first governments to launch a family planning programme on a national scale. Aimed primarily at the poor (approximately 80 per cent of India's population) the policy assumed that the lower the rate of population increase, the faster would be the rate of social and economic development.[62] Thus, family planning became a planned intervention to check the reproductive behaviour of the poor.

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61 Ibid., p. 41; also see Werner, op. cit.

62 Sumanta Banerjee, Family Planning Communication - A Critique of the Indian Government, New Delhi: Radiant Publishers, 1979.

In the initial stages of its development, the family planning programme was influenced by the traditional approach of the International Planned Parenthood Federation.[63] Family Planning clinics, as Myrdal[64] has pointed out, were developed on the Anglo-Saxon pattern, with emphasis on person to person instruction. When however, it was realized that the range of such clinics was very limited, again taking the cue from the community development movement in the United States, it was decided to institute an enormous network of family planning workers, as well as undertake a campaign to "sell" family planning (with emphasis of IDUs and condoms) along the principles of sale of commercial products. It took quite a long time to discover that the elaborate machinery (consisting of over 125,000 personnel) built at great cost did not have the ability to mobilize the population for participation in the Family Planning Programme.[65] Demographic research too was heavily influenced by what the government wanted to do in India, while major KAP studies were heavily funded by the USA.

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63 D. Banerji, "Will Forcible Sterlization be Effective", Economic and Political Weekly, May 1, 1976, p. 226.

64 Myrdal, cited in Banerji, op. cit.

65 Banerji, op. cit., p. 226.

At the operational level the Family Planning programme is a major plank in the internationally sponsored anti-poverty programme. Whether this programme has produced any results during the more than 30 years of its existence is not the concern of the Government. Family planning has failed, but family planning must succeed, so runs the refrain of policy makers. Perhaps in no other field has so much foreign expertise been made available as in the Family Planning Programme.[66]

It is ironical that the Family Planning Programme in India continues to be governed by the same idea with which the programme began. It was assumed that ideological and monetary pressures coupled with "education" would solve all the problems. There was no hard factual data with which to support this, other than the neo-Malthusian obsession. The outcome was the pressing into service of other departments like law and order, tax collection etc., in order to coerce the poor to accept the programme.

4.2 Which Side Does it Tilt Towards?

India's family planning programme stands somewhere between the pessimistic predictions of neo-Malthusians that mankind, particularly the third world, is heading

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66 P.C. Joshi, op. cit., p. 79.

for a major disaster if population continues to gallop at the present pace and the assumption of the structuralists who are convinced that the earth's resources are sufficient to cope with any size of the population provided society can be restructured in such a way as to ensure the universal application of ever-advancing technological progress.[67] The policy says that to wait for educational and economic development to reach that level where the drop in fertility would be automatic might be utopian.[68] Dr Karan Singh, India's former Health Minister, had spelled out the policy "...the need is to adopt an integrated approach encompassing the entire socio-economic system and covering the man-environment relationship in such a way so that every human being born here is assured of material, intellectual and spiritual inputs necessary for the full flowering of the human personality. Fertility can be effectively lowered if family planning becomes an integral part of the broader strategy to deal with the problems of poverty and underdevelopment".[69]

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67 See J. Pathy, op. cit.

68 Karan Singh, "Population Policy and Future", Ferozeshah Memorial Lecture, Anand Bazar Patrika, September 20, 1976.

69 See extracts from the 6th Plan on the Family Planning and Health Policies in India, Science Today, May 1981.

Seeing the Indian family planning programme in a historical perspective, it seems to tilt towards neo-Malthusianism, and is only partially influenced by the structuralists. There are structuralist elements but these are not fully developed. Sociological awareness is low, for the policy makers do not realize that their recommendations cannot by dictat, goodwill, or hard work be brought about when there are serious social impediments made even worse by a wrong choice of the target group. We shall try to elaborate these issues in the following chapters.

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CHAPTER III

POVERTY AND OVERPOPULATION

Population growth in India is seen essentially governed by the law of underdevelopment. A direct link is therefore posited by most thinkers on the subject between poverty and overpopulation. That is to say, it is argued that poverty is the cause of overpopulation. We found in the earlier chapter that this trend is dominant among the neo-Malthusians and that it also primarily governs the thinking behind population policy formulations in India. In our earlier chapter we had also mentioned the structuralists who, as critics of the neo-Malthusians, pointed out that the population problem, so to say, looms large because of poverty caused by the structural constraints of the system. But there exists a strain of thinking among the structuralist tradition which claims that given the situational context and the structural alignment of the system it is <u>rational</u> for the poor to have larger families as every child is an economic

asset.[1] Another side of the same argument is that the high infant mortality rate among the poor compels them to have larger families.[2]

In this chapter we shall take up what we have called the "rationalist" argument for closer scrutiny as they paradoxically seem to concur with the neo-Malthusians (though for different reasons) that the poor do in absolute terms contribute to overpopulation. We shall, therefore, for this purpose free the "rationalist" strain from the other observations made by the structuralists as these observations do not inevitably lead to the "rationalist" thesis. We then propose to return to the main theme of

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1 The major study and, once upon a time, a famous book on poverty and overpopulation is of Mahmood Mamdani, The Myth of Population Control : Family, Caste and Class in an Indian Village, New York: Monthly Review, 1972. Also those who favour Mamdani are D. Banerji, "Family Planning in India : The Outlook for 2000 A.D.", Economic and Political Weekly, vol. 9, no. 48, November 30, 1974, pp. 1984-9, and P.C. Joshi, "Population and Poverty : The Moral Discord", in A. Bose et al. (eds), Population in India's Development, 1947-2000, New Delhi: Vikas Publishing House, 1974.

2 Mamdani, op. cit. Also see S.K. Rao, On Ideology of Population Control : A Counter Argument, Working Paper 1, Centre for the Study of Regional Development, JNU, New Delhi, 1975. Also see K.H. Gould, "Sex and Contraception in Sherupur", Economic and Political Weekly, vol. 14, no. 49, December 6, 1969, pp. 1893-6; and Mead Cain, "Risk and Insurance : Perspective on Fertility and Agrarian Change in India and Bangladesh", Population and Development Review, vol. 7, no. 3, September 1981, pp. 435-74.

the structuralists and use it to understand how valid the neo-Malthusian contention is that the poor, the world over (especially in the Third World), are responsible for depleting the limited resources in this "only one earth". In doing so we hope to shed more light on the ideology of population control which rests, more often than not, on a simplistic and misleading notion of modernization.

1.1 Every Child is an Economic Asset

Mahmood Mamdani in his work[3] has attacked the ideological assumptions inherent in the "theory" about fertility, employed by the Khanna study[4] in which population growth was treated as a kind of disease. On the basis of his own field work undertaken in the same area of Punjab he has attempted to demonstrate that it is rational for all, except Brahmins and big farmers, to have large families. For a time Mamdani's book became almost a charter for those who took the view that a significant reduction in the rate of population increase would only come about as a result of fundamental social changes, in which the logic of the situation is changed for all agrarian classes.

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3 Mamdani, op. cit.

4 J.B. Wyon and J.E. Gordon, The Khanna Study : Population Problems in Rural Punjab, Cambridge, Mass.: Harvard University Press, 1971.

It has been tempting to regard migration from the villages as a kind of mechanism by means of which families respond to the "pressure of population" upon their resources. Wyon and Gordon have done so in their study of the Khanna area of Punjab. Their critic, Mamdani, on the other hand, has argued that "...except for Brahmins those castes which had a high rate of net emigration considered a large family essential for their survival. And the Brahmins were not alleviating a population problem, by emigrating, for, as the Khanna study itself stated that they already had exceptionally low rate of natural increase".[5] That is to say it is Mamdani's contention that those who emigrated had already successfully limited their families. Thus to view the high rate of emigration as the result of an attempt to alleviate" population pressure" as the Khanna study does is to misunderstand reality.[6] Emigration is a socio-economic variable and not a demographic one. Harris[7] too feels that Mamdani is justified in challenging the crude mechanical interpretation of emigration which sees emigration as a demographic safety valve. His own

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5 Mamdani, op. cit.

6 Ibid.

7 John Harris, Capitalism and Peasant Farming, Bombay: Oxford University Press, 1982, p. 318.

study of Randam (a village in north Tamil Nadu) fails to corroborate the thesis that people have large families in order to send children to work outside. But contrary to Mamdani, Harris found that it was the landless who tended to emigrate most. So that while children may be a source of joy, profit and companionship it is often forgotten that at the same time children are also costly. They are responsible for added pressure on family resources, and they can in many other ways curtail the activities and opportunities of the parents.

According to some studies and survey responses, children are clearly recognized as economic liabilities by rural families of Africa and Asia. Eva Mueller[8] carried out one such analysis, employing the data from a range of source (although only India appeared in both the production and consumption statistics), and concluded that children have a negative economic value in peasant agriculture. Up to the time when they become parents themselves, children consume more than they produce.[9] The work contribution of children is not large enough to prevent them being an economic burden on peasant societies, and

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8 Eva Mueller, "The Economic Value of Children in Peasant Agriculture", Conference on "Population Policy" sponsored by resources for the Future (February 28 to March 1, 1975), p. 66.

9 Ibid.

children of either sex consume substantially more than they produce until they reach the 15-19 age bracket. The analysis gives dominant importance to the finding that in most underdeveloped countries it appears children under fifteen do relatively little market work. Even when they do in fact contribute to such production it is argued that the trend is for them to act as auxiliary workers rather than as full time workers. Finally raising a large number of children seems to be an expensive method of providing for old age support.[10] Also, as any survey would surely indicate, for the majority educating children costs a great deal directly and indirectly.

Though attitude surveys, anecdotal evidence and even some a priori reasoning does suggest that raising children provides "some" net economic benefits to the parents,[11] yet after sifting through evidence, Mueller finds that children are usually a heavy economic burden. Mueller makes an extreme effort to find a positive asset value for children at birth (by choice of assumption on hours of work, wages and consumption). She finds however, that children are of negative value in peasant societies,

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10 Ibid., p. 46.

11 R.G. Ridker, Population and Development, London: John Hopkin University Press, 1976, p. 7.

and concludes that this is especially so for urban areas where the cost of child rearing tend to be higher and the possibilities of contributing to family income at an early age tend to be lower.[12]

1.2 Demographic Trends and Changes in Agriculture

Mamdani argues that for labourers in a Punjab village it would be irrational for all, except big farmers and Brahmins, to limit the number of their families' children. Yet evidence concerning fertility among Randam[13] women shows that in general they all do in fact limit the numbers of their children. These findings are entirely consistent with those from elsewhere in India. Djurfeldt and Lindberg[14] in their study of a village in Chingleput district similarly found that on the average a woman was likely to have gone through only 6 or 7 pregnancies by the time she passed out of the reproductive age group; and in the Khanna area the numbers appeared to be only a little higher (7 or 8). Seven or eight deliveries is well below the reproductive capacity of a woman, for which various theoretical estimates exist

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12 Mueller, op. cit.

13 Harris, op. cit.

14 G. Djurfeldt and S. Lindberg, Pills against Poverty : A Study of the Western Medicine in Tamil Village, Scandinavian Institute of Asian Studies, Monograph Series, no. 23, Curzon Press, London, 1975, pp. 191-3.

