# STATUS OF WOMEN AND PATTERN OF FERTILITY IN INDIA: A GEOGRAPHICAL ANALYSIS

# DISSERTATION SUBMITTED TO THE JAWAHARLAL NEHRU UNIVERSITY IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE AWARD OF THE DEGREE OF MASTER OF PHILOSOPHY

### **SHARMISTHA DAS**



CENTRE FOR THE STUDY OF REGIONAL DEVELOPMENT
SCHOOL OF SOCIAL SCIENCES
JAWAHARLAL NEHRU UNIVERSITY
NEW DELHI
INDIA
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For Baba, Ma & Didi



# जवाहरलाल नेहरू विश्वविद्यालय JAWAHARLAL NEHRU UNIVERSITY Centre for the Study of Regional Development School of Social Sciences New Delhi-110067

### **CERTIFICATE**

I, Sharmistha Das, certify that the dissertation entitled "STATUS OF WOMEN AND PATTERN OF FERTILITY IN INDIA: A GEOPGRAPHICAL ANALYSIS" for the degree of "MASTER OF PHILOSOPHY" is my bonafide work and may be placed before the examination for evaluation.

> Sharmistha Das. (SHARMISTHA DAS)

FORWARDED BY

PROF. ASLAM MAHMOOD (CHAIRPERSON)

DR. ANURADHA BALINERJEE (SUPERVISOR)

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Sharmistha Das

Sharmistha Das

M.PHIL SCHOLAR
CENTRE FOR THE STUDY OF REGIONAL DEVELOPMENT
JAWAHARLAL NEHRU UNIVERSITY
NEW DELHI

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# CHAPTER 1

### CHAPTER - 1

### INTRODUCTION

### 1.1 INTRODUCTION

The concept of the status of women in society gained its importance at the international level after the first major United Nations Conference on Women held in 1975, and the subsequent efforts made by the world body during the decades that followed. This also emerged as one of the most debated topic among the various demographers, sociologists and anthropologists in the Indian scenario during the last few decades of the 20<sup>th</sup> century. Several research works have also been done on the multi-dimensional aspects and correlates of the status of women.

Status is a complex, dynamic and relative concept encompassing certain powers derived either from one's own achievements and/or from ancestors. The power is manifested in prestige and privileges along with rights, roles and autonomy for the independent action. Status literally means position in relation to others. The status of women, like the general concept of status, is a multi-dimensional and dynamic concept, which is considered on a relative basis. It comprises of the several dimensions like one's own legacy and achievements including money, materials, and merits, like styles, privileges and autonomy to take one's own decisions. The status enjoyed by women in any society is an index of the standard of its social organization. The term 'status of women' then would denote not only a conjunction of the rights and duties but also the degree of her subordination in the home, education, economic status, role in decision making in family affairs, and her self-perceived status in the home and in the community.

In recent years considerable attention has been focussed on the need for raising the status of women. This has been highlighted by the Chinese slogan 'break the thousand year old chains which have bound them by tradition and custom to an inferior role in society and reassure them that they too can hold up half of the heaven'. According to the United

Nations, the status of women in society can be determined by her composite status that can be ascertained by the extent of control that she has over her own life derived from access to knowledge, economic resources and the degree of autonomy enjoyed in the process of decision making and choice at crucial points in her life cycle.

The various factors like socio-economic, biological and cultural variables, norms and values, attitude, modernisation, decision-making patterns and autonomy determine the status of women. The concept of the interrelationship between the social status of women and fertility, though well-established by deductive reasoning has aroused considerable scientific debate and controversy in the past, for the mere reason that research workers had not attempted to quantify the status of women in numerical terms. It is difficult to determine direct causation of fertility and one must be careful not to confuse causation with correlation. Some factors may be merely related to fertility rates, and other unknown factors may be the real cause of different levels of fertility among different women and different societies. The fertility behaviour is determined by a large number of factors, among which status of women is an important one. In fact, the aspect of status of women and fertility behaviour influence each other and seems to be reciprocally related, guided by a multitude of other intervening determinants.

The pioneering works of Davis and Blake (1965) and Bongaarts (1982) in their study on fertility behaviour incorporated the status of women as one of the controlling variables determining the human fertility behaviour [Intermediate Variables of Fertility by Davis and Blake and Proximate Determinants of Fertility by Bongaarts]. Again, in an analytical study on the status of women and population dynamics by K.Mahadevan, R.Jayasree, A.Aghajanian and G.S.Moni, they developed a conceptual model on the Status Affecting Variables (SAVs) wherein they have included fertility behaviour as one of the variables. Various other studies have also been done on an empirical basis in this regard wherein it has been observed that the two aspects are reciprocally related.

Blake, the renowned demographer explains that "the nature of women's position and the variations in its articulation with the status of men, influence important variables with

which students of population are concerned in particular, to reproductive behaviour and the size and the quality of labour force". Weller found that wives manifest lower fertility behaviour in wife-dominant and egalitarian families rather than in husband-dominant families. Most researchers define the status of women as a multi-dimensional concept to women's access to and control over valued material and social resources, and/or to women's power and autonomy, that is, women's ability to control important events in their lives and their freedom from control by others, especially others in the family or husband.

Based on these theories of fertility and status of women, in the present study an attempt has been made to develop a comprehensive scale to measure the status of women and to study the fertility behaviour across the states of India.

### 1.2 STATEMENT OF THE PROBLEM

India is the second most populous country in the world and it has achieved a billion plus population with the turn of the century. India has served as one of the South Asian countries to the demographers and research scholars of other disciplines also, to carry out research works on the various demographic aspects – fertility being one of the most important areas of study. The study of women is also an upcoming area of concern of this era wherein various aspects like health, education, work status, autonomy, awareness, and their overall development have been dealt with significant importance after the United Nations International Conference on Population held at Cairo in 1994; International Conference on Women held at Beijing in 1995; and Social Summit Conference held at Copenhagen in 1995. Moreover UNDP's Human Development Reports 1995 and 1996 have also laid emphasis on women and development. All these have laid towards comprehensive studies on the various issues related to their status development and empowerment.

Indian women's access to education, healthcare, employment, awareness about family planning affect the family size and therein the fertility aspect. Thus in the present study it

will be interesting to carry out a research work regarding the aspects of the status of women, women's awareness and fertility behaviour, taking into consideration the cohort group of ever-married women in the age group of 15 to 49 years of all the states of India, along with their rural-urban differentials, based on the National Family and Health Survey 2 (1998-99) records.

### 1.3 OBJECTIVES

The empirical study is based on certain objectives and an attempt has been made to analyse them. These are

- 1) To evaluate the health status of women across the states of India and its relationship with fertility behaviour.
- 2) To analyse the prevailing education and employment situation of women across the states of India and its relationship with fertility behaviour.
- 3) To evaluate the autonomy of women (women's involvement in decision-making, freedom of movement, access to money) across the states of India.
- 4) To evaluate the awareness among women across the states of India by analysing women's exposure to mass media and family planning messages and women's involvement in discussion of family planning.
- 5) To compute an index measuring the status of women with the help of the above mentioned indicators (health, education, employment, autonomy, and awareness) across the states of India.
- 6) To analyse the extent of the effect of status of women and awareness of women on the fertility behaviour which have generated a spatially varied pattern across the states of India.
- 7) To bring about the regional pattern of disparity across the states of India regarding all the concerned variables.

### 1.4 RESEARCH QUESTIONS

The following research questions emerge from the objectives, which need to be examined with full details. These are

- 1) What is the regional scenario of the health conditions of women in India?
- 2) How does the educational attainment of women and their work status vary over the states of India?
- 3) What is the extent of autonomy of women in the states of India with regard to decision making, freedom of movement and access to money?
- 4) How much are the Indian women aware through their exposure to mass media and family planning messages?
- 5) Does the educational attainment of women have any influence on women's exposure to mass media and family planning messages to generate awareness among women?
- 6) To what extent the status of women and women's awareness influence the fertility behaviour of women in India?
- 7) What is the magnitude of disparity regarding all the concerned variables across the states of India that carve out a distinct varied pattern across the states of India?

### 1.5 DATABASE

The database for this empirical study is the National Family and Health Survey -2 (1998-99) records published by the National Family and Health Survey (NFHS), Ministry of Health and Family Welfare, Government of India, New Delhi. In this paper, only 19 states have been taken under consideration leaving apart all the north-eastern states except for that of Assam.

NFHS is designed to collect data on the demographic and socio-economic differentials of fertility, family planning and maternal and child health. The NFHS covered 25 states and the National Capital Territory of Delhi, which comprises 99 percent of the total population of India. In all, more than 90,000 ever-married women of age 15-49 years and 91,196 households are covered with uniform questionnaires, sample designs and field

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procedures. The data collection was carried out on a state-by-state basis. The NFHS-2 survey was carried out in two phases. 10 states were surveyed in the first phase, which began in November 1998, and the remaining states (except Tripura) were surveyed in the second phase, which began in March 1999.

### 1.6 INDICATORS

The indicators selected for the present study are registered in the following section:

### 1. HEALTH INDICATORS OF WOMEN:

- a) Nutritional status of ever-married women
  - i) Mean Body-mass Index (Total, rural and urban distribution)
  - ii) Percentage of women with BMI below 18.5kg/sq.m (Total, rural and urban distribution)
  - iii) Percentage of women with BMI of 25.0kg/sq.m (Total distribution)
  - iv) Percentage of women with BMI of 30.0kg/sq.m or more (Total distribution)
- b) Prevalence of anaemia among ever-married women
  - i) Percentage of women with any kind of anaemia (Total, rural and urban distribution)
  - ii) Percentage of women with mild anaemia (Total, rural and urban distribution)
  - iii) Percentage of women with moderate anaemia (Total, rural and urban distribution)
  - iv) Percentage of women with severe anaemia (Total, rural and urban distribution)

### 2. LITERACY AND EDUCATION:

- a) Percentage of ever married women with primary education (Total, rural and urban distribution)
- b) Percentage of ever married women with secondary or middle school education (Total. rural and urban distribution)
- c) Percentage of ever married women with higher secondary education and above (Total, rural and urban distribution)
- d) Total Literacy Rate (Total, rural and urban distribution)

### 3. WORK PARTICIPATION:

- a) Employment status of ever-married women
  - i) Percentage of women engaged in family farm/business (Total, rural and urban distribution)
  - ii) Percentage of women employed by someone else (Total, rural and urban distribution)
  - iii) Percentage of women self-employed (Total, rural and urban distribution)
- b) Occupational status of ever-married women
  - i) Percentage of women as professional workers (Total, rural and urban distribution)
  - ii) Percentage of women as sales workers (Total, rural and urban distribution)
  - iii) Percentage of women as service workers (Total, rural and urban distribution)
  - iv) Percentage of women as production workers (Total, rural and urban distribution)
  - v) Percentage of women as agricultural workers (Total, rural and urban distribution)
  - vi) Percentage of women as other workers (Total, rural and urban distribution)