(though the figure of about 13 appears to be generally accepted).[15] Harris also noticed that women in Randam practised some birth spacing. Prolonged lactation affects ovulation and menstruation after child birth, and sexual relations are in principle prohibited amongst the Agamudiyans[16] in Randam, as also among the Kallar,[17] for a period of atleast a year after delivery. If the parents have sexual relations during this period, it is believed to have a bad effect on the health of a child. Such practices as these have the effect of reducing the total fertility of most women in Randam. Gould,[18] who was able to enquire into sexual relations and attitudes in Sherupur village of Faizabad district in much greater detail, amplifies the same point for another region. Mamdani's argument quite ignores the crucial issue of timing - the question of a trade off between the cost of feeding children today and the benefit of having them

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15 G. Hawthorn, The Sociology of Fertility, London: Collier-MacMullar, 1970.

16 Harris, op. cit.

17 L. Dumont, Une Sous-Caste de l'inde du sud : Organisation Sociate et Religion des Pramali Kallar, Paris and The Hague: Mauton and Co., 1957. Dumont's arguments came in Harris, op. cit., p. 326.

18 K.H. Gould, op. cit.

feed you in later years. For Mamdani there is a rationality and logic behind why the poor in India reproduce more and the rich less. But statistically poor families are generally small. How then can Mamdani assert that they go on producing? Where is the rationality in his argument? If one were to go by rationality then the contrary should be true. Mueller's[19] explanations seem to fit both the NSS figures and the figures produced by Harris. Djuerfeldt and Lindberg[20] also show that poor families are in fact smaller in size. All in all it makes us a little skeptical of the rationality argument that every child is an economic asset and more so in a poor household. If the rationality thesis is to stand more facts need to be adduced in its support. Most often this argument is made on the basis of the popular assumption that the poor do indeed produce more children. Considering that fertility figures are not available by income or class group,[21] and also taking into account the fact that poor families are empirically smaller our skepticism with the rationality thesis does not seem to be ill-founded.

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19 Muller, op. cit.

20 Djuerfeldt and Lindberg, op. cit.

21 N. Krishnaji, "Poverty and Family Size", Social Scientist, vol. 9, no. 4, November 1980, pp. 22-35.

1.3 Family Size and Occupational Group

We can get a little more understanding of family size by different economic strata by following S.K. Rao's interesting work on this subject. Rao[22] takes into consideration economic costs and motives in having children by different occupational groups. According to Rao, family size tends to be highest in the case of groups whose income is dependent on family employment, and the size decreases as we move on to wage earners and professionals. Rao assumes four classes:

(a) Workers: This group consists of landless labourers in rural areas, coolies and industrial manual workers in urban areas. This class is dependent upon others for employment and its income level is very low.

(b) Peasant and Petit Bourgeoisie: Small peasants who cultivate land mostly with labour, petty traders, carpenters, weavers, and generally people who live by household industry. This class is characterized by self employment and usually enjoys a higher income level than the workers (Class I).

(c) Capitalist Farmers, Industrialists, Big Traders etc.: This class is characterized by the fact that they

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22 S.K. Rao, op. cit.

are employers and owners of property. They may be called the capitalist class.

(d) Professional Classes: These are people who enjoy fairly high income, higher than classes I and II. They, however, derive their income by doing jobs which require the acquisition of skills through education. It thus includes civil servants and skilled personnel like doctors, engineers etc.

In considering how class position affects fertility behaviour, Rao[23] examines the costs and the motives which propel people to want children in the context of the four economic groups or classes cited above, in terms of: (a) their income level, which determine the current level of living, and (b) their ownership of property which affects their access to employment and income in the future.

The cost of bringing up children consists of (1) the direct cost of feeding, and (2) the indirect cost of foregoing employment opportunities by women.

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23 See S.K. Rao, "Reducing Growth Rate of Population through Declines in Mortality", Economic and Political Weekly, vol. 9, no. 38, September 21, 1974, pp. 1623-8.

Women take up employment in class I (workers) because family income gets considerably boosted that way. At the small peasant level (class II) women do more than household work, but are usually limited to work on the family farm. At the class III level (capitalists) it is a safe assumption that women do not work. At the class IV level this trend is reversed. Women tend to take up work occasionally but not as often as among the working class, as a means of partly boosting up the family income.[24] The indirect cost of raising children can be said to fall as we move from workers to capitalists, but rises again as we move from the capitalists to the professional groups.[25] The direct cost of feeding, clothing, and educating children, as a proportion of income, falls as we move from workers to peasants to capitalists, but rises as we move from the capitalists to the professional class.[26]

1.4 Motives for Having Children

The motives for having children vary from class to class. Rao considers two major motives: (a) Children make the home happy: this is a universal motive; (b) Children are a source of future income.

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24 Ibid.

25 Ibid.

26 Ibid.

Let us now examine how far the second motive, in particular, is manifested among different classes.

Class I:

There should be a fairly strong motive for having children in this class, since income levels are low and any addition to income is welcome. However, the expected income associated with children is likely to be small for many reasons. Firstly, as there is no full employment, one cannot hope that children will be employed throughout the year. This is specially so since children would loose out to adults in competition for jobs. Children can therefore be employed only during the peak periods of employment. In the case of urban workers the picture may be even more bleak. Secondly, whether children give up their income to parents is likely to be influenced by employment conditions. Sometimes children who are employed in household chores are fed by the employer, and they do not have a net income beyond that. Moreover, it has been found that children in this class as soon as they grow into adulthood, tend to set up separate families and are therefore unable to give any income to their parents due to the pressure of poverty. It is fair to say that the expected addition to family income associated with children in this class is low.[27]

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27 Ibid.

Class II:

The motive in this class is likely to be much stronger than in Class I. While on the one hand, the pressure of poverty, and hence the importance of children as a source of income, is less acute, the chances of employment are greater due to the existence of the family farm, household industry, etc. Further, because of family dependence based on property, children are likely to stay on in joint-households much longer - through part of their adulthood. Moreover, because children are fed slightly better in this class, they tend to be more productive. For these reasons, the income stream associated with a child in this class would be higher than in class I.[28]

Class III:

The motive for having children is likely to be very weak in this class - partly because the income level is quite high and partly because the income is not earned by work. Children, however, would be desired, both to see the continuance of the family, and to fill up the key positions in managing family property. Simultaneously, however, there is also likely to exist the fear of sub-division of property, upon which the social status of the

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28 Ibid.

family depends. For all these reasons, the number of children desired would be rather small, compared to class II.[29]

Class IV:

In this class motivation is likely to be weak, though not as weak as in the capitalists class. Professional employment demands mobility of people and hence one cannot expect joint families. Moreover, as the income level is fairly high, the desire to make additional income through children is likely to be weak.[30]

Rao sums up thus: The motive for having children as a source of income is the strongest among self sufficient peasants and among the petty bourgeoisie. This motive is likely to be weak among poor workers and practically absent among the capitalists and the professional groups.

Unfortunately, Rao is not very clear when he handled the class of peasant proprietors. Peasant farming, as we shall try to show in the following chapter, does not bear uniform characteristics. The downward pressure in subsistence farms is so great that the marginal utility of

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29 Ibid.

30 Ibid.

an extra hand in the family farm is not commensurate with the levels of drudgery involved (contrary to Chayanov),[31] nor does it adequately compensate the cost of raising additional children and nurturing them to maturity. But following Rao one can be quite unequivocal about the contention that there is no firm basis for the belief that should poor families produce more children then it is a rational move on their part. By basing himself on statistical information regarding family size Rao, in effect, strengthens the counter argument.

2. High Infant Mortality

Rao also takes into consideration the other aspect of what we have called the "rationality" thesis. He examines how far it is valid to assume that as the poor are afflicted to a much larger extent by infant mortality, they produce more children to offset infant deaths. He argues in favour of this aspect of the "rationality" thesis. According to us, Rao neglects one dimension of the problem which we believe to be crucial. But let us first present Rao: That a family might give birth to a large number of children when mortality rates are high is a

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31 A.V. Chayanov, The Theory of Peasant Economy (eds.) D. Thorner, B. Kerblay and R.E.F. Smith, Homewood Illinois, 1966.

familiar argument. It is therefore believed that the birth rate is likely to fall when mortality declines. What is not however appreciated according to S.K. Rao[32] is that the birth rate might fall more than proportionately to the death rate, thus bringing down the growth rate of the population as a whole. Rao logically explains things through a model. He argues:

(a) Every family wishes that at least one child survives them. They therefore control their fertility behaviour in such a manner that they have a minimum of children to ensure that at least one child survives them.

(b) Families will be confident that one child will survive them if the probability of death for all the children they have is not greater than 1 per cent.

Given these assumptions how would fertility rates behave as mortality rates fall? Rao shows that when the mortality rate is as high as 70 per cent, a woman has to give birth to at least seven children to ensure that the probability of all her children dying during infancy is less than 10 per cent. This number diminishes as the mortality rate falls, so that if the mortality rate is only 10 per cent she needs to give birth to only one child.

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32 Rao, op. cit.

The average survival per family also declines in this process and this suggests that not only the birth rate but the growth rate of population would fall as well.

When the mortality rate is very high, the required number of births might exceed the limit of fecundity of a woman so that in certain ranges of mortality a fall in mortality rates might be immediately followed by a reduction in births.

What emerges from Rao's discussion is that:

(a) as the survival rate improves the birth rate might remain flat and consequently the growth rate will rise up to a point. However, after that, the birth rate is likely to fall more than proportionately and thus the growth rate will decline. The initial unresponsiveness of the birth rate to improvements in mortality is due to the fact that at very low survival rates the minimum number of children required to ensure the survival of at least one child may be so large that it might exceed either the fecund capacity of the mother or the economic capacity of the family to support so many children.

(b) Curiously, the number of children a couple might end up with may be larger than the desired number, which is assumed to be one. A couple in an attempt to

hedge against the risk of losing all the children have so many extra babies that in general the actual number of surviving children exceed the desired number of children. Such a discrepancy is larger, the smaller the survival rate confronting the individual couple.

In a study of fertility behaviour in Kerala, Nair[33] observed that the fertility rate in Kerala began to decline in the early 60s, before the intensification of the family planning programme. This may have been the consequence of a decline in infant and child mortality rates during the 50s following the extension of primary health measures over a period of time. Hence, proceeding along the rationality argument it is very plausible that in order to ensure one or two surviving children parents end up with producing a lot more. In most cases, however, statistics tell us that these children end up surviving.

But according to us there is one crucial factor that Rao ignores and it may be pertinent to examine it. It is known that lactating mothers are not generally reproductive and that most mothers in poor households lactate for a year or more. It is also known that children

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33 R.P. Gopinath Nair, "Decline in Birth Rates in Kerala", Economic and Political Weekly, Annual Number, vol. 9, nos. 6, 7 and 8, February 1974, pp. 323-36.

are not born with compulsive regularity every nine months, and that the spacing between children is generally between two and three years. Now here is the rub. If, as the GOI estimates tell us (see also Health for All by 2000 A.D.),[34] the 90 per cent of infant mortality takes place before a child is one year old, then after one year the parents should be able to tell with a reasonable degree of certitude which child is going to survive. After one year the high IMR factor loses much of its credibility, and with every passing year, as a child grows older, the threat of infant mortality recedes.

Let us suppose that a couple gives birth to a child. If the spacing between children is between two to three years, then by the time the next child is born, the first child should have crossed the most critical phase. The parents can now be reasonably certain the child will survive. If after another three years a third child is born and if the other two are still living, then both of them have passed the critical period. If the third child should die then there is motivation to have a fourth, but again after a gap of few years. Therefore, if one were to integrate rationality with established statistics then the

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34 Report of a Study Group set by the Indian Council of Social Sciences Research and Indian Council of Medical Research, Health for All : An Alternative Strategy, New Delhi, 1980, p. A-4.