### 4. WOMEN'S AUTONOMY:

- a) Percentage of ever-married women involved in household decision-making regarding
  - i) What to cook (Total, rural and urban distribution)
  - ii) Purchasing jewellery etc. (Total, rural and urban distribution)
  - iii) Staying with parents/siblings (Total, rural and urban distribution)
  - iv) Own health care (Total, rural and urban distribution)
- b) Percentage of ever-married women with freedom of movement to
  - i) Go to market (Total, rural and urban distribution)
  - ii) Visit friends/relatives (Total, rural and urban distribution)
- c) Percentage of ever married women with access to money (Total, rural and urban distribution)

- d) Individuals deciding how the money earned by ever married women (in cash) will be used in terms of percentage
  - i) Respondent (ever married women) only (Total, rural and urban distribution)
  - ii) Husband only (Total, rural and urban distribution)
- iii) Respondent with husband (Total, rural and urban distribution)
- iv) Others in household only (Total, rural and urban distribution)
- v) Respondent with others in household (Total, rural and urban distribution)

### 5. EXPOSURE TO MASS MEDIA:

- a) Percentage of ever married women who reads newspaper/magazine at least once a week (Total, rural and urban distribution)
- b) Percentage of ever married women who watches TV at least once a week (Total, rural and urban distribution)
- c) Percentage of ever married women who listens to radio at least once a week (Total, rural and urban distribution)
- d) Percentage of ever married women who visits cinema/theatre at least once a month (Total, rural and urban distribution)
- e) Percentage of ever married women who are exposed to any kind of media regularly (Total, rural and urban distribution)

# 6. EXPOSURE TO FAMILY PLANNING MESSAGES AND DISCUSSION ON FAMILY PLANNING:

- a) Percentage of ever married women who are exposed to family planning messages through different sources
  - i) Radio (Total, rural and urban distribution)
- ii) TV (Total, rural and urban distribution)
- iii) Cinema/film show (Total, rural and urban distribution)
- iv) Newspaper/magazine (Total, rural and urban distribution)
- v) Wall painting/hoarding (Total, rural and urban distribution)
- vi) Drama/folk dance/street play (Total, rural and urban distribution)
- vii) Any source (Total, rural and urban distribution)

- b) Percentage of ever married women who have discussed family planning with husband (Total, rural and urban distribution)
- c) Percentage of ever married women who have discussed family planning with anyone (Total, rural and urban distribution)

### 7. FERTILITY INDICATORS:

- a) Total Fertility Rate (Total, rural and urban distribution)
- b) Mean Children Ever Born to ever-married women (Total distribution)

### 1.7 METHODOLOGY

This study mainly concentrates in analysing the effect of the social and economic factors on the fertility differential, to assess the relationship between fertility and socio-economic and some demographic variables. The methodology followed for this research work is both qualitative and quantitative. The various indicators chosen are being represented in percentages in order to make them comparable. The regional distribution patterns of the variables over the states of India are tabulated and represented graphically using various suitable cartographic techniques and thematic mappings. The regional disparity of the variables over the states along with the rural-urban disparity is being quantified by using the coefficient of variation. Each of the determinant variables has been correlated with the fertility factor in order to understand the strength of association and the degree of influence of the related factor on the incidence of fertility. The correlation co-efficients computed between determinant variables and fertility are tested through t-test technique to find out the determinants, which are significant at 0.01 and 0.05 percent levels of significance.

The status of women is a summary measure and includes various parameters like health status, education, employment and occupation status, autonomy, degree of awareness through exposure to mass media and the like which needs to be represented as a composite factor. In order to obtain this the Principal Component Analysis (PCA) is

being computed to incorporate the interrelationships within the parameters, which collectively as well as individually affect the status of women.

The Principal Component Analysis – a branch of factor analysis – is a technique designed primarily to synthesize a large number of variables into a smaller number of general components, which retain the maximum amount of descriptive ability. It permits a more economical description of the given set of structural variables and suggests some underlying dimensions (components), accounting for the statistical relationship among them. It works on the assumption that the inter-correlations themselves have certain underlying factors common to the factors. Morrison (1967) has described it as a method to discover those hidden factors, which might have generated the dependence or covariance among the variables.

After running the PCA, the states are being ranked based on the composite scores from a higher to a lower scale. The fertility pattern of the states is also being ranked accordingly from a lower scale to a higher scale. Then the states ranked by the two variables (status of women and fertility behaviour) are graphically represented by cartographic technique of mapping. The effect of the status of women on fertility behaviour cannot be assessed correctly unless the different variables of status of women are examined separately. Concrete results necessitate multivariate analysis in which the multiplicity of interconnected issues or decisions needs careful analysis and interpretations. Hence, multivariate regression analysis is being carried out to capture and control the effects of potentially confounding variables and to estimate the amount of variance in fertility behaviour explained by each of the selected dimensions of women's status. To get an effective result, the individual variables of the factors of health, education, work status, occupational status, autonomy, awareness and the overall status of women are reduced to separate composite indices with the help of the method of PCA. Then finally these seven sets of factor scores for all the selected states of India are correlated with the fertility variables to gauge their relationship.

### 1.8 SCHEME OF CHAPTERISATION

The scheme of chapterisation followed in this paper is:

- 1. Introduction.
- 2. Health status of ever-married women.
- 3. Education, work participation and occupational status of ever-married women.
- 4. Autonomy of ever-married women.
- 5. Awareness of ever-married women.
- 6. Status of ever-married women.
- 7. Fertility of ever-married women.
- 8. Status of women and reproductive behaviour: understanding the linkages.
- 9. Summary of findings and conclusion.

### 1.9 PLAN OF STUDY

As has already been mentioned in the above section, the present study comprises of nine chapters. The first chapter deals with the general introduction to the concept of the status of women and its connection with the fertility behaviour of women. It then goes on to explain the statement of the problem, objective of the study, the research questions to be dealt with in the present study, database for the study, indicators that has been selected for the study, the methodology that has been followed for analysis in the present study, scheme of chapterisation followed by the plan of study. The last section comprises of the literature survey focusing on the status of women. This section is divided into four parts each dealing with different aspects like status of women, autonomy and decision-making; education and women; employment and women; and health and women.

The consecutive chapters, from the second chapter to the sixth chapter, analyses each aspect of women that are taken into consideration like the health status of women; education, work participation and employment status of women; autonomy of women; awareness of women; and status of women. The chapters are arranged in the manner in which in the first place the basic conceptualisation of each aspect has been made in

general and then their spatial dimension over the states of India has been analysed under captions of rural scenario, urban scenario and total scenario.

The seventh chapter comprises of the conceptualisation of the phenomenon of fertility in general followed by the explanation of the regional pattern of fertility in India.

In the eight chapter, an attempt has been made to gauge the understanding of the linkage between status of women and the reproductive behaviour of women. Here, in this chapter, the main focus is to relate each of the constituent variables of the status of women, namely, health, education, work participation, employment, autonomy and awareness separately with the fertility variable in order to perceive their respective associative nature.

Finally the ninth chapter outlines a brief summary of the findings of the present work and gives some of the policy implications that can be considered as mere suggestions regarding the upliftment of the status of women as a regulative measure of fertility.

### 1.10 LITERATURE SURVEY

This section highlights the ways in which the 'status of women' has been operationalised in social demographic literature. The various determinants of the status of women and the issues related to these are also being addressed by examining the relevant literature.

According to the report presented by the United Nations (1995)<sup>1</sup> on population change, development and women's role and status in India, one of the factors that is gaining increasing recognition is the position of women in a society. Even if economic growth is somewhat slow, if it is of the kind that changes the options and freedoms available to women, fertility and mortality declines will also be faster.

Ford Foundation (1991)<sup>2</sup> in the context of population and development emphasized on the question of women status as important in the determination of fertility. The reason being that women's status is a key factor in their ability and desire to control fertility.

According to Dr.Niranjna (2000)<sup>3</sup> fertility behaviour, although a biological process, is conditioned by multiplicity of biosocial factors.

The status of women in the context of fertility has been noted as significant. The assumption in this context holds that higher the status of women the lower is the number of children ever born to them (United Nations, 1996)<sup>4</sup>.

According to K.Mahadevan, A.Aghajanian, R.Jayasree and G.S.Moni (1989)<sup>5</sup> the level of fertility and the status of women are co-related. This reciprocal relationship stems out of the common determinants of these two factors and their complementary influence. Here fertility is conceived as a parallel dependent variable along with the status of women because of their reciprocal relationship.

According to Dr.Usha Sharma (2001)<sup>6</sup> women's social status is strongly correlated with their fertility: the lower the number of births per woman the higher her status and the higher the number of births the lower her status.

### 1.10.1 STATUS OF WOMEN: AUTONOMY AND DECISION MAKING

The status of women in the real and complete sense is a recent and emerging concept. The term status refers first, to an access to resources such as education, gainful employment, and health services, and second, to the position (power, prestige, authority) that a woman enjoys in various situations (Oppong, 1982;Dixon, 1978).

The multidimensional position of women has led to a variety of terms and definitions of female status in the literature. Of importance in all these is the notion of gender inequality, in terms of prestige, power and control over social and economic resources (Mason, 1984) or the extent to which women have autonomy (Dyson and Moore, 1983) or are free of control from men and from others within the household.

In a paper by Leela Visaria on Regional Variations in Female Autonomy and Fertility and Contraception in India,<sup>7</sup> she has mentioned that Jejeebhoy (1988) identified three critical components of women's autonomy. They are: a) control over material and social resources; b) knowledge opportunities and alternatives available to women; and c) women's position within the home. In other words, women's position can be understood in terms of decision-making, freedom of movement and domestic autonomy.

The concept of 'autonomy', according to Van Staveren (1994)<sup>8</sup>, correspond to freedoms such as: freedom from ignorance, through access to education; freedom from unhealthy short life, through access to health services; freedom of survival through access to economic resources; freedom from discrimination, especially sexual subordination, through access to decision-making (which for women can be represented by the term 'autonomy'), equal rights and abolition of discriminatory traditions.

However, in Roger Jeffery and A.M. Basu's article on *Schooling As* Contraception,<sup>9</sup> it has been included that John Caldwell (1986) has pointed out, a woman who takes more decision about moving around (increased autonomy) might find that she has lower status (in the sense of prestige).

According to H.S.Dhillon (1969) in the article Status and factors Affecting Change in Status, <sup>10</sup> as a report on family planning and the status of women in India, it may be safe to presume that in India too women have better say in decision-making in the families of working women; whether in labour or in the professional categories. Women are likely to be more directly concerned in decision-making in certain areas as compared to certain other areas. They carry more weight in decision-making in regard to domestic affairs. It may be presumed that women have equal, if not more, share in decision-making in relation to family size and use of contraception.

Dubey<sup>11</sup> reports that while husbands tend to use both the mass media and personal source of information with varying degrees of emphasis on different stages of diffusion, wives seem to maintain a consistent trend of heavy dependence on personal resources. The study also brings out that friends and neighbours play a crucial role both for husbands and wives in gathering additional information for decision-making.

A.K.ShivaKumar (1995) in his paper on *Women's Capabilities and Infant Mortality:* Lessons from Manipur, <sup>12</sup> has clarified the fact that while one may expect a more educated woman to have greater abilities to alter the intra-household balance of power, sociocultural practices governing behaviour of women in society may greatly influence the extent to which she can do so, or make independent decisions. In addition to the economic factors that may lead to deprivations in the levels of women's achievements, several socio-cultural factors tend to influence positively or restrict women's freedom.

Basu (1992)<sup>13</sup> studied the relationship between culture, status of women and fertility behaviour of slum dwellers of Delhi. The people leaving there had hailed from Uttar Pradesh and Tamil Nadu. The differences in their demographic behaviour were found to

be associated more with their respective cultures than to their socio-economic conditions. Women status, which constituted core of the study, is defined in terms of the extent of women's exposure to the outside world, their interaction with the non-familial world and the degree of autonomy commanded by them in the decision-making process of the family. These factors are found to be associated with age at marriage, family size norms prevalent among them, etc. At the same time, the study also indicates that the role of culture seems to be more vital in determining the demographic behaviour than the status of women.

In the article *Education and Status of Women*, <sup>14</sup> V.Ramachandran (2002) mentioned that increased mobility gives women greater access to information and knowledge and helps build self-esteem and self-confidence.

According to S.J.Jejeebhoy (1991) in the paper on *Women's Roles: Health and Reproductive Behaviour*, <sup>15</sup> it has been pointed out that of importance are measures which will enhance women's autonomy and decision-making power in general and extended to areas of marriage and reproduction, lead to smaller family size preferences, the ability to achieve these through increased participation in decisions relating to family size limitation and delayed marriage.

The International Conference on Population and Development<sup>16</sup> held in 1994 devoted a full chapter to the theme of gender equality, equity and empowerment of women. It emphasized that the empowerment of women and autonomy of women in the social, economic, political and health status is a highly important end in itself. Education is one of the means to empower the women with knowledge, skills and self-confidence necessary to participate fully in the development process. The improvement in the status of women also enhances their decision-making capacity at all levels in all the spheres of life, especially in the area of sexuality and reproduction.

#### 1.10.2 EDUCATION AND WOMEN

Education and work are the two variables, which have been internationally recognized as important, particularly in the context of fertility (United Nations, 1985). In some of the studies on fertility, education, economic participation, health status, legal status of women are considered as important. The relationship worked out in statistical terms reveals significant association between these variables and fertility (Kazi, 1991; Sather, 1991). However, among the said factors, Casterline (1984) described education as crucial.<sup>17</sup>

In demographic literature, the status of women in terms of education, labour force participation outside the home, occupational mobility etc., is found to have strong association with fertility behaviour in developed and developing countries in all the continents (UN 1961; Driver 1963; Boserup 1970; Mandelbaum 1974; Rothschild 1977; Hull 1977; Oppong 1977; Kupinsky 1977; Caldwell 1979; Anker 1982)<sup>18</sup>.

According to K.Mahadevan, et.al (1989)<sup>19</sup> efforts made to go deeper into the specific determinants of education and occupation that contribute to the changes in fertility behaviour have been negligible. Education and labour force participation may bring about several qualitative changes in the behaviour of women. They may include changes in life styles, norms, and values, level of aspiration, motivation and modernization, changes in role and so on.

The paper on Schooling As Contraception<sup>20</sup> by Roger Jeffery and Alaka M. Basu mentions that Van de Walle and Van de Walle (1993) commented that despite the increasing sophistication of some of these discussions, much of the demographic literature retains its faith that in order to understand women's status it is sufficient to know how they participate in the labour force and how many years of schooling they have received.

Leela Visaria has mentioned in her paper on Regional Variations in Female Autonomy and Fertility and Contraception in India<sup>21</sup> that schooling and labour force participation are undoubtedly important variables because they may be a source of autonomy and allow women to take decisions for themselves (Van de Walle and Van de Walle, 1988). But even women with little or no formal education or participation in economic activity can have access to or control over resources and can take decisions within the household. It is increasingly recognized that it is not merely work but whether working women control their income, which has a bearing on autonomy and on associated demographic behaviour. Similarly, it is not just their schooling, but women's perceptions about the extent of, and the spheres in which they enjoy, freedom of decision-making, that are important components of their status in the family and in society (Caldwell, 1979).

According to Dr.Usha Sharma (2001)<sup>22</sup> as Indian women's rights advocate has argued, improvement of the status of women is not the consequence of family planning programmes, as believed by the population planners; rather it is a more complex outcome resulting from rise in age of marriage, education, employment, better living conditions, general awareness among women and so on. Neo-Malthusian analysts argue that pregnancy leads to suffering, powerlessness and low status of women and that improvement of women's status is a direct consequence of the acceptance of modern family planning.

R. Jeffery and A.M. Basu in their article on Schooling As Contraception<sup>23</sup> mentions that Moni Nag and Anurudh Jain argued that one of the two issues currently on the agenda of 'population specialists and policy-makers' are 'the demographic effects of improving women's status' and that 'conditions conducive to fertility decline include improvements in the status of women, high female literacy and education, low infant and child mortality and consumer-oriented family planning programmes (Personal Communication, 1992). They have also quoted that "The reason for expecting a negative influence of primary education on fertility is that primary education, by providing basic functional literacy and numeracy, enhances women's status within and outside their immediate family and increases their exposure to information and ideas disseminated through printed material'

and 'improvements in female education can be expected to influence fertility behaviour even without simultaneous changes in other factors such as increased opportunities for them to participate in the paid labour force" (Nag and Jain, 1993). Separately some of the researchers (reported in Basu, 1992 and in Jeffrey and Jeffrey, 1994) made us sceptical of these claims that schooling universally raises status and with better status, women want smaller families and are able to ensure that they achieve their goals.

The National policy on education (NPE)<sup>24</sup> 1986 stated that the government would use education as a means to achieve gender equity and as a tool to correct centuries of discrimination. As the NPE states, education can be used as 'an agent of basic change in the status of women'. In order to do that the system would have to 'play a positive interventionist role in the empowerment of women'.

According to B.K.Sahu (1998) in the chapter on Causes for Population Growth, 25 though the influence of primary school level education on birth rates is not very clear, there is no doubt about the fact that fertility declines with education at higher secondary and college levels. Education and fertility have been found to be negatively correlated. However, there are many possible interrelations of the relationship between education and reproduction. The fact that a few years of formal education brings a perceptible change in the reproductive behaviour shows a causal relationship between the two. Education is capable of changing people's perception, ideas, aspirations, etc. much more significantly than even the micro economic realities. Education determines the knowledge of an attitude towards disease, hygiene, and nutrition more than the purchasing power does. If such a cognitive change, induced by education, can have a powerful effect upon the survival rate, it should not be surprising if it were to have an equally powerful effect on the incidence of child bearing. A distinction has often been made between the role of mother's education in determining the family size and the role of education of her spouse. He also mentioned the observation of S.P.Chatterjee, which unfolds that the fertility of women with only primary education is sometimes greater than that of illiterate women. It is only at the secondary level of education that the female's education begins to play an effective role.

In the chapter on Education and Fertility<sup>26</sup> by M.M. Mascarenhas it has been mentioned that education is given high priority by Easterlin (1973) who includes it in the process of modernization, which is directly related to fertility control. In commenting upon the role of education in fertility differentials, Ronald Freedman stated; "one plausible explanation suggested by D.M. Heer and others is that those who are literate and in an active network of communication are able to receive information about the ideas and means of family limitation. This is very probably correct, but the role of education, literacy and communication may be more basic. With increased education and literacy the population tends to become involved with the ideas and institutions of a large modern culture. If the individual is, part of a large non-familial system, he begins to find rewards in social relationships for which large numbers of children may be irrelevant".

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In the chapter on *Population Control: Education and Empowerment of Women*, J.C.Aggarwal (2002) has commented that the right to education is one of the most important means of empowering women with the knowledge, skill and self-confidence necessary to participate fully in the development process. Education enables women to respond to opportunities, to change their traditional roles, and to change their life circumstances promoting the education of women and girls contributes to postponement of their age of marriage and to reduction in the size of their families. Education builds life skills for acquiring timely and relevant information. Functional literacy and basic education are pre-requisites for accessing information and services for good health. While there is a correlation between educational status of women and their family size, fertility preferences, child care practices and it has now been established that even in the non-formal education programmes, raising the functional literacy level of a community leads to a demonstrable decline in fertility and infant mortality rates.

According to S.J.Jejeebhoy (1991) in the paper on *Women's Roles: Health and Reproductive Behaviour*,<sup>28</sup> better-educated women are more exposed to new ideas and new forms of behaviour than are less educated women, they have better knowledge regarding methods and means of acquiring a suitable one. There is also a systematic



increase with education in interspousal communication on family planning. As level of education increases, women are considerably more likely to participate in the decision on how many children to have.

Women's education, very vital in determining their social status, is positively associated with reduction in fertility. According to Jain (1985), higher school enrollment ratios, particularly those of females have been associated with various elements contributing to decline in fertility rates. These elements include higher female age at marriage, the improved status of women and a higher rate of family planning practices<sup>29</sup>.

World Fertility Survey data indicate strong associations between women's education and marriage age, desired family size, and contraceptive use. More education works indirectly to reduce fertility in a number of ways: by delaying marriage and increasing the chance that a woman will never marry; by reducing desired family size by stimulating aspirations for a higher standard of living and increased investments in fewer children; by preparing women for employment, specially in the formal sector; and by exposing women to new knowledge regarding contraceptive methods<sup>30</sup>.

Dasgupta<sup>31</sup> in his study concludes that education raises maternal skills and self-confidence, increases maternal exposure to information, and alters the way in which others respond to women.

Female education as a crucial determinant of fertility behaviour is highlighted by various research in India and other developing countries (Bhargava and Saxena, 1987; Chaudhary, 1978; Jain, 1981; Jain and Nag, 1986; Jejeebhoy, 1995; Sundar, 1990). Education influences women's fertility in several ways. Through education, women are exposed to new sources of information in all aspects of life. This motivates them to pursue activities outside the family as well as equips them with the skills to do so. They also have the information and greater access to health services and services related to fertility control (Jejeebhoy, 1980, 1995). Secondly, by taking women outside their immediate families, education helps to bring about a change in their self-images,

fostering independent aspirations and values, and thus promoting an egalitarian ethos among them. Such an impact can be seen in their role performance, decision-making and behaviour pattern (Jolly, 1976; Khan and Singh, 1987; Raju, 1987; Vaidyanathan, 1989)<sup>32</sup>.

According to Jejeebhoy (1980)<sup>33</sup>, the number of children women considers desirable declines with increasing education.

Although Casterline (1984)<sup>34</sup> has mentioned education to be a crucial factor in fertility but the impact of education is not always direct. It is visible only through different channels. There have been studies that also indicate somewhat weak association between education and fertility, even in the case of developed countries (Hubback, 1975; Mahadevan, 1979). The inverse relationship, it is believed rests on peculiarity of circumstances during the demographic transition phase. In the context of fertility, particularly with reference to the theory of Demographic Transition, the development level of a society may be stated as affecting the status of women.