TABLE 3.1 : NATIONAL MORTALITY, MORTALITY FOR 1-6 MONTHS, 6-12 MONTHS AND RESPECTIVE RATIOS FOR 1,000 LIVE BIRTHS

Year	1921	1931	1939	1968	1969
Death under one month: Percentage of total infant mortality (IM)	44.2	48.1	47.3	54.1	53.5
Death under one month: Ratio per 1,000 Live Births	87	86	74	74	74.8
Death (1-6 months): Percentage of total infant (mortality)	29.2	29.0	30.3	28.5	30.5
Death (1-6 months): Ratio per 1000 live births	58	52	47	39	42.7
Death (1-12 months): Percentage of total infant mortality	26.6	23.0	22.4	17.4	16.0
Death (6-12 months) Ratio per 1,000 Live Births	55	41	35	23.3	22.4

Source: Report of a Study Group set up by the Indian Council of Social Sciences Research and Indian Council of Medical Research, Health for All : An Alternative Strategy, New Delhi, 1980, p. A-4.

need to reproduce more to offset high infant mortality may only occasionally lead to higher births. It need not lead to larger families. This seems to us to be a reasonable argument. But unfortunately this line of reasoning has never, to the best of our knowledge, been applied before. Unfortunately for us the only way to verify it is by getting hold of actual facts pertinent to our argument, but such empirical evidence does not exist. However, once our argument is appreciated for its logical consistency we believe then the rationality thesis, that poor families have more children because of high IMR, loses some of its persuasive power. For the moment we shall be satisfied if we have been able to do this much.

At this point we may put forward some tentative conclusions:

(1) There is no evidence, as Harris has pointed out, that increased labour demand arising from intensification of agriculture in Randam has made it advantageous for landless labourers or marginal cultivators to have a large number of children.[35] On the contrary, analysis of the link between income per consumption unit and the number of workers in a household suggests that limitation

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35 John Harris, op. cit.

of the family size might be advantageous to poor families.

(2) Nor is there any evidence from people's statements, or from what it is possible to deduce about family size, that landless labourers seek to increase the number of their children beyond a limit which is consistent with their aim to have enough children by the time they move out of the reproductive period.

(3) Having more children than is necessary is not a strategy that confers economic benefits upon the families of landless labourers. But neither does it appear that landless labourers and poorer families in Randam and elsewhere are trying to have more than the minimum number of children.

(4) Prosperous cultivators on the other hand do apparently stand to gain from having many children and several sons, but it is an uncertain "strategy" and there can be no justification assuming, as Mamdani sometimes appears to suggest for the case of Punjab, that the more one has the merrier (richer) one is. In Harris' case there is some slight evidence to indicate that fertility is higher amongst richer cultivators than amongst landless labourers.

(5) Finally, according to Mueller, raising a large number of children would seem to be an expensive method

of providing for the relatively minor aggregate burden of old age security and support.

In the previous section we had taken up for close scrutiny the arguments put forward by the critics of the neo-Malthusians. We had tried to show that there existed gaps and lacunae in the two cogent arguments offered by the critics of the neo-Malthusians. In addition, it should also be fairly clear by now that these critics, and their arguments (clubbed for our purpose under the rubric of "rationality" thesis), also believe with their adversaries, the neo-Malthusians,, that the poor indeed produce more. Ironical as this may seem, it is nevertheless quite true.

3. "Only one Earth" : Resource Limitation to Increasing Population

It is time now to shift our ground and discuss what till today seems to be the most convincing aspect of the neo-Malthusian approach. This aspect is the spectre of finite resources in "only one earth". The deceptive simplicity of the argument makes one quite readily believe that if resources are limited and if population growth is manifest only in underdeveloped and poor nations, then surely it is time to cry halt to the advancing numbers

of ill clad and hungry coevals on this one earth. The debate on this theme is primarily between the neo-Malthusians and the structuralists. In the following pages we shall highlight only the salient features of this dispute in order to understand, in greater depth, the relationship between poverty and overpopulation.

In 1974, the World Population Conference in Bucharest provided a forum for various ideological views regarding population growth and the need for its control. Speculation about the future of mankind has been a scholarly pastime for centuries. But in recent years, especially in developed countries, idle speculation has given way to urgent debate on current policies, as the conviction grows that the population on this planet can and must be controlled if problems are to be avoided.

The two policies most commonly advanced at Bucharest for reducing population growth in poor countries were "more rapid economic growth" and a more effective "family planning programme". The former, it is believed, creates the desire for small families and later provides the means.[35] The first view coincides with the "Cornucopian thesis" that asserts that, firstly, there

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35 Statements by different spokesmen at the World Population Conference are those reported in "Policies for People", People, vol. 1, no. 5, 1974, p. 18.

are limits to growth if science and technology cease to advance; though there is no reason why such advance should cease. So long as technological development continues, the earth is not really finite for technology creates resources. Secondly, even if scientific advances were to cease, the limit would still be far away. The earth is still huge relative to the demands made upon it by man, and the possibilities for substituting more abundant resources for scarce resources are so great that there is no reason why population and economic growth cannot continue for a very long time. The second view is linked with the "Limited thesis" which in turn is Malthusian. It asserts that there are limits to population and economic growth, limits which are imposed by the finiteness of the earth - by the fact that air, water, minerals, space and all usable energy sources consist of fixed stocks that can be exhausted, or flows that can be overloaded. It also asserts that these limits are very near, and if we permit ourselves to approach these limits too closely, death rates all over the world will soar.[36]

Finally, even if these limits are farther away than we think, population and economic growth ought to

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36 Ibid.

stop. For, after a certain point, already exceeded by the rich in both developed and developing countries, the quality of life may actually decline with the introduction of more and more material goods. Present wasteful consumption habits are using up resources that ought to be conserved for future generations, and if the rich would consume less, more would be left for the poor.[37]

The Bucharest Conference, originally viewed as an opportunity to consolidate and extend the gains made in securing international support for action on population issues, turned out to be a major setback for those favouring more vigorous measures to deal with rapid growth. The traditional terms of the debate shifted as many developing countries, no longer enthused with past development programmes, demanded a total restructuring of the international economic order.[38]

The debate between both these schools is today falsely polarized and has become unproductive. The relevant question is not whether to grow or not to grow,

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37 See the arguments of R.G. Ridker, and E.W. Cecelski, "Resources, Environment and Population : The Nature of Future Limits", Population Bulletin, vol. 34, no. 3, August 1979, p. 3.

38 Thierryde de Moutbrial, "For a New Economic Orders", Foreign Affairs, 54, 1975, pp. 61-78.

but how to redirect present and future economic output in ways that will better serve humanity. Population growth is the nation's most critical issue,[39] and there are physical constraints to population and economic growth, but most of them are distant enough to be managed by adequate planning, goodwill and international co-operation, provided we do not procrastinate.[40] For the present our most serious problems are political, social and institutional barriers.[41] A retardation in the growth of the human population is important because it reduces the volume and intensity of the problem, but by itself it cannot remove these short-term social constraints.

Contained in the "Growth thesis" view is an attitude of hostility and suspicion towards western sponsored programmes directed at population control.[42] Arguments for urgency in global population control are frequently found in messages emanating from government agencies, and such foundations and organization as the

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39 D. Banerji, "Letter to the Editor", Times of India (New Delhi), May 8, 1981.

40 Ridker, op. cit.

41 See Banerji, op. cit.

42 D.H. Meadow, at al., Limits to Growth : A Report from the Club of Romes Project on the Predicament of Mankind, London: Pan, 1975.

International Planned Parenthood Federation (IPPF).[43] These statements stress the extreme poverty of nations in the third world and claim that fewer mouths to feed means more food for each. It is their endeavour to demonstrate the economic development of a rapidly growing population is inhibited by the more immediate task of simple survival. A high-fertility population has large families and a lower proportion of productive workers. There is a greater demand for expensive services (e.g. schools) and this cuts into savings for crucial investments for the future. There is a constant reference in such arguments to jobs, pollution, energy shortages, crime and the scarcity of opportunities, in order to impress upon the public the significance of population energy limits. Equal sharing becomes social suicide if the average amount available is not enough to maintain life.[44]

4. The Ideology of Population Control

A plethora of studies belonging to the modernization theory school vociferously point to the dangers inherent in continuing population growth. Social disorder, alienation and a general malaise, they believe, are likely to be the outcome of such a development. International

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43 Ibid.

44 Ibid.

banking agencies stipulate, while allocating funds to poor countries, that they take drastic measures, often coercive in nature to check population growth. A microscopic look at the statements made by such international institutions as Ford and Rockefeller Foundations, the Population Council, IPPF, AID, World Bank, would indicate, however, that such philanthropic considerations have been basically motivated by the fundamental self-interest of these organizations and their allied countries.[45]

It is contended by these organizations that world resources, including food, are limited; that there is a "population explosion" in the third world and that the poorest countries have the highest rate of population growth and hence it is the poor who are responsible for the consumption of world's resources.[46] However, World Bank figures show that on an average the one billion people who reside in countries with per capita incomes below 200 dollars consume only about 1 per cent as much energy per capita as the citizens of the United States who consume about 35 per cent of the world's total

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45 R.M. Park, "Not Better Lives, Just Fewer People : The Ideology of Population Control", International Journal of Health Services, vol. 4, no. 4, 1974, p. 692.

46 Susan George, How the Other Half Dies, London: Penguin Books Ltd., 1980.

resources. And yet, in terms of economic assistance as a percentage of Gross National Product, the United States ranks 14 among the 16 developed donor nations. Or for that matter, a mere 2.5 per cent land owners with holdings of more than 100 hectares control nearly 3/4 of the land of the world with the top 0.34 per cent controlling over half. How does land distribution, the ratio of population to land (density) and hunger correlate? Indeed, if a comparative study of China, South Korea, Taiwan and North Vietnam is undertaken, and if the ratio of the crop land to agricultural population is calculated across territory, we will find that these four countries have the least land per person of all the countries in Asia. In China, the figure is 0.13 hectare per person, in North Vietnam 0.1 hectare, in South Korea 0.07 hectare and in Taiwan only 0.06 hectare. The figures for India, Pakistan, Bangladesh and Indonesia are 0.30 hectare, 0.40 hectare, 0.16 and 0.15 hectares, respectively.[47]

The stark reality of hunger and prevalent poverty is a function of the structure and patterns of landholdings rather than the result of uninhibited population growth.[48] The correlation between density of

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47 George, op. cit., p. 65.

48 Ibid., p. 58.

population and actual food supply is also not that simple. Famine conditions exist in Bolivia which has five inhabitants per square kilometer as well as in India which has 172 inhabitants per square kilometer, but curiously enough famine conditions do not exist in Holland where there are 326 persons per sq. kilometer. As for availability of crop land per person, it is 0.63 hectares in Bolivia, 0.03 hectare in India and 0.06 hectare in Holland. And yet, while on the one hand Indians and Bolivians are the victims of chronic starvation, Holland on the other hand not only meets its required needs but exports food items as well. The most obvious and final example that negates the proposition that population growth is directly correlated with hunger is China. China experienced famine practically every year when it was a country of 500 million people. Today, on the contrary, it provides over 2300 calories per day per head to a population of over 900 million.[49] The point to be stressed, therefore, is that more than anything hunger and population reflect the failure of a political and economic system.[50]

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49 B. Chattopadhyay, "Notes Towards an Understanding of the Bengal Famine of 1943", CRESSIDA Transactions, vol. 1, no. 1, Summer 1981, p. 112.