However, Cochrane<sup>35</sup> holds the view that small amount of education in least literate societies might initially increase fertility, while Jain found that the relation between education and fertility is curvilinear, that is, a small increase in educational level results in an increased rate of fertility. Similar observation has been found by Mandelbaum (1974). He holds the view that this trend is a reflection and continuation of the trend that poor families whose members begin to attain better nutrition and health resources, increases their fertility for a time before taking on the higher status behaviour patterns that lower the fertility. It is then just possible that members of illiterate families with only a little schooling and who are barely literate, average more children in comparison to illiterates for some time before taking on the higher status behaviour patterns that lower their fertility.

### 1.10.3 EMPLOYMENT AND WOMEN

In the seminar report on family planning and status of women in India (organized by the Central Institute of Research and Training in Public Cooperation, 1969)<sup>36</sup>, it has been mentioned that women's employment has been identified as a positive factor in the reduction of fertility. This calls for a change in the attitude of society, particularly of men towards women's employment.

According to V.Ramachandran (2002) in the paper on Education and Status of Women, <sup>37</sup> education alone does not always lead to higher status. Experience of income-generation programmes has demonstrated that enhancing the incomes of women alone is also not enough. The critical issue is that of control over income. There is ample evidence that female employment is not synonymous with female control over income (some of the papers in Dwyer and Bruce, 1988) as has been mentioned by A.M.Basu in her article on Women's Roles and the Gender Gap in Health and Survival<sup>38</sup>. Women's work, and women's contribution to the economy are either undervalued or outright dismissed. The very definition of work devalues women's contribution to the survival and maintenance of the household and to family occupation. As women's work is not valued in monetary terms, they are perceived as being a drain on family and societal resources. Their skill, knowledge and abilities are also undervalued. A major share of the income earned by women goes into maintenance of the family and even a marginal increase in women's income translates into better nutrition, health and education of children. Within the household women's access to and control over material assets determines their ability to lead a life of dignity.

B.K.Sahu (1998) points out in the chapter on *Causes for Population Growth*<sup>39</sup> that working women display lower fertility in comparison to non-working women. In general working women have higher educational level, higher age at marriage, higher incidence of contraceptive use, greater economic independence, much wider sphere of social interaction, which together increase women's participation in the decision-making process.

The paper on *Women's Roles: Health and Reproductive Behaviour*<sup>40</sup> by S.J. Jejeebhoy who mentions that it is surprising to observe that women's reported involvement in economic activities is not a sufficient indicator of their autonomy or the extent to which they have any power or control material resources (Mazumdar, 1983; Committee on Status of Women, 1973). Constraints as lack of freedom of movement and restrictions on economic activity limit women's participation in power or prestige bearing roles outside of the family (Jeffrey, 1979).

As has been reported by the United Nations (1995)<sup>41</sup> on their paper on population change, development and women's role and status in India, an improvement in women's status arising from their inclusion in the labour market depends on the type of work that they have access to. While modern sector and professional occupations do provide sources of income that allow an increase in independence and autonomy, inclusion constricted by economic necessity into low productivity jobs can have the effect of decreasing status, for it entails a double work burden, increases the number of hours worked (taking from leisure time) while providing but a meager income. Economic development may increase the share of women in modern occupations, the evidence shows that, for a growing proportion of women in the informal sector in the developing world, economic development, does not guarantee per se an increase in women's status.

According to Dr.Usha Sharma (2001)<sup>42</sup>, the relationship between gainful employment and greater reproductive and sexual choices is dependent on a myriad of factors, such as type of occupation, income, motivation, whether the woman works for someone or is self-employed, duration and continuity of work, and whether the work is full or part-time. The impact of women's non-domestic work on fertility differs by type and magnitude of remuneration, workplace, type of activity, and occupation; but there has been little consistency in either the strength or the direction of the observed relationship.

Participating in the labour force should increase women's autonomy in the household, as well as financial capacity: factors, which are expected to enable women to look after themselves and their children better (Dasgupta and Chen, 1995)<sup>43</sup>.

### 1.10.4 HEALTH AND WOMEN

According to M.Dasgupta and Lincoln C.Chen (1995)<sup>44</sup>, poor nutritional status during childhood, and marriage while still physically immature increase women's susceptibility to the reproductive health problems. They also suggested that an acceleration of efforts in health education and education in general could well be most effective way of transforming women's lives by empowering them to use the existing health, legal and other infrastructure to protect their own well-being.

In A.K.ShivaKumar's paper on *Women Capabilities and Infant Mortality* (1995)<sup>45</sup>, he has mentioned that there appears to be no convincing evidence to show that education leads to favourable shifts in maternal behaviour, since factors such as age at marriage, child spacing, family size and so on appear to be strongly influenced by socio-cultural norms of society (Ware, 1984; Cleland, 1990). All these in no way reduce the significance of literacy. On the contrary it only suggests that we ought to focus on other factors as well which may combine with education to effectively enhance a woman's capabilities.

In a paper on *Unsafe Motherhood: A Review of Reproductive Health*<sup>46</sup> by S.J.Jejeebhoy and S. RamaRao (1995), they have mentioned that under conditions of wide gender disparities, which exist in India, malnourishment and limited access to health care are considerably more evident among females than among males from birth onwards (Dasgupta, 1987; Ascadi and Johnson, Ascadi, 1990). Boys are fed better (Dasgupta, 1987; Khan et.al, 1988) and are much more likely to receive early access to health care in case of illness. Studies, which have monitored growth and nutritional status among children, (Srikanta, 1989; Government Of Maharashtra and UNICEF\_WIO, 1991) confirm gender disparities in growth and severe malnutrition from an early age. One consequence of this is poor adolescent weight and height (Gopalan, 1989). Another

consequence is high levels of anaemia (Chatterjee, 1989). In that article, it has also been mentioned that lack of awareness among women and socio-economic and cultural factors together with poor quality of health service availability often compel women in poor ante natal care (Kanitkar and Sinha, 1989) and also poor nutrition during (antenatal stage) pregnancy (Ramachandran, 1989). Food and iron supplementation have been found to improve such maternal healthy attributes as weight gain, incidence of anaemia, complications during pregnancy and childbirth and birth weight (Dawn and Mitra, 1990; Iyengar, 1975).

According to A.M.Basu (1995) in her paper on *Women's Roles and the Gender Gap in Health and Survival*,<sup>47</sup> high fertility imposes what has been called the maternal depletion syndrome; whereby the rigours of pregnancy delivery and breastfeeding are translated into protein-calorie malnutrition, anaemia and other complications (especially during delivery) to compound the protein-calorie malnutrition and anaemia.

Mridula Bhadauria (1997)<sup>48</sup> has suggested that there is a need of social awareness regarding female status. Everyone should think over that woman is the pivot of the family hence; special attention must be paid from early childhood if we all want a healthy family, healthy society and a healthy nation.

In the paper on *Women's Health in a Rural poor Population in Tamil Nadu*,<sup>49</sup> T.K.Sundari Ravindran (1995) has mentioned in the paper regarding women health that women wage earners fight to keep themselves on their feet through self-treatment and when absolutely essential, resort to medical care since they cannot afford to be sick. Changing women's health-seeking behaviour seems to be a more hopeful avenue for action. Through health education and awareness-raising programmes which reach out to women (especially to those in poverty groups) and through programmes aimed at enhancing their self-confidence and self-image, women have to be encouraged to initiate self-treatment or seek medical help when ill, to actively seek antenatal and delivery care, and more important to feel entitled to good health and care. A number of community-based organizations have had success with such efforts, even though limited.

Sharma (1987)<sup>50</sup> suggests certain variables, which are important in determining fertility. These are improvement in birth control technology and expansion of the health care system. Both the factors are conducive to better health status of women, which substantially affect their general social status.

Mahadevan and Sumangala (1987)<sup>51</sup> refer to the effect of social development and cultural change on fertility behaviour. It is pointed out that in Kerala fertility rates are lower than other states all over India. This could be possible due to improvement in quality of life of the people in terms of health, hygiene, literacy, and status of women.

The foregoing brief review of literature reveals that the study of status of women and its determinants and its relationship with the fertility behaviour is a very complex phenomenon as there is not just one but multiple factors which influence and account for it. Each factor seems to operate alone or in combination with others under certain conditions, thus making understanding of the relationship very difficult. On the other hand, social status of women, which itself is not a homogenous and single category, cannot be taken as the sole and final determinant of fertility. The reason being that the status of women itself depends upon a number of factors, which include economic as well as socio-cultural variables.

In this way, the study suggests that women status has an inverse relationship with the fertility. At the same time, it also points out that a number of socio-cultural factors too play a vital role in determining fertility. In other words, along with women status, the associated factors also affect fertility.

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# CHAPTER 2

### CHAPTER - 2

### HEALTH STATUS OF EVER-MARRIED WOMEN

### 2.1 INTRODUCTION

Women's health and status are crucial for the well being of families and communities. Women's health status is basic to their advancement in all fields of endeavour. Women face high risk of malnutrition, retardation in growth and development, disease, disability and even death at three critical stages in their lives, viz, infancy, early childhood and adolescence and reproductive phase. Katheleen's (1993) study based on data from Asian and African countries substantiates that malnutrition and morbidity rates for females are higher compared to males in the similar age groups for most of these countries. She further observes that two-thirds of pregnant women in these regions are anaemic. A World Bank Report on women's health in India released in 1996 has grimly catalogued the variety of ways in which women are discriminated against. As girls, they get less vaccination, less education and less nutrition than their brothers. When they grow up, they are less healthy than their male counterparts and succumb more easily to sickness and disease. An alarming number of women also die in childbirth. An Indian woman is hundred times more likely to die during or after childbirth than their sisters in the West.

Gender biases in entitlement of food and health care within the household are based on the status rather than the nutritional need. Females generally receive less and poorer quality food than males from birth. Male children are breast-fed for longer duration and get more of cereal, fat, milk and sugar than girl children. Similarly husbands get better food and health care since he is perceived as the main bread earner and enjoys higher status. A mixture of institutional norms and plain household power structure dictate women to eat last and least that has a consequent effect of malnutrition. Whereas, drudgery of the household work which does not get counted in value terms and leaves women overworked in the absence of adequate food intake and care. Malnutrition impairs the physical health of women and their capacity to bear healthy children. Though women

are perceived as primary providers of household health care, they often lack access to the outside health care facilities for themselves. The investments made for the health care of female members of the family are also found to be low – this being a function of the status of women in the household. Empirical evidences have proven the fact that where the women enjoys a higher status regarding autonomy and decision-making process in the household chores, they have a better voice regarding the decisions about their own health care. However, the socio-cultural milieu in the Indian context plays a vital role in maintaining the health status of women.

The incidence of poor health conditions of women in India gets mostly reflected as malnutrition leading to mild and moderate cases of anaemia due to iron deficiency and also a lower Body Mass Index (BMI) below the normal level. The BMI is a reflector of the suitable weight that women should have respective to their height. In the Indian context the normal level of BMI ranges between 18.5 kg/sq.m to 25.0 kg/sq.m. In most of the cases the general trend shows a tendency towards a below normal level BMI which may be due to less intake of healthy and nutritional food required for the maintenance of the body. This often calls for malnutrition and mineral deficiency, which leads to many other health complications. That is why they are more prone to get affected by diseases than their male counterparts. The incidence of iron deficient anaemia is most common in India be it in urban or in rural scenario. This gets more worsened in cases of pregnant women if they are not entitled to a proper nutritional diet during that period. This often results in failure of deliveries which in some cases may be life threatening counting to maternal mortality.