50 Banerji, op. cit.

However, it is not enough to prove that population control is another component of imperialist foreign policy or investment interests but rather the vital questions are what is in the interests of the working people of the underdeveloped societies and consequently what measures can be enunciated to realize these interests? The school of thought that has prevailed in recent times about hunger and its eradication has been a handmaiden of the official ideology of the USA and of international developmental agencies. The solutions proposed have been more or less technocratic and while they have not universally excluded the social dimension, the social order has been primarily taken as a "given" to be managed with the least possible interference.[51] An alternative school of thought has attempted to countervail this ideology with a reformist approach based on the moral responsibility of individuals. This is epitomised by OXFAM's "Fast for a World Harvest" slogan. Such privately sponsored efforts are a variant of Schumacher's,[52] "Small is Beautiful" technology. Both schools regard the question of hunger as an insoluble

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51 Park, op. cit.

52 See E.F. Schumacher, Small is Beautiful : A Study of Economics as if People Mattered, London: Blond Briggs, 1973.

factor and thereby obviate the need for profound and fundamental changes in the social order. What is flabbergasting is the heavy emphasis laid on nutrition studies which aim at discovering how desperately poor people can be better nourished even while they remain at their abysmally low level of survival. George, Joseph Collins and Lappe[53] have made attempts to debunk the official methods used by official agencies which place the onus of underdevelopment and poverty on the fickleness of nature, the incompatibility of population and resources and sometimes on the backwardness of traditional agriculture. George and Collins have emphatically argued against such simplistic notions and have attempted to prove that hunger has its roots in the social and political order of the time and that only radical alterations can solve this prodigious problem.[54] These authors convincingly show that by any conceivable measure of sufficiency, the present agricultural system can produce enough food to feed the world's hungry. Collins and Lappe have noted that the agricultural resources of Bangladesh (an archetype of a country whose

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53 F.M. Lappe and J. Collins, Food First : The Myth of Scarcity, London: Souvenir Press, 1980.

54 George, op. cit.

population has simply overwhelmed its process) are among the best in Asia - it has twice the cultivated land area per person as does Taiwan. Bangladesh's alluvial soil assures it crop land second to none in the world.[55] In addition, it has adequate potential water supplies even in the dry season, an ideal climate for year-round cultivation which allows for three harvests a year of rice, and inland fishery resources that according to research undertaken by the Food and Agriculture Organization, are "possibly the richest in the world".[56] The real problem is the social and political structure of concentrated wealth which discourages efficient farming and makes the majority of the people so poor that even during the 1974 famine an estimated four million tons of rice were stocked up for want of buyers.[57] The salient feature of the technocratic approach is its narrow focus on increasing production and reducing population growth. Most such programmes are largely based on relatively

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55 For total land mass arable land, see Food and Agriculture Year Book, 1972. See also K. Gough, "The Green Revolution in South India and North Vietnam", Monthly Review, vol. 9, no. 8, January 1978, pp. 10-12.

56 Ibid.

57 For Bangladesh famine see, S. Raymer, The Nightmare of Famine, National Geographic Idem, 1974.

expensive technology accessible to better-off farmers who because of political and economic dominance command control over inputs, credit facilities and agricultural infrastructure.[58]

5. "Green Revolution" not so "Green"

Take for example, the case of the Green Revolution, economically, the Green Revolution far from being revolutionary was an extension of business as usual. Like the "technological revolution" and agro-businesses in the metropolis of the imperialist system, the Green Revolution in the Third World today is the contemporary manifestation of a process of capitalist development that had begun long ago.[59] It has outcompeted and physically disabled poor farmers. The potential ecological dangers of the Green Revolution to India - an extension as it is of the capitalist industrial technological revolution - may also be speculated upon.[60]

It is often argued that occurrences such as intensive droughts and food shortage in a State like

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58 See Gough, op. cit.

59 A.G. Frank, "Reflections on Green, Red and White Revolutions in India", Economic and Political Weekly, vol. 17, no. 3, January 20, 1973, pp. 119-24.

60 Far East Economic Review (Hong Kong), June 17, 1972, p. 17.

West Bengal are apparently the result of over enthusiastic Green Revolution irrigation schemes which have interfered with underground water levels and have upset the ecological balance.[61] Heavy emphasis on such industrially manufactured inputs as fertilizers, pesticides, etc., has increased the dependency on transnational agro-business firms who have developed vested interests in the agriculture sectors of countries in the third world.[62] Fostering such dependency and bolstering the existing social order in the Third World is an important function of these technically oriented developmental programmes and even of such a phenomenon as direct food aid. International AID programmes not only function in collaboration with these agro-business concerns but also shore up the power and wealth of local elites. George has given a comprehensive account of the United Nations' Industry Cooperative Programme which archestrated business participation in the 1974 World Food Conference along with the World Bank group of Development Agencies (IBRD, IDA, IFC). These have financed massive rural development projects all over the world.[63]

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61 Chattopadhyay, op. cit., p. 112.

62 Larry Casalino, This Land is Their Land, New York: Rampart Press, 1977.

63 George, op. cit.

The orientation towards cash crops and the highly skewed distribution of landholdings characteristic of world agriculture is a colonial legacy, continuously reinforced by the economic domination of the poor by the rich. Production investment tends to concentrate in cash crops for export which shackles the Third World to the vagaries of an unstable global market structure. Such production is usually capital-intensive, employing modern labour-saving technology on relatively large tracts of land, with the paradoxical result that more workers are displaced than employed.[64] In India, one could perhaps also say, as Collins does that one of the reasons for rapid tractorisation in the late 60s was not the desire to increase efficiency, but to find an opportunity to get rid of labourers.[65]

However, most criticism of the existing developmental programmes or agro-businesses does not adequately explain the economic and social processes of which they are an organic part. In its over-enthusiasm, it holds

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64 Frank, op. cit. Also see F.F. Clairmonte, "United States Food Complexes and Multinational Corporations: Relations on Economic Predation", Economic and Political Weekly, Special Number, October 1980, pp. 1815-30.

65 See for example, G.S. Bhalla and G.K. Chadha, "Green Revolution and Small Peasants: A Study of Income Distribution in Punjab", Economic and Political Weekly, nos. 21 and 22, May 22 and 29, 1982.

imperialism responsible for all underdevelopment. This is like putting the cart before the horse. In brief, resources do exist to produce the food which could potentially solve the problem of hunger, but they are not being used in this way because of the inequitable distribution of wealth within the social order. Subsequently, the preponderance of hunger in the Third World is primarily due to the preponderance of people who neither control the resources to produce nor have the purchasing power.[66]

A skewed pattern of land-holdings as a source of income and the process by which this is aggravated in many countries is no doubt a major contributor to the mal-distribution of income in the hungry rural Third World societies. Economic development, which earlier had facilitated rapid population growth in Europe was "artificially arrested" in India by the requirements of the metropolises and by the social and economic conditions existing under imperialist rule.[67] The real cause of hunger is not simply overpopulation but under productivity, which in effect is the result of the existing social and economic structure.

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66 George, op. cit.

67 R.P. Dutt, India Today (Calcutta), Edition, 1970.

Whither Family Planning?

If this much is conceded, then the question of what determines household size needs further probing to show what are the causal factors that determine the number of children in a family. The desired family size normally depends upon the role and function of children in various strata. In India, which is predominantly agriculture and where 40 per cent of the population lives below the poverty line, and where the family often teeters on the brink of extinction, the role and function of additional children is negligible. Too many children are an additional burden on the family. The utility of additional child labour on marginal family farms is also questionable.[68] Besides, the costs of rearing and upbringing additional children that the parents will have to undergo are likely to be beyond their capacity. In such families extra children, rather than being considered a contributor to the economic prosperity of the household, often become a severe burden.[69]

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68 For example see K. Bhardwaj, Production Conditions in Indian Agriculture, Cambridge: The University Press, 1974; and A.K. Sen, Employment Technology and Development, London: Oxford University Press, 1975.

69 Mueller, op. cit.

It is still not clear, as shown in earlier chapters, whether the poor produce less due to their lower per capita consumption. Government policy is undoubtedly morally responsible for both lowering IMR and for increasing the standard of living of a desperately poor nation. If the fertility rate among the poor is high a reduction in the IMR will naturally increase population. But IMR is not merely a medical or technological exercise but also involves a concomitant rise in standards of living, which, given the current logical process of economic development in India, would probably lead to the break up of household as a unit of consumption and production, but at higher levels of living. If our arguments in previous chapters are at all tenable, then this in turn would be the only viable way of checking the population growth. It seems to us at this point that the two major thrusts of any major policy in India should be towards raising the standards of living and lowering the IMR. This might seem a pedestrian observation. But we believe, that the consequences of it are certainly likely to be different as it is premised on the following observations:

(a) That poor people tend to have smaller families.

(b) That prosperous families above subsistence level in rural India are less motivated towards family planning and indeed also have larger families.

(c) That the world's resources are consumed disproportionately by a small prosperous minority at the expenses of the large majority of the indigent masses.

The Family Planning Programme, in the light of all this, should also concern itself with devising ways and means by which nature's resources can be more equitably distributed. And more importantly, the Family Planning Programme should try to focus on how the size of prosperous rural families can be reduced, if numbers are a major consideration.

This does not mean that the entire family planning machinery should be disbanded. Family planning services should be offered to all those who desire it and if the IMR is reduced then the drudgery of bearing children might also be reduced. This would definitely add to the quality of life of the poor working mothers who form a substantial part of the nation's population. But even so, our view would be that population seems excessive only in poverty-striken conditions and our

tentative advice would be to shift resources and manpower in the population programme from trying to motivate, induce and propagandize family planning, to the provisioning of family planning services and the setting up of maternal child health care services at all levels in our society.

The population control strategy in operation today in India and elsewhere uniformally seeks to retard fertility by changing people's past attitudes and by building new awareness. However, there is no attempt made to change the underlying reasons responsible for their current choices. Current population programmes using social science methods for selective attitude correlation and behaviour modification are based on KAP (Knowledge, Attitude and Practice) studies which seek to measure the popularity of the programme.[70] Propaganda based on the above claims that population is the cause of people's problems. The mass media is used daily to advertise the claim that large families are the source of these problems. There is no mention of landlords, industrialists or foreign investors. Besides, for many people, doing something

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70 One may recall particularly the different Family Planning camps especially much publicized Earnakulam Camp which was declared extremely successful by Government. See in this connection Banerji, op. cit. Different KAP studies also be seen in K.G. Rao, Studies in Family Planning, New Delhi: Abhinav Publications, 1974.

meaningful about the overwhelming problems afflicting metropolitan cities like Calcutta, Jakarta or Manila, is to get tough with the urban squatters and slum-dwellers. Instead of encouraging collective consciousness and action on real problems confronting people, the ideology of population control instead proclaims the goal of an individual to be: "Have a small family and get ahead". The problem with the family planning programme and the associated communication infrastructure is that these models are imported from Western developed countries.[71] That is, these models are obviously based on the experiences following industrialization in Europe, North America and Japan which led to an automatic decline in fertility. This is, however, not expected to be repeated in Third World countries. In India we find on the contrary that the poor have small families but have not got ahead. Therefore, it is not small families as such that are the cause of economic prosperity. There are more legitimately an indicator of economic development. In other words, small families have differential valencies at different stages of development. This leads us directly to the theme of our next chapter.

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71 See Banerji, op. cit.

CHAPTER IV

POPULATION AND DEVELOPMENT

1. Population Growth and Social Development

Concepts like "population policy" and "population planning" are new. Historically and traditionally, immigration has been the only dominant demographic phenomenon over which policy used to be consciously debated and adopted. Today immigration continues to be a vital process in some geographical regions, but other demographic processes are now more explicit and vital.