The health status of women is considered to be an interplaying variable in accessing the overall status of women. The concern about one's own health is guided by a host of factors like education, awareness, autonomy and a whole gamut of socio-economic factors, which have a conjoint effect on it. Negligence towards own health emerges due to lack of awareness. There are some socio-cultural norms, which often compel them to undergo treatments at home even though they require trained medical supervision and the situation gets more complicated to recover. This seems to be more prevalent in the case

of rural India where the lights of development have not yet penetrated to loosen the bondage of harmful social norms and value systems. In urban India however, the binding of the socio-cultural norms and values are not so strong that can be harmful for the social being and one can easily ignore them and come out of it, at ease. The value that education imparts in this case is of significant importance. General awareness ensures that the masses opt for better health care facilities available to them. But yet, there is the prevalence of health problems related to women. Statistical data based on survey reports qualify the fact that status of health in Indian scenario is a function of their overall status in the household as well as in the society.

The following section brings about the spatial picture of the health condition prevailing among the ever-married women over the states of India – both in rural and urban areas – being evaluated through their nutritional status computed by BMI and the prevalence of anaemia.

## 2.2 SPATIAL DIMENSION OF HEALTH STATUS OF EVER-MARRIED WOMEN

### 2.2.1 RURAL SCENARIO

The status of health in rural India reveals a widespread variation over the states of India. The nutritional status as is being accessed by the mean BMI on an average scale ranges between 18.9kg/sq.m to 22.8kg/sq.m, which falls within the normal range, with all India average of 19.6kg/sq.m in the rural sector. The state of West Bengal ranks the lowest mean BMI of 18.9kg/sq.m, followed by Orissa, Maharashtra, Bihar, Karnataka, Madhya Pradesh, Gujarat, Rajasthan, Uttar Pradesh, Andhra Pradesh, Assam, Tamil Nadu, Jammu and Kashmir, Haryana, Hiamchal Pradesh, Goa, Kerala and Punjab, with Delhi having the highest rank of mean BMI of 22.8kg/sq.m.

But the statistical data represent that most of the states have a higher percentage of women with below normal BMI (18.5kg/sq.m.). The percentage of women below the normal level of BMI in the states like Orissa, West Bengal, Maharashtra, Gujarat, Karnataka, Andhra Pradesh, Madhya Pradesh and Bihar ranges between 40% and 50%

with Orissa scoring the highest value of 49.9%. In Uttar Pradesh, Rajasthan, Tamil Nadu, Himachal Pradesh, Haryana, Jammu and Kashmir, Goa and Assam it ranges around 30% to 40% while Punjab, Kerala and Delhi show values of below 20%. The all India average of ever-married women below the normal range is found to be 40.6%, which is quite high. The coefficient of variation for the BMI below 18.5kg/sq.m is 30.65, which reveals the fact that there is moderate consistency in the data.

TABLE 2.1
NUTRITIONAL STATUS OF EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(RURAL)

States	Nutritional Status Of Women				
	Weight- For- Height				
	Mean Body Mass Index (BMI)	% with BMI Below 18.5kg/Sq.m			
Delhi	22.8	12			
Haryana	20.4	30.8			
Himachal Pradesh	20.5	31			
Jammu & Kashmir	20.4	30.4			
Punjab	22.2	20.5			
Rajasthan	19.5	38.7			
Madhya Pradesh	19.4	41.8			
Uttar Pradesh	19.5	39.1			
Bihar	19.3	40.3			
Orissa	19	49.9			
West Bengal	18.9	49.8			
Assam	19.9	27.9			
Goa	21.1	30.3			
Gujarat	19.4	47.7			
Maharashtra	19	49.3			
Andhra Pradesh	19.6	43.2			
Karnataka	19.3	47			
Kerala	21.9	19.9			
Tamil Nadu	20.2	35.2			
All India	19.6	40.6			

Source: NFHS-2, 1998-99.

In case of the prevalence of anaemia over the states of India, it is found to be quite high. Iron deficient anaemia seems to be quite common in India especially in case of the rural sector. In the states like Assam, West Bengal, Orissa, and Bihar the figure ranges between 60% and 70% with Assam almost touching the 70% mark. This is followed by the states like Jammu and Kashmir, Tamil Nadu, Madhya Pradesh, Gujarat, Maharashtra and Andhra Pradesh with the mark of over 50% to 60%. The states like Uttar Pradesh, Rajasthan, Haryana, Karnataka, Punjab and Himachal Pradesh club themselves within the range of 40% to 50% scale. While the states like Delhi, Goa and Kerala shows the values to be below 40% with Kerala having the lowest of 23.4%. The all India average for the rural sector in case of the prevalence of anaemia is found out to be 53.9%. The coefficient of variation over the states for the occurrence of anaemia is 22.53 showing a major consistency within it.

TABLE 2.2
PREVALENCE OF ANAEMIA AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(RURAL)

States	Anaemia among Women					
	% of Women with					
	Anaemia	Mild Anaemia	Moderate Anaemia	Severe Anaemia		
Delhi	39.8	32.2	6.4	1.1		
Haryana	47.5	29.6	16.2	1.7		
Himachal Pradesh	40.7	31.7	8.3	0.7		
Jammu & Kashmir	59.9	39.4	18.4	2.1		
Punjab	42.5	28.2	13.4	0.8		
Rajasthan	49.1	32.7	14.2	2.2		
Madhya Pradesh	57	39	17	1		
Uttar Pradesh	49.4	33.9	13.8	1.7		
Bihar	63.9	43	19.4	1.4		
Orissa	64.1	45.6	16.9	1.6		
West Bengal	64.2	45.9	16.9	1.4		
Assam	69.9	42.6	26.4	0.9		
Goa	36.7	27.2	8	1.4		
Gujarat	51.3	31.4	16.8	3.1		
Maharashtra	51.2	33.1	14.2	3.9		
Andhra Pradesh	50.6	32.6	15.4	2.7		
Karnataka	46	27.8	15.4	2.8		
Kerala	23.4	20.3	2.6	0.5		
Tamil Nadu	59.1	37.3	17.8	4.1		
All India	53.9	36.1	15.8	1 2		

Source: NFHS-2, 1998-99.

D PREVALENCE OF ANABMA

					PERC	ENT	AGE	•	
		$\supset$	10	20	30	40	50	60	70
	Delhi			De a Constitution					
	Haryana			420	18.8				
	Himachal Pradesh	147							
	Jammu & Kashmir								
	Punjab				11:37				
	Rajasthan			27 300					
	Madhya Pradesh				IC r			]	
	Uttar Pradesh				3 19				
(0	Bihar								
STATES	Orissa								
U)	West Bengal			7.0					
	Assam							11 111	
	Goa				6 10				
	Gujarat			g eye	Sipl				
	Maharashtra								
	Andhra Pradesh		12,50	in Sur		Y.			
	Karnataka	1					]		
	Kerala								
	Tamilnadu	64	1148	(Fig.)	160				

# FIGURE: 2.1 PREVALENCE OF ANAEVIA AMONG EVER-MARRIED WOMEN INDIA 1997-98

INDIA, 1997-98 (RURAL)

80

39

However, in most of these states the occurrence of severe anaemia is recorded to be ranging between 0.5% (Kerala) and 4.1% (Tamil Nadu). Maharashtra, Gujarat, Karnataka, Andhra Pradesh, Rajasthan and Jammu and Kashmir have higher values of above 2% with states like Uttar Pradesh, Haryana, Orissa, Bihar, West Bengal, Goa and Delhi closely following them. States with below 1% level are Madhya Pradesh, Assam, Punjab, and Himachal Pradesh. In all these states the women in majority suffer from mild to moderate kind of anaemia, with all India averages of around 36.1% in case of mild anaemia and 15.8% in case of moderate anaemia. One significant fact, which can be pointed out, is that among all the states the prevalence of anaemia is most common in the eastern states like Assam, West Bengal, Orissa and Bihar where major proportion of women suffer from anaemia followed by the western and some southern states apart from the backward states like Madhya Pradesh, Uttar Pradesh and Rajasthan. But the occurrence of mild, moderate and severe anaemia shows more consistency than when it is represented as occurrence of total anaemia.

### 2.2.2 URBAN SCENARIO

In general, we assume a better health condition of women living in the urban areas than their rural counterparts because of the facilities they get and the kind of exposure they generally experience. But in case of some of the states the nutritional status of urban women seems to be in a no better condition than the rural residents. The mean BMI of the ever-married women varies between 24.9kg/sq.m and 20.5kg/sq.m with an all India average of 22.1kg/sq.m, all of which falls within the normal range of BMI. Among the states, Bihar scores the lowest mean BMI of 20.5kg/sq.m followed by Orissa, Madhya Pradesh, Rajasthan, Assam, Uttar Pradesh, Maharashtra, West Bengal, Andhra Pradesh, Karnataka, Tamil Nadu, Goa, Gujarat, Kerala, Himachal Pradesh, Jammu and Kashmir, Haryana, Delhi, and Punjab with the highest mean BMI of 24.9kg/sq.m.

The percentage of women below the normal range of BMI of 18.5kg/sq.m to 25.0kg/sq.m is a better reflector of the prevailing health condition of an area. Considering that, we can observe that the backward states of Orissa, Bihar, Rajasthan, and Madhya Pradesh have the higher percentages of women below the normal range of BMI of 18.5kg/sq.m with

values marking around 30%. Maharashtra, West Bengal, Karnataka, Uttar Pradesh, Gujarat, Goa range between 20% and 30%. Andhra Pradesh, Assam, Tamil Nadu, Himachal Pradesh, Kerala, Haryana, Jammu and Kashmir, and Delhi closely follow these states with below 20%. The state of Punjab has the lowest value of 9.2% of women below the normal range of BMI. The all India average of ever-married women below the normal range is found to be 22.6% for the urban sector. However, like the case of the rural areas, the coefficient of variation for the BMI of below 18.5kg/sq.m in the urban areas is also found out to be moderately consistent with a value of 32.27.

TABLE 2.3
NUTRITIONAL STATUS OF EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(URBAN)

States	Nutritional Status Of Women				
	Weight- For- Height				
	Mean Body Mass Index (BMI)	% with BMI Below 18.5kg/Sq.m			
Delhi	23.7	12			
Haryana	23.4	13.7			
Himachal Pradesh	23.1	17.3			
Jammu & Kashmir	23.3	12.5			
Punjab	24.9	9.2			
Rajasthan	21.3	28.5			
Madhya Pradesh	21.1	28.2			
Uttar Pradesh	21.8	23.3			
Bihar	20.5	31.1			
Orissa	20.7	32.9			
West Bengal	22	24.5			
Assam	21.6	18.8			
Goa	22.4	22.5			
Gujarat	22.5	22.8			
Maharashtra	21.9	26.2			
Andhra Pradesh	22.3	19.7			
Karnataka	22.3	23.8			
Kerala	22.6	14.7			
Tamil Nadu	22.4	17.5			
All India	22.1	22.6			

Source: NFHS-2, 1998-99.