"Population policy" is understood by some to mean an organized effort by government to affect the size of population, its growth, distribution or structure.[1] This may be called a "narrow" definition in the sense that it includes only those actions taken with conscious demographic intent. Others believe that a broader definition is more appropriate because a narrower one excludes the fact that government actions taken for non-demographic reasons may have major demographic consequences. The broader definition would include all government policies

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1 See Bernard Berelson, "Population Policy : Personal Notes", Population Studies, vol. 25, no. 2, July 1971, pp. 173-82.

and actions that affect, either directly or indirectly, demographic processes. Although broader definition runs the danger of being all-inclusive to the point of meaninglessness, it has the virtue of making policy-makers aware of the need to consider the demographic consequences of their decisions.[2]

By the end of 1973, 33 developing countries had officially adopted a policy that aimed to reduce population growth or the birth rate and had supported family planning for economic reasons, as well as on health and humanitarian grounds. An additional 30 developing countries supported family planning for non-demographic reasons. As of 1973, 44 developing countries had national family planning programmes. Yet, when one examines their economic development plans, a curious fact emerges very clearly: a disjuncture exists between economic planning and population planning. Population policy is most often seen in its narrowest sense as fertility reduction, and therefore consists of little more than a family planning programme.[3]

Development - What Does it Mean

Stampler in a study of 70 national development plans (almost all of them cover a five year period between

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2 Ibid.

3 M. Stampler, "Population Policy in Development Planning : A Study of 70 Less Developed Countries", Report on Population Family Planning, no. 13, May 1974, p. 4.

1965 and 1972) found only 27 countries that recognized the population problem in their development plans. Very few countries considered in their development plans the effect of the demographic trend on even relatively short-term needs and demands in different sectors.[4] The following table lists eleven general types of problems that were recognized in the order of frequency with which they were mentioned:

TABLE 4.1 : TYPES OF PROBLEMS RECOGNIZED IN THE ORDER OF FREQUENCY

S. No.	Types of Population Problem mentioned	Total No. of countries (of 70 studies)
1	Economic Growth reduced by population growth	19
2	High rate of population growth (in and of itself)	18
3	Unemployment	18
4	Increasing school age population	16
5	High Dependency ratio	
6	Population pressure on health services	15
7	Population pressure on social services	12
8	Population pressure on housing	12
9	Population pressure on agriculture	5
10	Decline in individual standard of living	4
11	Population density	3

Source: Maxwell Stampler, "Population Policy in Development Planning : A Study of Seventy Less Developed Countries", Report on Population/Family Planning no. 13, May 1973, p. 5.

4 Ibid., p. 4.

On population and development there are two popular schools of thought. One believes that industrialization produces an ethic that limits family size. The other school believes that family size is large in non-industrialized societies for rational reasons. Both these views have to be discussed in the Indian context, as India is industrializing and yet not an industrial society.

Most definitions of development stress that it means increasing the rate of economic growth over what it otherwise would have been. One of the basic objectives of development is to raise living standards. A second developmental goal is a greater degree of equality in the distribution of income.[5] This usually means increasing the availability and quality of health care, education, nutrition, employment, housing and essential services. Economic development refers to the problem of underdeveloped countries. Development is a discontinuous and spontaneous change that for ever alters and displaces the equilibrium that previously existed. Hicks[6] points out that the problems underdeveloped countries are concerned with are the development of unused and undiscovered resources; even though their uses are well known. Development requires

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5 Stampler, op. cit., p. 4.

6 U. Hicks, "Learning about Economic Development", Oxford Economic Paper, February 1957, p. 1.

and involves some sort of direction, regulation and guidance to generate and liberate forces of expansion and maintain them.

2. Development and Population

The focus of much demographic research in the last several decades has been on the analysis of the relationship between socio-economic development and fertility change. A general proposition that has emerged in both the historical and comparative contexts is that one response to major social and economic development is a decline in fertility rates and a transition to small family size.[7] While this proposition is indisputable in the long-run, critical questions remain relating to the short-run impact of socio-economic development on the onset and pace of fertility decline, and to the identification of specific mechanisms that link socio-economic development to fertility change.

Recent literature has provided a better factual basis for understanding some of the important relationships between demographic, economic, and social factors. Various studies have established that correlations do exist between certain factors, but they do not permit a conclusion concerning cause-effect relationship. Correlation between

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7 D. Friedlander, et al., "Modernization Pattern and Fertility Change", Population Studies, vol. 33, no. 2, July 1979, pp. 239-54.

fertility levels in developing countries and indicators of social and economic development have been established. This leads one to the hypothesis that an improvement in social and economic conditions is not likely to bring down fertility in any substantial way in developing countries until a certain threshold of development is achieved. It is only once such a developmental threshold is reached that fertility is likely to decline.[8] Deviations from this pattern have been noted in certain circumstances, such as cases where fertility has tended to be positively correlated with a rise in living standards.[9]

Various socio-economic theories have been brought forward in recent years to explain family size choices at the individual household level. Some of these have relied mainly on economic considerations, such as income, marginal utility of children, cost of bringing up children, including costs of opportunities foregone by parents; while others have given greater emphasis to factors of a more sociological nature such as income related to social status and individual preferences and tastes.

David Heer by using multiple correlation, correlated male fertility with net national product

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8 Ibid., p. 240.

9 Ibid.

per head and four other measures associated with economic development.[10] These measures include infant mortality rate, newspaper circulation per head (i.e. "literacy"), population density and percentage increase in energy consumption per head. The latter two were control variables selected because previous studies had chosen to correlate them with fertility. Heer attempts to test the hypothesis that economic development, while associated directly with an increase in fertility, at the same time gives rise to a set of circumstances that in turn produce a decline in fertility. Specifically he suggests that: (1) while the direct effect of economic development is increased fertility, the indirect effect is a reduction in fertility, (2) that increased economic development results is increased literacy and a lower infant mortality rate, and (3) that a high level of education and a low level of infant mortality in turn produces a decline in fertility. Based on his interpretation of statistical data, Heer found support for all the three hypotheses, suggesting specific direct and indirect causal relationships between economic development and fertility.

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10 David Heer, "Economic Development and Fertility Transition", in D.V. Glass and Revelle Roger (eds), Population and Social Change (London: Edward Arnal; New York: Crane Russel, 1972), p. 111.

2.1 Industrialization

One of the implications of the demographic transition theory, as originally conceived by Notestein,[11] is that industrialization and concomitant urbanization are preconditions to "development". Notestein placed stress on "urban industrial living" (in 1945) and later on "urban industrial society" (in 1953) as the contexts within which "social changes", leading to fertility decline, occur. Since then such terms have largely been replaced by "modernization", or near synonyms like "modern development processes", as it became clear that large numbers of people in the Third World were unlikely to be living in industrial cities for generations.[12] The demographic transition theory did allow for the possibility that the new way of life and consequently new fertility behaviour might be generated in the industrial urban areas and then be exported to non-urban and non-industrial populations either by exporting some of the institutions (such as schools, women's rights legislation or full market economy) or by simply exporting attitudes and ideas.

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11 F.W. Notestein, "Population : The Long View", in W. Schultz Theodore (ed), Food for World Chincago: University of Chicago Press, 1945, p. 39.

12 Ibid.

The theory did not specify whether the urban industrial melting pot, from which the changes were derived, had to exist in the same society or whether a "global economy" and "society" was beginning to operate that could export the necessary ideas and institutions from economically developed countries to the commercial cities of Asia and Africa and then on to the rural hinterland. (This has long been happening with regard to governmental institutions and more recently in terms of schools and political ideology.)

2.2 Literacy, Education and Fertility

Literacy is considered the single most important way side station to social and economic development, opening as it does for the individual the door to innovative ideas, options, and actions, releasing him from the known and traditional. According to Gunnar Myrdal the correlation between literacy rates, higher income, increased productivity and GNP has been clearly established.[13]

The primary determinant of the timing of the onset of the fertility transition is the effect of mass-education on family economy. The direction of the wealth

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13 G. Myrdal, Asian Drama, London: The Penguin Press, 1968.

flow between generations changes with the introduction of mass-education, at least partly because relationships between members of the family are transformed as the morality governing these relationships changes.[14]

Despite the relative lack of agreement on how many of the proposed associations might actually fit together causally and interpretatively, one factor appears in a great many studies and summaries as especially significant. This factor is education, or literacy which stands as its proxy in most historical demographic studies and in much contemporary research on developing countries.[15]

Kasarda[16] considers education to be an important factor in fertility analysis, but interestingly he relegates it to the position of a "background variable" along with urbanization and industrialization because he is uncertain whether its contribution is one of causation or correlation. Kasarda recognizes formal education as essential not because of its assumed intrinsic value and significance, but because of its influence on the

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14 J.C. Caldwell, "Mass Education as a Determinant of the Timing of Fertility", Population and Development Review, vol. 6, no. 2, June 1980, pp. 225-55.

15 H.J. Graff, "Literacy, Education and Fertility, Past and Present : A Critical Review", Population and Development Review, vol. 5, no. 1, March 1979, pp. 105-40.

16 J.D. Kasarda, "Economic Structure and Fertility : A Comparative Analysis", Demography, vol. 8, no. 3, August 1971, pp. 307-17.

quantity and quality of women's work. The more years of formal education women have, the more likely they are to be in the modern sectors of the work force, employed in a modern type of factory, office or other such employment. Education plays an independent role, but one that prepares, streams, or channels (mediates) female workers into modern kinds of work. His account of declining fertility stresses the role of female labour force participation outside the home. Education, while still important, is reduced in its significance.[17] This seems to us to be a more realistic tack to take. It draws increasing attention to the access now to areas that were hitherto not available without education. These areas incidentally introduce a style of life that makes the rearing of too many children somewhat disabling. By arguing thus one is able to overcome idealistic conceptions of education as a pure motivator.

Education may also lessen the price of alternative goods in relation to children by improving the income earning chances of women and thus increasing the cost of child rearing. Compulsory education may also increase the cost of children by reducing their possible

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17 Ibid., pp. 311-17.

contribution to family income.[18] In terms of tastes, education may reduce the desire for children by encouraging new life-styles that compete with traditional values that encouraged large family size, as well as by liberating women's life style. Finally, education may contribute to higher standards for child care and child rearing, by both raising the cost of children and by emphasizing quality over sheer numbers.[19] Easterlin by using economic theories and more structural and psychological approaches to modernization, sets attitudinal shifts within the context of socio-economic transformation and importantly places the role of education well within the larger perspective of "change" and "development". The overall emphasis lies in accounting for fertility decline through lower desired family size; the stress falls on regulation of opportunities and changing (motivational) relations among cost, demands, and alternatives.[20] Graff however holds that Easterlin's proposal is empirically untested and

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18 R.A. Easterlin, "The Effect of Modernization on Family Productive Behaviour", Population Debate : Dimensions and Perspective of the World Population Conference, New York: United Nations, 1974, vol. 2, p. 269.

19 Ibid.

20 Ibid.

that his work remains outside his theoretical excursions. His conceptualization about education's contributions remains loose. The relative failure of a family limitation and planning efforts in much of the developing countries should make us less than sanguine about some aspects of his formulation.[21]

In order to evaluate the relationship between economic development and the impact it has on changes in birth rates David Heer[22] offers an integrated checklist approach, in which education figures most directly with regard to number of births. Heer points to the rising cost of children's longer stay in school and the cost to parents of continued dependency and holds that this contributes to fertility decline. He does not mention at all the effect of education on either parent, although his analysis includes many of the usual correlates of increasing level of schooling. It is the effect of higher cost of children's schooling, a simple and direct factor, that is important in his explanation, and not education per se or enlightened awareness as such. Sweezy contends that education is not an important factor, but that income change and the "shifting attitudes" that accompany it and the "direction of the

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21 Graff, op. cit., pp. 116-17.

22 Heer, op. cit.

expenditure" by the parents are more major factors. The World War II baby boom in any case remains an event that still seriously challenges most fertility explanations.[23]

Schultz considers that education of parents, especially that of mothers, is an omnibus proposition. It "may" affect the parent's preferences for children, the earnings of women who enter the labour force, the productivity of mothers in the work they perform within the household, including the rearing of children and the incidence of child mortality, and it undoubtedly affects the ability of parents to control the number of births. But Schultz warns: "The task of specifying and identifying each of the attributes of parent's education is beset with analytical difficulties which continue to plague the economic analysis of growth in coping with the advances in technology."[24]

To conclude, it is often uncritically accepted that the industrialized society encourages small families. The reasons advanced are the increasing rate of literacy

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23 Alan Sweezy's discussion quoted in Graff, op. cit.

24 T.W. Schultz, "The Value of Children : An Economic Perspective", Journal of Political Economy, vol. 81, no. 2, part 2, March-April 1973, pp. S2-13.

and education which jointly lead to a break in tradition. As a result a new ethic is created.

But Kasarda,[25] whose approach is more guarded and cautious than many others, believes that education does not play an "independent role" but plays the role of a "background variable". Hence education and literacy alone are not responsible for small families. We believe Kasarda to be correct in his formulation as very often association is mistaken for causation. The reason perhaps why it was so readily assumed that education "caused" smaller families and was not merely "associated" with smaller families was because it was also concurrently assumed that the poor who were illiterate were responsible for overpopulation. Let us in the following pages examine the important social factors that bring about a small family. Moreover if a closer examination of Indian data is undertaken, then it will be found that family size decreases directly with economic status. Small families can therefore exist among different economic groups in a society, and can also become the dominating trend at different stages of social developments. Once we are able to overcome the seductive

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25 Kasarda, op. cit.

appeal of literacy leading directly to small families, we can perhaps better appreciate the social factors that are pertinent to the existence of small families. Kasarda helps us to overcome this popular view, and also indicates to us, thereby, the limits of exporting through literary an ethic conducive to small families.

3.1 Family as a Unit of Production and Consumption

In our previous chapters we made the point that the assumed relationship between high family size and poverty can be faulted on several points -- empirically, rationally and logically. Other things remaining the same, the larger the size of the family, the lower will be its level of living. This is especially true when large families have a high proportion of child dependents as a consequence of high fertility. The focus in this chapter will be mainly on the reproductive behaviour of those families that are small. With the help of received literature we shall try to highlight the following:

(1) What is the most important characteristic of a small family?

(2) Where in India are such families found?

(3) Can such families be related to stages of development?

Although it is possible to detect some change in Caldwell's[26] argument over time, the family has continued to occupy a central theoretical position in his work. Caldwell has in recent years become a prolific writer in this field. Caldwell's view is a variant of the Marxist position that each mode of production has its own economic and dependent demographic law. He stresses the centrality of transformation in the nature of the family as an economic unit in understanding the rationale behind the shift from high to low fertility. Familial modes of production (such as in traditional peasant economies) are characterized by relations of production between kin, that endow the more powerful or the decision-makers with material advantages. These advantages are derived from a net flow of resources within the kin group from the young to the old. High fertility is advantageous to the most powerful or senior members

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26 See J.C. Caldwell, "Towards a Restatement of Demographic Transition Theory", Population and Development Review, vol. 2, nos. 3-4, 1976, pp. 321-66; and "A Theory of Fertility : From High Plateau to Destabilization", Population and Development Review, vol. 4, no. 4, 1978, pp. 533-77, and most recently, "The Mechanism of Demographic Change in Historical Perspective", Population Studies, vol. 35, no. 1, 1981, pp. 5-27.

of the group, and as long as the internal relations of the familial mode of production remain in tact fertility will not be restricted. The destruction of the family mode of production and its replacement by the capitalist mode of production provide the conditions under which wealth flows no longer from young to old; and hence children are no longer seen by parental generations as an asset to be maximized.[27]

Without entering into an argument over the conceptual validity of Caldwell's "familial mode of production" we can certainly say that such a mode of production does not hold good for Indian conditions. It is, therefore, useful to improvise upon Caldwell, as his theory provides useful insights. We feel it is better to use the expression "family as a unit of production and consumption". Also the familial mode of production is apparently as oblivious to external forces as is Chayanov's[28]

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27 Ibid.

28 Chayanov, a Russian economist, advanced the theory of peasant economy. It is founded upon the idea of establishment of an equilibrium between the satisfaction of wants and the disutility of efforts on the family farm. The equilibrium point for a particular farm is determined by the ratio of consumers to the workers in the farm family. In due course of time the family farm tends to split up into newer units and finally disintegrates due to external forces. See A.V. Chayanov, The Theory of Peasant Economy (eds), Thorner, D., Kerbley, B., and Smith, R.E.F. (Homewood: Illinois, 1966).

peasant. Taking inspiration from Caldwell's study our argument may then be stated as follows: As long as the family is a unit of production and consumption there is no strong motivation to practice family planning.

But this argument, as we shall hope to show, does not operate with respect to the most populous categories in India, viz., the poor landless labourers, and the subsistence farmers. Poor people tend to disperse as a family unit. At subsistence level poor people struggle to maintain the family unit. It is only the rich who can easily maintain a family unit and thus have less pressure on them to reduce family size. This is important to remember for it is also suggested that IMR depends on total consumption of the family and hence on family size over and above per capita consumption.[29] So that if low consumption rate were not enough to limit family size, the correlation between small families and lower total consumption unit at the family level and the presence of high IMR also makes it difficult to believe that the poor are responsible for the existing overpopulation.[30]

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29 N. Krishnaji, "Poverty and Family Size", Social Scientist, vol. 9, no. 4, November 1980, pp. 22-35.

30 Ibid. See also P.B. Gupta and C.R. Malaker, "Fertility Differentials with Level of Living and Adjustment of Fertility with Birth and Death Rates", Sankhya, 1963. They argue that as proportion of expenditure on buying items in monthly food expenditure (PLIF) increases fertility increases. They begin to fall only at very high levels of living.

The Mysore Population Study[31] also indicates that IMR is highest among the class of those "working on land" i.e. presumably among agriculturists. Among cultivators (owners of land or permanent tenants), IMR is higher in respect of those with "less land", than it is among those with "more land". While fertility differences are not significant between the two cultivator classes, the level of fertility among those working on land is significantly lower. If we interpret the class of "working on land" as class I of Rao's[32] classificatory scheme, the "people with less land" as Class II, and the "people with more land", as class IV, then things become more clear.

Similarly data collected under the auspices of the agricultural labour enquiries, from different regions of India, show that "agricultural labour" households have the smallest average size among the agrarian classes (consisting of tenants and land owners apart from labourers).[33]

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31 United Nations, The Mysore Population Study, New York: UNO, 1961.

32 S.K. Rao, "Reducing Growth Rate of Population through decline in Mortality", Economic and Political Weekly, vol. 14, no. 49, September 21, 1974, pp. 1893-96.

33 Rural Manpower and Occupational Structure, Ministry of Labour, 1945, Report of the Second Agricultural Labour Inquiry, 1956-57, vol. 1, All India Labour Bureau.

T.N. Krishnan[34] has noted that among agricultural labour households, "it is the interaction of aggregate supply of agricultural labour and the aggregate demand for agricultural labour which will determine the agricultural labour household's income". He also points out that in peasant economies the aggregate demand for agricultural labour is inelastic, and thus an increase in labour supply reflects itself in a reduction in the number of days of work a household is able to obtain. This also holds true under conditions of capitalist agriculture, where the number of days of work is further reduced, as in Punjab and Kerala today, by the use of labour saving devices, such as tractors.[35] Krishnan goes on to note that among agricultural labourers an increase in household labour supply brought about by an increase in family size will not lead to an increase in household income, but will result only in an increase in household subsistence requirements. Since this increase in subsistence requirements cannot be met, the average

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34 T.N. Krishnan, "Toward a General Theory of Family Fertility and Economy", Preliminary Working Paper, New York, 1980; appeared in J.P. Mencher, "The Lessons and non-Lessons of Kerala - Agricultural Labour and Poverty", Economic and Political Weekly, Special Number, October 1980, pp. 1782-1802.

35 Ibid.

consumption and level of nutrition of the agricultural labour households will decline.[36]

Data from National Sample Survey (Survey on Land Holdings) reveal that as the size of the ownership holding increases, so does the household size.[37] Also data collected by the debt and investment in rural India show a strong positive relationship between family size and total asset holding (or wealth) of households.[38] Finally the National Sample Survey data on consumption expenditure indicate that if instead of per capita expenditure, total household expenditure is used as a classificatory variable, then household size and household expenditure are positively correlated.[39]

In whatever way one defines the poor, they are found to always have small families. It is with an

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36 Ibid.

37 For the 17th Round of National Sample Survey 1961-62, for example, the average household size increases from 2.71 in the lowest size class to 8.73 in the largest size class. (See tables with notes on some aspects of land holdings in rural areas in India) 17th Round (1961-62) NSS Report No. 144).

38 All India Debt and Investment Survey (1971-72), Reserve Bank of India, 1975; also quoted in Krishnaji, op. cit.

39 17th Round (1961-62) National Sample Survey, Report No. 134; also quoted in Krishnaji, op. cit.

increase in the size of land holdings that the proportion of joint-families increases,[40] raising our doubts again as to whether each child is an economic asset for a poor family.

3.12 Agrarian Change and Decay of Family as a Unit

The process of agrarian change promotes the nuclearization of families at one end of the peasant spectrum while at the same time co-ordinating (or rather retarding the decay of) the joint family at the other end. This can largely be attributed to the fact that land is still the most important asset in rural areas and investment tends to be largely land-related. The observed correlation between wealth and family size (or prominence of joint family) can be explained to a certain extent by looking at the family as a unit of investment also (and not merely of production and consumption). There are distinct economic incentives, following from direct investment in land as well as diversification of crop-related economic activity within the household, for keeping landed property in tact. Among labourer families, on the other hand, such incentives for keeping a family undivided are usually absent; this is true even

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40 Krishnaji, op. cit.

if we ignore the family as a unit of investment and consider it simply as a production and consumption unit.[41]

Average family size increases systematically as the size of the land holding increases. At the lower extreme of the land holding scale one may expect a high concentration of agricultural labour households and at the upper and a concentration of households in which economic activity is fairly diversified.[42] The corresponding demographic differentials consistent with the observed family size variations are likely to be high rates of mortality and partitioning at the lower end, and low rates of mortality and partitioning at the upper end. Fertility differentials are however likely to be narrow. They are specifically related to the size of the holding. This conjecture is based on data which show that the proportion of children hardly varies (about 4 per cent) across holdings.[43]

Other evidence available from received literature also shows that there is direct pressure on the means of

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41 Ibid.

42 Ibid.

43 Ibid.

consumption and subsistence among small peasant households. For example, Panikkar[44] has noted that the amount of work available for agricultural labourers has been steadily decreasing. According to all available indicators, employment has shrunk considerably as a result of the increase of the labour force and declining employment opportunities in agriculture and other sectors. According to Mencher,[45] the decrease in the amount of work available appears to be due to five factors: (1) the general depression of small-scale handicraft industries which has thrown other workers into agriculture; (2) general population increase; (3) changes in technology which decrease the demand for labour, such as tractors, rice mills etc.; (4) changes in orientation on the part of the middle and large land owners, the main employers of the landless labourers, who have become capitalist farmers, and are now determined to make do with as little of hired labour as possible, balancing out the

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44 P.G.K. Panikar, Dissent to the Report of the Kuttanad Inquiry Commission, Trivandrum, Government Press, 1971; also quoted in Mencher, op. cit., pp. 1785-6.