Regarding women suffering from anaemic condition in the urban areas, the national average is 45.7%, which reveals the fact that almost half of the women residing in the

urban areas have iron deficiency. In Assam, the percentage is as high as 67.2% followed by Bihar, West Bengal, Orissa, Jammu and Kashmir and Tamil Nadu with a range of 50% to 60%. States like Andhra Pradesh, Rajasthan, Madhya Pradesh, Uttar Pradesh, Haryana, Maharashtra, Delhi score between 40% and 50%. Closely followed Gujarat, Punjab, Himachal Pradesh, Goa, and Karnataka ranging between 30% and 40% and Kerala recording the lowest value of 20.4%. However, the dataset for anaemia in the urban areas is highly consistent with a coefficient of variation of 22.93, like the rural dataset.

TABLE 2.4
PREVALENCE OF ANAEMIA AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(URBAN)

States		Anaemia among Women					
	% of Women with						
	Anaemia	Mild Anaemia	Moderate Anaemia	Severe Anaemia			
Delhi	40.5	29.4	9.8	1.3			
Haryana	45.8	34.1	10.4	1.3			
Himachal Pradesh	38.5	28.8	9.1	0.7			
Jammu & Kashmir	54.2	38.9	14.4	0.9			
Punjab	39	28.7	9.9	0.4			
Rajasthan	46.7	31.1	13.9	1.7			
Madhya Pradesh	46.2	33.7	11.5	1			
Uttar Pradesh	46	31.9	13.3	0.8			
Bihar	59.6	42.6	15.2	1.8			
Orissa	54.8	41.3	11.9	1.6			
West Bengal	57.8	43.1	12.9	1.8			
Assam	67.2	49.2	17.1	0.8			
Goa	36	27.5	8.2	0.4			
Gujarat	39.5	26.9	11	1.7			
Maharashtra	44.8	29.2	14	1.6			
Andhra Pradesh	47.4	32.4	13.4	1.6			
Karnataka	35.7	24.5	9.8	1.3			
Kerala	20.4	16.9	3	0.5			
Tamil Nadu	51.6	35.7	12.3	3.6			
All India	45.7	32	12.2	1.5			

Source: NFHS-2, 1998-99.

The study of the urban areas has revealed the fact that about 1.5% of ever-married women on an all India basis suffers from severe anaemia. In Tamil Nadu the percentage is as high as 3.6%. While the other states like West Bengal, Bihar, Rajasthan, Gujarat, Orissa, Maharashtra, Andhra Pradesh, Karnataka, Haryana and Delhi range below 2%. The states like Madhya Pradesh, Jammu and Kashmir, Assam, Uttar Pradesh, Himachal Pradesh and Kerala shows below 1% level with Punjab and Goa recording as low as 0.4%. The urban women also suffer mainly from mild to moderate anaemia with mild anaemia mostly surpassing the moderate kind. The national average for mild anaemia is 32.0% while that of moderate is 12.2%. Here also, the prevalence of anaemia of any kind is highly revealing in the backward states where the availability of the basic health facilities is of low grade apart from the milieu of other socio-economic factors, which makes them have poor diets and suffer from malnutrition. It can be highlighted that whether be it urban or rural areas, the ever-married women are more prone to suffer from ailments which takes place due to less nutritive diet and mineral deficient food intake and are not supplemented by their substitutes to balance out the deficiency.

### 2.2.3 TOTAL SCENARIO

The features that are represented in the rural and urban scenario get reflected on the total also; wherein the major proportion is being contributed by the rural sector as India's almost three quarters of the population is residing in the rural areas. Considering the nutritional status of women it has been found that the national average of mean BMI is 20.3kg/sq.m for India. The states, which record above the national average, are Delhi, Punjab, Kerala, Goa, Haryana, Jammu and Kashmir, Tamil Nadu, Himachal Pradesh, Gujarat, Karnataka and Andhra Pradesh. The rest of the states like Maharashtra, Assam, Uttar Pradesh, Rajasthan, Madhya Pradesh, West Bengal, Bihar and Orissa score below the national average. The mean BMI for the states range between 23.7kg/sq.m and 19.2 kg/sq.m and it is very much consistent.

The proportion of women having BMI below 18.5kg/sq.m on the national average is 35.8%, which is lower than both rural and urban sectors when considered separately. The states in general vary between 48% and 12%. The states like Orissa and West Bengal

score above 40%. Maharashtra, Bihar, Karnataka, Madhya Pradesh, Andhra Pradesh, Gujarat, Rajasthan and Uttar Pradesh range between 30% and 40%. States like Himachal Pradesh, Tamil Nadu, Assam, Goa, Jammu and Kashmir and Haryana records between 20% and 30%. Kerala, Punjab and Delhi have the lowest records of below 20%. The coefficient of variation for the variable of BMI below 18.5kg/sq.m is 29.62, which is quite consistent in nature.

TABLE 2.5
NUTRITIONAL STATUS OF EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(TOTAL)

States	Nutritional Status Of Women					
	Weight- For- Height					
	Mean Body Mass Index (BMI)	% with BMI Below 18.5kg/Sq.m				
Delhi	23.7	12				
Haryana	21.3	25.9				
Himachal Pradesh	20.8	29.7				
Jammu & Kashmir	21	26.4				
Punjab	23	16.9				
Rajasthan	19.9	36.1				
Madhya Pradesh	19.8	38.2				
Uttar Pradesh	20	35.8				
Bihar	19.4	39.3				
Orissa	19.2	48				
West Bengal	19.7	43.7				
Assam	20.1	27.1				
Goa	21.6	27.1				
Gujarat	20.7	37				
Maharashtra	20.2	39.7				
Andhra Pradesh	20.3	37.4				
Karnataka	20.4	38.8				
Kerala	22	18.7				
Tamii Nadu	21	29				
All India	20.3	35.8				

Source: NFHS-2, 1998-99.

The incidence of ever-married women suffering from iron deficiency and anaemia is quite widespread in India. In most of the households this is a normal occurrence that one is able to encounter. As far as the figures are concerned, 51.8% of women have anaemia,

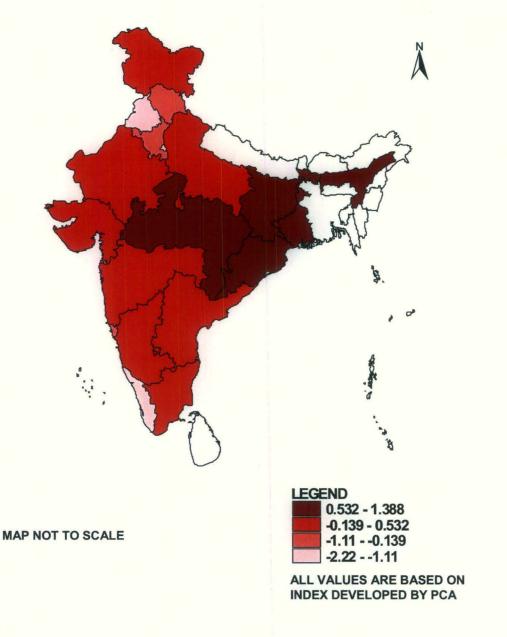
that is to say that almost half of the female population in the ever-married cohort suffers from this problem. In the states like Assam, Bihar, Orissa and West Bengal the percentages reach above 60%, with Assam scoring as high as 69.7%. Closely following these eastern states are Jammu and Kashmir, Tamil Nadu and Madhya Pradesh ranging between 50% and 60%. The states, where the range is between 40% and 50%, are Andhra Pradesh, Uttar Pradesh, Rajasthan, Maharashtra, Haryana, Gujarat, Karnataka, Delhi and Himachal Pradesh. Goa follows next with Kerala scoring the lowest value of 22.7%. However, the dataset is quite consistent as the coefficient of variation shows a value of 22.83, as have been found earlier in both the rural and urban scenario.

TABLE 2.6
PREVALENCE OF ANAEMIA AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(TOTAL)

States		Anaer	nia among Women			
	% of Women with					
	Anaemia	Mild Anaemia	Moderate Anaemia	Severe Anaemia		
Delhi	40.5	29.6	9.6	1.3		
Haryana	47	30.9	14.5	1.6		
Himachal Pradesh	40.5	31.4	8.4	0.7		
Jammu & Kashmir	58.7	39.3	17.6	1.9		
Punjab	41.4	28.4	12.3	0.7		
Rajasthan	48.5	32.3	14.1	2.1		
Madhya Pradesh	54.3	37.6	15.6	1		
Uttar Pradesh	48.7	33.5	13.7	1.5		
Bihar	63.4	42.9	19	1.5		
Orissa	63	45.1	16.4	1.6		
West Bengal	62.7	45.3	15.9	1.5		
Assam	69.7	43.2	25.6	0.9		
Goa	36.4	27.3	8.1	1		
Gujarat	46.3	29.5	14.4	2.5		
Maharashtra	48.5	31.5	14.1	2.9		
Andhra Pradesh	49.8	32.5	14.9	2.4		
Karnataka	42.4	26.7	13.4	2.3		
Kerala	22.7	19.5	2.7	0.5		
Tamil Nadu	56.5	36.7	15.9	3.9		
		•	<u> </u>	<u> </u>		
All India	51.8	35	14.8	1.9		

Source: NFHS-2, 1998-99.





While analyzing the prevalence of anaemia on a severe scale, it can be observed that the range lies between 0.5% (Kerala) and 3.9% (Tamil Nadu) with the national average of 1.9%. In most of the western and southern states the proportion of women suffering from severe anaemia is high, scoring between 2% and 3%. The states included in this category are Maharashtra, Gujarat, Andhra Pradesh and Karnataka. These are followed by states like Rajasthan, Jammu and Kashmir, Haryana, Orissa, Uttar Pradesh, Bihar, West Bengal and Delhi with the values ranging between 1% and 2%. The states with below 1% of occurrence of severe anaemia are Goa, Madhya Pradesh, Assam, Himachal Pradesh and Punjab apart from that of Kerala having the lowest percentage. The occurrence of mild anaemia is mostly high in the eastern states apart from the backward states where the range lies almost above the national average of 35% and this also holds for the case of mild occurrence of moderate anaemia wherein the national average is 14.8%. The highest and the lowest values for the mild anaemia are 45.3% (West Bengal) and 19.5 (Kerala) respectively and that for the moderate anaemia are 25.6% (Assam) and 2.6% (Kerala) respectively. We can see that the overall performance of Kerala, in case of the occurrence of anaemia of any kind, is far better than rest of the states taken into consideration.

### 2.3 CONCLUSION

In a nutshell it can be summarized that the health situation of ever-married women is quite deplorable in some of the states especially in the rural areas. The women belonging to the states in the eastern and central zone of the country have poorer health status compared to their sisters in other parts of the country. In that case some of the northern states like Delhi, Haryana, Himachal Pradesh and Punjab have better scores in the health status of women. Most of the southern and western states have moderate ranking in the health status of women apart from the states of Kerala and Karnataka, which have really good performance regarding the health factor of women. It needs special mention that the states, which are socio-economically backward, like Rajasthan, Madhya Pradesh, Jammu and Kashmir, Uttar Pradesh and Bihar along with the states like West Bengal, Assam and Orissa have shown the worst performance as far as health statistics are concerned. This

reason may be entitled to the factor where the milieu of the socio-economic and cultural norms and institutions restrict them to look after their own health and they very often suffer from malnutrition as they are often entitled to have food at the last and that too of the least amount. These are, however, backed by other factors like their poor education, economic dependency on others or being the least contributor as earners of the household that cumulatively affect their status in the household, with poor autonomy and lack of awareness. Comparatively the states with better health situations of women have good health infrastructure providing the basic facilities required apart from the factor that their women get better recognition as human beings with higher autonomy and better awareness.

# CHAPTER 3

### CHAPTER - 3

# EDUCATION, WORK PARTICIPATION AND OCCUPATIONAL STATUS OF EVER-MARRIED WOMEN

### 3.1 EDUCATIONAL STATUS OF EVER-MARRIED WOMEN

### 3.1.1 INTRODUCTION

In the various studies related to the status of women educational attainment of women in a broad sense has been considered as one of the determining factors. Female education and reproduction is the basis for assessing the implications of women's status for reproductive decision-making. Some studies have attempted to assess how education may influence women's personal attitudes and their roles in reproductive decision-making. The importance of individual attitudinal changes, both in their own right and in combination with other factors have been frequently emphasised in the analysis of the channels through which formal education operates. In certain studies, educational categories of women are grouped into illiterates and literates. Sometimes the literates are expanded into a few more categories. It is fairly well known that the differentials in fertility behaviour on account of educational status are not very great, when the women studied only up to primary level. Therefore, further analysis and identification of the changes, benefits, limitations, etc., that accompany different levels of education and types of education may also be considered to know the real factors contributing to differential influence of education on fertility behaviour.

Education and fertility have started showing close relationship. It is because of the following reasons:

- a) Educated women are quite conscious of having a limited family size.

- b) At an age when there are very bright chances of having good fertility, the girls are in the colleges and university and thus do not bear children the opportunity of which the uneducated girls get during this period.
- c) In many cases educated women get employed and with employment they cannot afford to have more children.
- d) Span of childbearing period in the case of educated women is much less, as compared to the illiterate women, because the educated women marry at a later age.

Education also broadens horizon and breaks the barriers against the willingness to restrict family size. Education makes the individual more receptive to new ideas and practices and they begin to move from their traditional ways of life towards a more complex, technologically advanced and rapidly changing style of life. Literacy has a positive effect on innovativeness. Hence, other things remaining constant, education ought to be negatively associated with fertility.

Empirical studies have revealed the fact that modestly educated women are aware of fertility regulation in general, better educated women are considerably more likely to have in-depth information on the range of available methods – and on how to use them correctly, on what their side-effects are, and on where they can be obtained. Similarly, well-educated women are considerably more likely to communicate with their husbands on family size and family planning than are uneducated or poorly educated women.

Usually it is observed that fertility among educated women is lower as compared with illiterate women. Education makes them enlightened, and they do not allow fertility rate to go up, as long as that is considered absolutely necessary by the couple. Usually educated women get married at a late stage and also believe in the concept of a small planned family.

Though education ranks high in importance among the various factors affecting fertility behaviour and a direct and powerful indicator of a woman's status, the relationship between education and fertility is extremely complex. Unlike such variables as income and occupation, formal education once obtained does not change over time. Education is intricately associated with many social, economic, psychological attitudes and circumstances. Education depresses fertility through (i) raising the age at marriage, (ii) increasing the propensity to be in the labour force, (iii) fostering favourable attitude towards small family size norm, (iv) increasing awareness and use of family planning methods, (v) increases female participation in family decision taking process (vi) ensuring freedom from tradition and developing rational modern attitude. All these factors in turn have a significant bearing on fertility.

Again female education helps to reduce infant, child and maternal mortality, which in turn help in fertility reduction. Standard theories of fertility decline have focussed on the 'insurance' and 'child replacement' motivations through which increased child mortality is associated with increased fertility.

Education enables access to knowledge about modern views on family size and an ability to question traditional views; a greater awareness of the adverse health consequences of high fertility; changing aspirations for children and for oneself, aspirations which mean higher child-rearing cost; the prestige of being educated compensating for the absence of several children for whatever reason; the higher incomes which reduce the need for children for security; and the reduced fatalism about life in general and fertility control in particular which now brings conscious birth control 'within the calculus of human choice' (Coale, 1973).

Numerous investigations have shown that education have the strongest influence on fertility. Those studies have found that the more schooling completed, the smaller the family size, viz. GAF study (1960), Grabil et.al. (1958); UN Mysore Population study (1961); Driver (1963); Anand (1965); Dandekar (1965); Bhende and Rao (1969); Stycos (1965); Bouvier and Macisco (1968); Knodel et.al. (1973); Registrar General's Survey (1972); Cochrane (1979); Jain (1981); Gregory (1982); Hussain (1970); Rele and Kanitkar (1966); Neeti and Datta (1980); Arora (1983); Reddy (1984) and Pandit and

Choubey (1986). One of World Bank's empirical study has contended that each year of schooling a woman receives reduces her fertility by around 10 percent (Lawrence, 1993).

In less developed and highly gender-stratified settings, a small amount of education tends to increase fertility or has little effect on it. Further increases in education in these settings, however, are almost always associated with fertility declines. There appears to be a threshold level of education beyond which marked negative differentials in fertility are generated; the highest thresholds exist in the least developed societies. Only among more developed societies does the threshold often drop to the lowest level of schooling.

According to the threshold effects – the idea that some minimum level of schooling is needed before an impact is seen – John Cleland and Shireen Jejeebhoy discuss in some detail that as time goes on, the threshold may rise, and more and more schooling is needed before higher levels of women's autonomy or lower levels of fertility are produced. However, in more egalitarian societies thresholds are less regularly observed.

However, some studies have revealed the fact that education has got somewhat a different nature of relationship with fertility, mostly of a positive kind in some cases. Cochrane holds the view that small amount of education in least literate societies might initially increase fertility, while Jain found that the relation between education and fertility is curvilinear, that is, a small increase in educational level results in an increased rate of fertility. Similar observation has been found by Mandelbaum (1974). There also is evidence that this kind of non-linear relationship is not static. It changes with time and the level of development, from curvilinear to inverse and from sharply inverse to moderately inverse.

There are variations between countries and societies in the minimum amount of schooling required before the statistical effect on fertility is noticeable. Empirical studies have revealed the fact that primary schooling alone as inadequate in South Asia, with the magical effect not appearing until women have experienced secondary schooling. Several studies have shown that women with a few years of schooling have higher fertility, but

this is rapidly reversed over time as more women have some schooling and as levels of schooling rise.

The interaction between schooling and fertility would be different at different stages of a demographic transition (Cleland and Jejeebhoy). Before transition begins, when fertility rates are high and female literacy very low, differentials tend to be insignificant. As transition gets under way, a small amount of schooling might make a striking difference to fertility levels. As fertility in the society at large falls, educational level might be a poor predictor of fertility differences, and only very high levels of female schooling experience might predict significantly lower fertility. Towards the end of the transition, by contrast, schooling might lose all its predictive power; when a small family is normative, other factors (like wealth) may be more significantly related to fertility differences.

Having discussed about the literature concerning the educational status of women and their reproductive behaviour, an attempt has been made in the following section to analyse the spatial dimension of the educational status of women over the states of India. The educational status of women has been gauged with the representative variables of primary level, secondary level and higher secondary and above level of education and the overall literacy rates of the ever-married women.

### 3.1.2 SPATIAL DIMENSION OF THE EDUCATIONAL STATUS OF EVER-MARRIED WOMEN

### 3.1.2a RURAL SCENARIO

The state of education among the ever-married women in the rural areas reveals a wide variation over the states of India. To assess the overall educational status of ever-married women the various levels of education namely, primary level, secondary level and higher secondary and above have been taken into consideration apart from the general literacy rates. It shows that the national average of literacy rate for ever-married women is 33% in

the rural India. Among the literate women the national average for women with primary level of education is 18.5%, with secondary level of education is 6.8% and with that of higher secondary and above level it is 7.7%.

To go for the state level analysis, it can be pointed out that though most of the states score above the national average literacy rate, yet some of the backward states are in a real bad condition. The highest percentage of literates among the ever-married women goes for the state of Kerala with a score of 86.1%. The states with more than 50% score are Goa, Himachal Pradesh, Uttar Pradesh, Delhi and Punjab. States like Maharashtra, Assam, West Bengal and Tamil Nadu have their rates ranging between 40% and 50%. In Orissa, Gujarat and Haryana though, the rates are above the national average yet they score below the 40% mark. The states, which have a score below the national average, are Karnataka, Andhra Pradesh, Jammu and Kashmir, Madhya Pradesh and Bihar. Rajasthan scores as low as 15% in the literacy rate. The coefficient of variation is 42.48, which is moderately high and it points out the moderately low consistency of the data.

With the factor of the various levels of education, among the states it can be seen that Kerala (32.2%), Goa and West Bengal have over 30% of their ever-married women who have pursued education till the primary level. Followed by these states are Himachal Pradesh, Maharashtra, Orissa, Punjab, Assam and Tamil Nadu where the percentage ranges between 20% and 30%. All these states along with Gujarat and Delhi have percentages above the national average. Andhra Pradesh, Haryana, Karnataka, Madhya Pradesh, Uttar Pradesh and Bihar scores between 10% and 20% with Jammu and Kashmir below 10% and Rajasthan being the lowest scorer of only 9%. The coefficient of variation for this dataset is 35.63, which predicts moderate degree of consistency over the states.

In case of education up to the secondary level, the data varies between 16.5% and 3.3% with Kerala marking the highest value and Bihar the lowest. States with above 10% of women completing secondary level of education are Delhi, Assam, Himachal Pradesh, Goa, Tamil Nadu and Punjab. Maharashtra, Jammu and Kashmir, West Bengal, Haryana

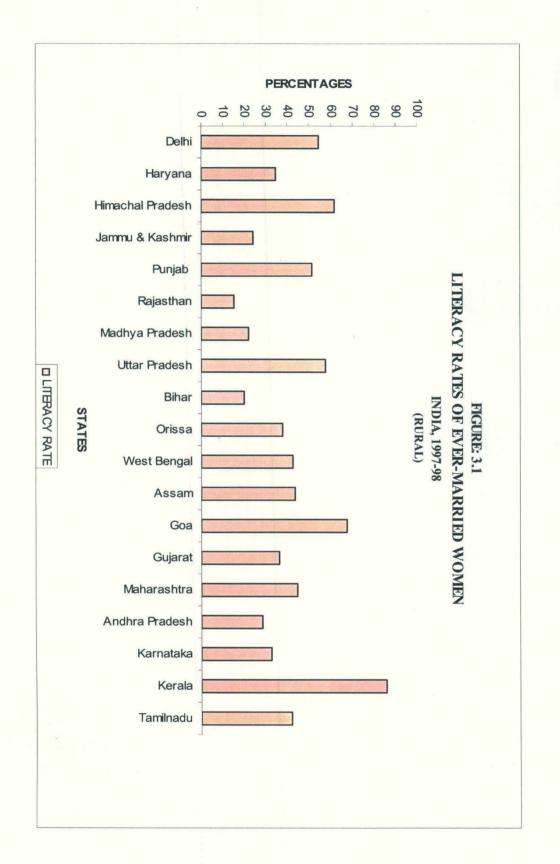
and Gujarat club themselves with the states that have their percentages above the national average. States like Orissa, Uttar Pradesh, Karnataka, Andhra Pradesh, Madhya Pradesh and Rajasthan have their percentages ranging below the national average with the lowest percentage found in Bihar (3.3%). The dataset is moderately low in consistency as can be analysed from the coefficient of variation with a value of 46.54, which is moderately high.