45 J.P. Mencher, "Agrarian Relations in Two Rice Regions in Kerala", Economic and Political Weekly, vol. 13, Annual Number, February 1978, pp. 349-66.

use of labour and profits; (5) increase in the landless categories as a result of 30 years during which significant number of people have lost tenancies.[46] It may be noted that "except in Punjab the minimum wages prescribed by state governments are not adequate to keep the agricultural labour-households above the poverty line".[47] Another study reports from Kerala, that the average number of days for which employment for male agriculture workers is available is 187 for Kerala, the lowest for any State.[48] In such situations then, where agricultural labourers are in a sense driven to the wall, there is no economic advantage in their having large families, though they may still want children. One is not talking here of biological factors, namely that natural fertility among the poor is likely to be low because of the low expectancy

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46 Ibid.

47 See Special Article, "Minimum Wages of Agricultural Labour", Indian Labour Journal, vol. 21, no. 5, May 1980, pp. 733-55.

48 A Report, "Agriculture : Sham of Minimum Wages", Economic and Political Weekly, vol. 15, nos. 24 and 25, June 1980, pp. 1044-45.

49 Mencher, op. cit., p. 1787.

of life, which implies a low average reproductive period for women.[50]

If this much is conceded, then we may examine the feasibility of small farms in the Indian context and see the extent to which they can explain overpopulation. We shall in the following pages observe how inefficiency of the small farm and life-cycle-mobility causes the small farm to vanish in due course of time leaving the land-holder landless which in turn further disintegrates the family as a unit of production and consumption. This will be another way of examining the paradoxical belief that the poor can afford to reproduce more,[51] because small farms are better managed.

4. Is a Small Farm Better Managed?

The results of a Farm Management Survey (FMS) carried out in the 1950s (in two selected districts of six states) revised in the Indian context the question of relative efficiency of small peasant farms -- a point that was so hotly debated in Russia before the revolution.

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50 K. Prema, "Lactation and Fertility", American Journal of Clinical Nutrition, vol. 32, June 1979, pp. 1298-1303.

51 See, for example, Mamdani, op. cit.; Banerji, op. cit., and Joshi, op. cit.

On the basis of this and other farm management research which has largely concentrated upon measurement of returns on different factors of production for farms of different sizes, it has often been concluded that there is usually an inverse relationship between size of farm holdings and agricultural productivity.[52]

But Bhardwaj[53] comments: Even if such an inverse relationship holds, based as it is on a static cross-sectional comparison, it does not provide a sufficient basis to judge the relative potentialities of different size groups. Bhardwaj and A.K. Sen[54] now agree that the only conclusion one can draw with any confidence from the literature on this subject is that the commonly expressed view that "there is an inverse relation between farm size and yield" must be treated very cautiously, for the analyses on which it is based are "shot through with confusion".[55] According to them some of the difficulties arise because of the problems of statistical

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52 See John Harris, Capitalism and Peasant Farming, Bombay: Oxford University Press, 1982, p. 152.

53 See K. Bhardwaj, Production Conditions in Indian Agriculture, Cambridge University Press, 1974. Bhardwaj's arguments also appeared in Harris, op. cit., p. 152.

54 A.K. Sen, Employment, Technology and Development, London: Oxford University Press, 1975.

55 Bhardwaj, op. cit.

aggregation, but perhaps of even more significance, is the muddling of net and gross acreages and comparison of estimates based on single crop with those based on total output.[56]

Bhardwaj has conducted an analysis of some FMS data and confirms that an inverse relationship does exist in many cases, when comparisons are based on the value of output per acre, though this relationship is not always statistically significant. However no systematic or statistical relationship appears, when the data are analysed for individual crops (though it is not clear whether her analysis was conducted on the basis of gross acreage or net acreage). It thus appears that the overall finding of an inverse relationship probably arises from differences in the intensity of cropping (i.e. from multiple cropping and the cultivation of more intensive crops) and that intensity of land use in this sense varies inversely with size of holding.[57] The conclusion is an important one, partly because it shows that the favourite explanation which seeks to explain inverse relationship in terms of better management and more intensive application of better inputs on smaller

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56 Ibid., and Sen, op. cit.

57 Ibid.

farms may be over-simplified.[58] The marginal households do not, apparently get as much back from their investment on land as do the farmers with holdings which are of sufficient size to enable them to meet their household requirements. This can be explained as the result of their relatively higher requirements of cash for running their farming operations.[59]

5. When Family Ceases to be a Unit of Production and Consumption

Once a family's land is reduced to a certain minimum - perhaps two or three acres in some circumstances, a bit more or less in others - then its members are perched on a slippery slope and are likely to lose more or all of their land. If there are two or three bad monsoons in succession, or a lengthy illness, or several costly marriages, they have no surplus to tide them over the thin line between survival and extinction. They must borrow money at high interest rates and frequently must eventually sell off their land, which is their most precious, most valuable and most readily saleable commodity.[60]

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58 Ibid.

59 Chayanov, op. cit.

60 D.G. Mandelbaum, "Some Effect of Population Growth in India on Social Interaction and Religion", in Marcus Franda, ed., Response to Population Growth in India : Changes in Social, Political and Economic Behaviour, New York: Praeger Publishers, 1975, p. 66; and D. Banerji, op. cit., and his Some Portraits of Village Poor and Others, (Centre for Social Medicine and Community Health, JNU, New Delhi, 1980).

Tribal people are especially vulnerable on this score. In many parts of India, as well as in tribal areas, the absolute number and proportion of landless labourers seems to be on the increase, while despite government efforts to implement land reform and land redistribution those families who have greater holdings, or those who are for other reasons relatively affluent, have been able to maintain or increase the amount of land they own.[61]

Most of those who are at the lowest levels of the caste hierarchy in a locality also form the lowest economic stratum, i.e., that of landless agricultural labourers. More and more villagers are falling into that category as former small-holders, now have no land or even tenancy rights. Some who belong to the landless category are also artisans whose crafts have now become obsolete. It is families of this kind, who in 1961 constituted an estimated 154 million to 210 million, who live in abject poverty today, i.e., at a level of Rs.200 per capita per year.[62] They constitute the 40 per cent

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61 J.P. Mencher, "Conflicts and Contradictions in Green Revolution : The Case of Tamil Nadu", Economic and Political Weekly, vol. 9, Annual Number, 1974, pp. 309-22.

62 W. Ladejinsky, "How Green is Our Green Revolution", Economic and Political Weekly, vol. 8, no. 52, December 29, 1973, pp. A133-44.

of the rural population who, in Dandekar and Rath's analysis, are not able to afford an average daily diet of 2,250 calories - the bare minimum for adequate nutrition under Indian conditions.[63]

Epstein[64] in her study of two villages (Wangala and Dalena) of Mandya District of Karnataka (1954-56), noted after revisiting these villages 15 years later:

> One manifest consequence is that the average size of the landholding has decreased despite a considerable expansion of cultivable land. Economic differentiation has considerably increased during the past 15 years: the poor have become poorer not only relatively but also absolutely. Work opportunity in or out of village are scarce and men and women from Dalena village, wander endlessly through towns and villages, searching for work just to stave off their own and their families' hunger. (T)he supply of labour in agriculture has increased much more than the demand, leading to a reduction in real wages which was facilitated by inflation. And about 50 per cent of the villagers do not have enough land to meet their basic requirement. These poor are caught in a demographic economic squeeze. 65

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63 V.M. Dandekar and N. Rath, "Poverty in India", Economic and Political Weekly, vol. 6, no. 1, January 2, 1971, pp. 25-48.

64 T.S. Epstein, South India : Yesterday, Today, Tomorrow, New York: Holmes and Meir, 1973, pp. 57-58.

65 Ibid.

Banerji[66] similarly, reports from his long-term study of nineteen villages, that people in these villages live in abject poverty, exploited by higher caste people and by those who control the essentials of life. As these ill-nourished people became hungrier still, their productivity declines because of illness and lack of strength, and they are likely to get fewer and fewer opportunities for work. Moreover, the demand for agricultural labour has tended to decline as land owners have put more of their land into subsistence crops to feed their own families and as they rationalize the cultivation of cash crops. The desperate state of the poor tends to make them clutch more tightly on to whatever they may have as a means of livelihood.[67]

The family, it appears, therefore, has ceased to be a unit of production for the large bulk of our society. The factors that have led to increasing landlessness and are responsible for this state of affairs are the inefficiency of the small farm and the depressing indent wage rate which forces farmers to migrate or become labourers.[68] Also, since as small uneconomic

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66 D. Banerji, Poverty, Class and Health Culture in India, New Delhi: Prachi Prakashan, 1982.

67 Epstein, op. cit.

68 See Bhardwaj, op. cit., and Harris, op. cit.

holdings their productivity is lower and the limits to their expansion are limited, the household, though it is a basic unit of production and consumption, tends to lose its confidence and viability.[69] It may also be added here that the Western example reveals that when the household ceases to become the unit of production and at a higher than subsistence level, family size again tends to come down.

Conclusion

It has been our contention so far that when the family is a stable unit of production and consumption, i.e., well above subsistence level, the desire to curtail the number of children is rather low. In India the bulk of the poor are labourers and hence the question of such a family units does not arise at all. We have further argued that even amongst those who hold land, a majority of our population operate very small and marginal farms, and in this circumstance too, large families are to the detriment of such households.

But families which are not units of production and consumption (or even precariously so) are not only

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69 Bhardwaj, op. cit., and Sen, op. cit.

found in countries like India where the developmental process has been thwarted by colonialism, but also occur at higher levels of living in industrialized societies. We learn from the European experience that with the development of industrialization and with the consolidation of capitalism, families steadily cease to be units of production and consumption and once again the family size is low. The added factors in Europe are low mortality, low fertility and late entry into marriage.[70]

It should also be borne in mind that raising economic standards is not really a question of a big push. In Chapter III we tried to point out the structural constraints to development in the developing world. Therefore, even if marginal and small farms are made more viable this might lead to an increase in population[71] if no concomitant structural changes are made to discourage

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70 See for instance R.M. Smith, "Family, Economy and Household Formation in England over Three Centuries", Population and Development Review, vol. 7, no. 4, December 1981, pp. 595-622. John Hajnal has noted the rules for household formation in Europe: (1) Late marriage for both sexes - 26 years for males, and 23 years for females, (2) After marriage the couple will live in a new household, and (3) youngsters often circulate between households before marriage. See John Hajnal, "Two Kinds of Pre-Industrial Household Formation", Population and Development Review, 1982 (forthcoming); also quoted in Smith, op. cit.

71 Friedlander, et. al., op. cit., and Heer, op. cit.

the family acting as a unit of production. If development is ever understood in such crude terms then it would not be surprising if development turned out to be the "worst contraceptive", thus upsetting the apple carts of many prognoses.

Decline in fertility must then wait for a thorough going change when social development discourages the family unit at a higher level of living. This seems to us to be the more humane alternative. The other alternative, as is perhaps evident in most parts of India, is that with the continuous decline in standards of living there exists a positive disincentive towards maintaining the family as an economic unit, which in turn tends to reduce the family size. This is an empirical fact, whether the outcome is rationally arrived at or not. Some consternation was expressed when the 1981 census figures showed that the growth rate was lower in so called "backward areas" of India relative to such forward areas like Kerala (which has a low IMR). We hope that our analysis will give the reader some indications as to why this has happened and thereby contribute towards changing the parameters of the discourse which has till now set the limits to a discussion on family size and population growth.

TABLE 4.2 : INTER-CENSAL CHANGE OF THE STATES

S. No.	States	Intercensal Change (per cent) 1961-71	1971-81
1	Andhra Pradesh	20.9	22.8
2	Assam	34.7	33.1
3	Bihar	21.3	23.9
4	Gujarat	29.4	27.2
5	Haryana	32.3	28.2
6	Himachal Pradesh	23.0	22.5
7	Jammu and Kashmir	29.6	28.4
8	Karnataka	24.2	26.4
9	Kerala	26.3	19.0
10	Madhya Pradesh	28.7	25.2
11	Maharashtra	27.5	24.4
12	Manipur	37.5	33.6
13	Meghalaya	31.5	31.2
14	Nagaland	39.9	49.7
15	Orissa	25.1	19.7
16	Punjab	21.7	23.0
17	Rajasthan	27.8	32.4
18	Sikkim	29.4	50.4
19	Tamil Nadu	22.3	17.2
20	Tripura	36.3	32.4
21	Uttar Pradesh	19.8	25.5
22	West Bengal	26.9	23.0

Source: P. Visaria and L. Visaria, "Population Science After 1981 Census : A Perspective", Economic and Political Weekly, Special Number, November 1981, p. 1731.

TABLE 4.3 : BIRTH RATE, DEATH RATE OF ALL THE STATES (1976-78)

States	1976-1978		
	Birth Rate	Death Rate	Rate of Natural increase
All India	33.3	14.5	18.8
Andhra Pradesh	33.2	14.0	19.2
Assam	31.3	13.7	17.6
Bihar	N.A.	N.A.	N.A.
Gujarat	36.5	14.3	22.2
Haryana	34.7	13.3	21.4
Himachal Pradesh	30.7	12.3	18.4
Jammu and Kashmir	31.9	11.5	20.4
Karnataka	28.3	11.6	16.7
Kerala	26.4	7.5	18.9
Madhya Pradesh	38.4	16.5	21.9
Maharashtra	27.5	11.5	16.6
Manipur	28.1	6.9	21.2
Meghalaya	32.6	13.2	19.4
Nagaland	21.4*	6.8*	14.6*
Orissa	32.6	15.5	17.1
Punjab	30.7	11.1	19.6
Rajasthan	34.2	15.0	19.2
Sikkim	N.A.	N.A.	N.A.
Tamil Nadu	29.8	13.7	16.1
Tripura	30.5	10.4	20.1
Uttar Pradesh	40.3	20.0	20.3
West Bengal	30.8	11.7	19.1

Notes: * For rural areas only

N.A. = Not available

Source: P. Visaria and L. Visaria, "Population Science After 1981 Census : A Perspective", Economic and Political Weekly, Special Number, November 1981, p. 1742.

CHAPTER V

TENTATIVE CONCLUSIONS

As we have been passing judgments all along on the family planning programme, on population specialists, on agricultural economists, and so on; and as we have even evaluated (in Chapter II) which side the family planning programme tilts towards, it is only proper that we ask ourselves the question now, in this concluding chapter, which side does this dissertation tilt towards? In our opening chapter, we had said that the starting point of our enquiry emerged from the somewhat uneasy feeling that poverty was associated with overpopulation figures because the poor are an unseemly sight, and because unfortunately, in this world, the poor clearly outnumber the rich. This is what Mamdani suggested in his famous book Myth of Population Control. Commenting on Paul Ehrlich's observation in Population Bomb that there were people, people, people everywhere in Delhi which "gave the scene a hellish prospect", Mamdani said: "The fact is that a hot summer night in Broadway in New York or Picadilly Circus in London would put Ehrlich in the midst of a far larger crowds....(W)hat disturbed him (Ehrlich) about the

crowd in Delhi was not its number but its quality, that is, its poverty".[1]

We operated within two broad categories, structuralist and neo-Malthusian, when we enquired which side the family planning programme of India tilted towards. When we adjudged the family planning programme as tilting towards neo-Malthusianism, it was quite clear that we were opposed to the neo-Malthusian theoretical formulation. Later, in Chapter III, in the sub-section entitled "Only One Earth" we gave further reasons why we believed that limits to resources and the causes of poverty were the outcome of the structural configuration of Indian society, and not just a matter of scarce resources being gobbled by teeming hungry millions.

But then we did not fall in line with most critics of neo-Malthusianism either. First of all we felt that even these critics did not discount the fact that the poor people indeed reproduce more. Secondly, according to many of these critics, poverty is the engine for actuating large family size,[2] and therefore it is quite rational ..

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1 Mahmood Mamdani, The Myth of Population Control : Family, Caste and Class in Indian Village, New York: Monthly Review Press, 1972, p. 14.

2 A.M. Basu, "Family Planning : The Number Goes on", Economic and Political Weekly, vol. 14, no. 14, April 1981, pp. 628-32; and K.N. Ninan, "Agricultural Labourers and Poverty", Economic and Political Weekly, vol. 17, nos. 28-29, July 1982, pp. 1169-72.

for the poor to produce more children, as every child is an economic asset. As if this were not enough, the high infant mortality rate too it is argued impels poor couples to reproduce more so that atleast a few children survive. Our contention was that it is not as "rational" for the poor to have a large number of children as is made out to be by these authors. This does not mean that the poor are always rational. We were only arguing within the discourse evoked by these authors. Our point was that in poor households children beyond the minimum required to give psychological satisfaction to the parents add to the burden of poor families, and the cost of raising children does not adequately compensate the parents later on as poor families tend towards nucleisation. Further the argument about high infant mortality rate is usually brought in a too generalized a statistical fashion without breaking it down into the stages of its operation. If we take two additional facts into account namely that 90 per cent and above of infant mortality takes place before the child is one year old, and also that the spacing between children is two to three years, even with high fertility rates, then a couple should with reasonable certainty know whether its child is going to survive once the first year is through and more so with every passing

year. We concluded therefore that if the "rationality" argument is to stand, more facts will have to be summoned in its support. As it is, there are enough areas of dubiety to make us skeptical about it.

So then if we are not with the rationalists nor with the neo-Malthusians, where are we?[3] For the time being we may say, that we go along with the structuralists as their framework is sufficiently broad to encourage an integration of diverse social factors which have differential influences, at discrete social stages, on family size, and also because this framework is not anathemic to the reality that the poor have in fact smaller families.

But in order to give the "rationalists" the widest possible latitude we integrated into our chapters an examination of peasant farming and kinship. It has often been argued by economists that a small farm is better managed because, regardless of marginal utility of labour evaluated under market conditions, every hand is pressed into service to yield more on the family farm. The "rationalists" could well use the argument in their

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3 In the opening pages of Chapter III we had drawn a distinction between the rationalists and the structuralists. The rationalist arguments are no doubt inspired by the structuralist grid and yet they are not the inevitable development of the structuralist critique of neo-Malthusianism.

favour though they have not yet done so. Anyhow, on close scrutiny of the theorem that small farms are better managed, and by relying on current literature on the subject, we found that this was not really so. What is more, we also discussed the pressures on the members of a small farm family unit which compel them to disperse in search of sources of employment. This reality again undercuts the point made by the rationalists that children are an investment for the future. They may be, and indeed they are, in prosperous agricultural households, but given the vicissitudes of a small farm, any investment of this kind is not only very risky but is perhaps empirically not viable.

Sociologically, however, this much can be said without running the risk of seeming ridiculous. As long as the family operates as a unit of production and consumption, and when this operation takes place at above subsistence levels, and when there is a guaranteed income flow in a few years from the young to the old then limiting family size may not be rational - on occasions positively discouraged. Sociologically, again we may place such units historically at a stage where industrialization has not struck deep roots and where capitalism has not transformed beyond recognition the labour process.

Sociologically, again, we are able to say that such families do not form the majority of our country for as India is industrializing and yet not fully industrialized, the pressures exerted by the dominant economic forces outside are still too strong for poor household operated family farms to be left unscathed. It is for this reason that we reformulated Caldwell's "familial mode of production" preferring the expression, "family as a unit of production and consumption". This jibes well with the conditions in our country, and at the same time provides us with a framework with which we can understand the forces attendant on nucleisation of families in our society.

Eventually we came around to where we started. The poor appear to be numerous, and seem to be multiplying more, primarily because there are more poor people than the rich. We suggested that if the "numbers game"[4] must go on, then greater attention should be paid to the large families of prosperous landed households. The obsession with the poor in all family planning efforts seems to us to be totally misplaced.

Are we then saying that there should be no family planning programme at all, and all efforts in this

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4 A.M. Basu, op. cit.

direction should be disbanded? Our answer (conveniently) is yes and no. The wastage of resources in trying to zero in on poor families to curtail their family size is empirically misplaced, and therefore unthinking. Obviously when the assessment of such wasted efforts is done, the experts do not blame themselves for their faulty understanding of the situation, but blame the poor for not being modernized in their outlook and for being weighed down by tradition.[5] This then prompts them to invest more money and resources on education, motivation, preaching and incentive-based programmes, which again do not amount to much. This indeed is a cruel wastage of resources,[6] and apart from creating positions for media experts, accomplishes precious little.

Would it not seem worthwhile after all, if instead of wasting resources so wantonly, and instead of having a blinkered understanding of poverty and over-population, the interested agencies tried to improve the

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5 See D. Banerji, "What Next in Family Welfare", Economic and Political Weekly, vol. 14, no. 20, May 19, 1979, pp. 876-77.

6 D. Banerji, "Review Article" of the book Family Planning under Emergency : Policy Implications of Incentives and Disincentives, by V.A. Panandikar, et al., Centre for Community Health and Social Medicine, JNU, New Delhi, December 1979.

quality of life by making maternal and child health care services and family planning services available to all levels of society, so that if children are protected by adequate child health schemes, family planning services may be made easily available to interested couples? There is no gain saying the fact that if and when couples would like to be "protected", the technological and service resources should be made available to them and most conveniently.

Yet this alternative approach does not seem to be making much headway. It has probably never even been entertained in policy making circles. Certain concessions have of course been made, such as the pronouncement that family planning should be integrated with maternity and child health (MCH) services, but the stress is always on family planning i.e. intervention in fertility, and not so much on the latter. There are possibly two reasons for this. The first is that the planners cannot of course appreciate the fact that the poor are not responsible for our poverty. This non-acceptance emerges from an ideological scape which thrives on self-interest and is staked on the present arrangement of authority, power and resources. To improve MCH schemes would mean activating the more privileged section of our society to

work in rural India, which is not an easy task; and to take away the stridency from the family planning postures would be tantamount to admitting that poverty today is not because of overpopulation. Even if such positions do not emerge in planning circles consciously, the range of alternatives available to legitimize and optimize the present state of affairs would make it well nigh impossible to think out anything else, much less to bring it into action.[7]

Our dissertation has therefore a very limited objective. Its primary aim is to examine how far the poor can be blamed for overpopulation. If the earlier pages have succeeded in raising doubts on what was to many a settled issue, then we think our objective has been fulfilled. This dissertation does not, however, claim to put forward a fool proof and a completely worked out position. But if it has even partially succeeded on the first count then further researches can be carried out to test some of our contentions at the empirical level. It might particularly prove to be useful to make a case study of households of different strata - the landless, the

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7 D. Banerji, Population Issues in Health, Population and Nutrition, Centre for Social Medicine and Community Health, JNU, New Delhi, July 1978.

marginal peasant and the rich peasant - and see why it is that family size increases as one goes up the economic ladder. The study will have to entertain such themes as infant mortality rate (IMR), cost of raising children, pressures on nucleization, as well as attitudes of parents. A study of this kind would have to be drawn out over a period of two to three years at least and might help to give more meat to some of the tentative conclusions that we have arrived at in this dissertation.

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