TABLE 3.1
STATUS OF EDUCATION AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(RURAL)

States		Level of	education	
	Primary	Secondary	HS & above	Literates
Delhi	18.9	15.2	20	54.2
Haryana	17.6	7.4	9.5	34.4
Himachal Pradesh	28.9	12.7	20.1	61.7
Jammu & Kashmir	9.8	8.2	6.4	24.3
Punjab	24	10.4	17	51.5
Rajasthan	9	3.6	2.4	15_
Madhya Pradesh	15.1	3.9	3.3	22.2
Uttar Pradesh	11.4	5.9	5.5	57.5
Bihar	10.3	3.3	6.2	19.9
Orissa	25.8	6.5	5.6	37.8
West Bengal	30	7.9	4.5	42.6
Assam	22.6	13.4	7.2	43.3
Goa	30.6	11.7	25	67.3
Gujarat	19.4	7.1	9.5	36
Maharashtra	25.9	9.6	8.9	44.4
Andhra Pradesh	18.9	4.2	5.3	28.4
Karnataka	17.5	5	9.7	32.3
Kerala	32.2	16.5	37.3	86.1
Tamil Nadu	22	10.8	9.2	42.1
All India	18.5	6.8	7.7	33

Source: NFHS-2, 1998-99.

In some of the states of India, the condition of education above the secondary level, that is, higher secondary and its higher levels, is found to be better in the rural areas. The percentages range between 37.3% in Kerala and 2.4% in Rajasthan. States like Goa,



Himachal Pradesh, Delhi and Punjab have their percentages around 20%, which is quite high than the national average of 7.7%. Then there is a sharp fall in the percentages recorded by the states that fall below the 10% mark. The states, which club themselves into this category with above the national average mark, are Karnataka, Gujarat, Haryana, Tamil Nadu and Maharashtra. The states that have their percentages below the national average are Assam, Jammu and Kashmir, Bihar, Orissa, Uttar Pradesh, Andhra Pradesh, West Bengal and Madhya Pradesh with Rajasthan having the lowest value of 2.4%. However, there is much inconsistency in the dataset with a score of 79.56 in the coefficient of variation.

#### 3.1.2b URBAN SCENARIO

The urban sector gives a better picture of the educational status of the ever-married women. The national average of the literacy rate is 66.8 % in urban India. Among them the proportion of women with primary level of education is 21.9% and those with secondary level of education is 12.2%. It can be observed that in urban India a greater proportion of ever-married women go for education beyond the secondary level, that is to say, higher secondary and above levels. The percentage score for this category is as high as 32.8%, which is quite different from the scenario prevailing in the rural areas.

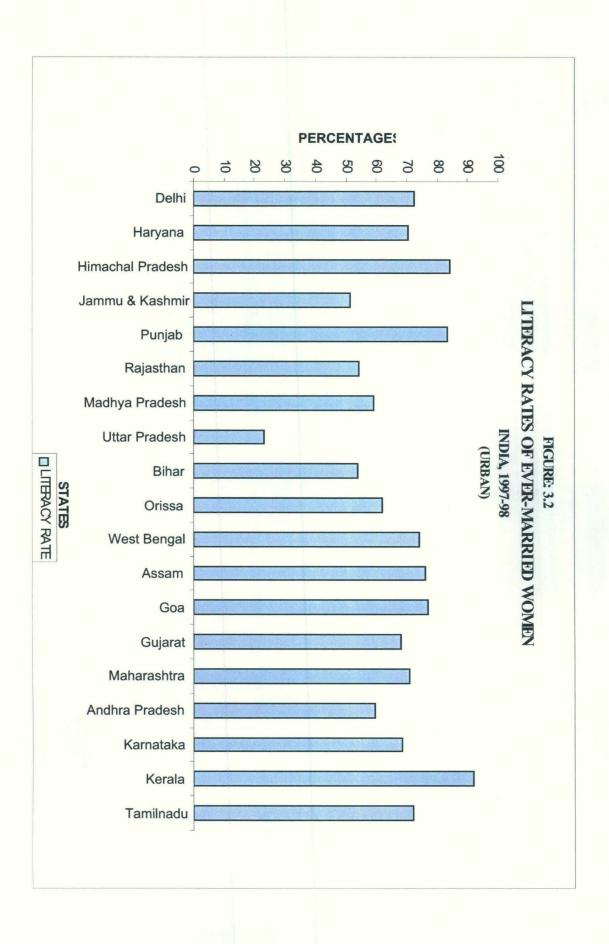
The statewise analysis of the literacy rates in the urban sector reveals the fact that there is a wide variation over the states that range between 92.0% (Kerala) and 22.9% (Uttar Pradesh). The states that score above 70% are Himachal Pradesh, Punjab, Goa, Assam, West Bengal, Delhi, Tamil Nadu, Maharashtra and Harvana. Apart from these states, the other states which score above the national average are Karnataka and Gujarat. The states where the literacy rate is between 50% and 60% are Andhra Pradesh, Madhya Pradesh, Rajasthan, Bihar and Jammu and Kashmir. The lowest amount of literacy among the ever-married women in the urban areas is recorded by the state of Uttar Pradesh. The coefficient of variation for the literacy rate in the urban areas is 22.74, which is highly consistent.

In the urban areas the percentage of women with primary level of education vary between 28.5% (Orissa) and 8% (Jammu and Kashmir). The states with percentages ranging between 20% and 30% are Orissa, Maharashtra, West Bengal, Andhra Pradesh, Tamil Nadu, Kerala, Gujarat, Goa, Karnataka and Assam. States like Madhya Pradesh, Rajasthan, Himachal Pradesh, Bihar, Delhi, Punjab, Haryana and Uttar Pradesh have their percentages between 10% and 20%. Jammu and Kashmir is the only state with the percentage below 10% mark. The coefficient of variation for this dataset is 27.32, which shows a moderately consistent status.

TABLE 3.2
STATUS OF EDUCATION AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(URBAN)

States	L	cation		
	Primary	Secondary	HS & above	Literates
Delhi	14.9	11.1	46.2	72.3
Haryana	14.5	9.8	46.2	70.5
Himachal Pradesh	18.1	12.1	54	84.2
Jammu & Kashmir	8	11.4	31.9	51.4
Punjab	14.9	10.7	57.6	83.2
Rajasthan	18.7	13.1	22.3	54.1
Madhya Pradesh	19.9	11.2	27.7	59
Uttar Pradesh	13.4	10.4	33.7	22.9
Bihar	18	7.9	27.8	53.8
Orissa	28.5	10.4	23.2	62.1
West Bengal	26.7	16.8	30.3	73.9
Assam	20.3	20.7	35	76.1
Goa	22.3	13.7	41.2	77.1
Gujarat	22.8	10.9	34.6	68.2
Maharashtra	28.3	12.4	30.2	71
Andhra Pradesh	25.7	6.7	27.2	59.7
Karnataka	21	9.5	37.8	68.3
Kerala	23.3	19.2	49.3	92
Tamil Nadu	25.4	18.4	28.4	72.2
All India	21.9	12.2	32.8	66.8

Source: NFHS-2, 1998-99.



Women with education upto the secondary level show a more consistency within its range that varies between 20.7% (Assam) and 6.7% (Andhra Pradesh). The states that record above the national average are Assam, Kerala, Tamil Nadu, West Bengal, Goa, Rajasthan and Maharashtra. These are closely followed by the states like Himachal Pradesh, Jammu and Kashmir, Madhya Pradesh, Delhi, Gujarat, Punjab, Uttar Pradesh and Orissa, which score above the 10% mark. The states with less than 10% women in this category are Haryana, Karnataka and Bihar with Andhra Pradesh scoring the lowest record of 6.7%. The consistency of the dataset has been proved by the value of the coefficient of variation that scores 30.42.

In the urban areas the most common feature about education is that a larger proportion of the population go for higher level of education, that is to say, beyond the higher secondary level of education. This is quite different from the rural scenario. The dataset for this category ranges between 57.6% (Punjab) and 22.3% (Rajasthan). The states with above 50% mark are Punjab and Himachal Pradesh closely followed by the states like Kerala, Delhi, Haryana and Goa with above 40% mark. Apart from these states, Karnataka, Assam, Gujarat and Uttar Pradesh also score above the national average. These are closely followed by the states like Jammu and Kashmir, West Bengal and Maharashtra with the percentage above 30%. The states that range between 20% and 30% are Tamil Nadu, Bihar, Madhya Pradesh, Andhra Pradesh and Orissa with Rajasthan scoring the lowest of 22.3%. The coefficient of variation for this variable is 28.66, which proves that it is highly consistent in nature.

## 3.1.2c TOTAL SCENARIO

In this section we can have an overall picture of the status of education among the evermarried women over the states of India. The literacy rate ranges between 87.4% (Kerala) and 23.4% (Bihar) with a national average of 41.8%. The national average for the variable of ever-married women with primary level of education is 19.3%, for that with secondary level of education is 8.3% and for that of higher secondary level and above is 14.2%. The analysis of literacy rate at the state level reveals the fact that Kerala has the highest literacy rate of 87.4%, followed by the states like Goa and Delhi, which record above 70% mark. Then follow, the states like Himachal Pradesh and Punjab where the rate is between 60% and 70%. States like Maharashtra, Tamil Nadu and West Bengal have their literacy rate within the range of 50% and 60%. The other states which score above the national average are Gujarat, Assam, Haryana and Karnataka. The states where the proportions are below the national average are Orissa, Andhra Pradesh, Madhya Pradesh, Jammu and Kashmir, Uttar Pradesh and Rajasthan with Bihar scoring the lowest value of 23.4%. The coefficient of variation is 36.09 and it reveals the moderate consistency of the literacy rates over the states.

The education of ever-married women upto the primary level shows a variation over the states, which ranges between 30.2% (Kerala) and 9.4% (Jammu and Kashmir). The states where the scores are above the national average are Kerala, West Bengal, Himachal Pradesh, Goa, Maharashtra, Orissa, Tamil Nadu, Assam, Punjab, Gujarat and Andhra Pradesh, which range in between 20% and 30%. The states that show poor performance and are below the national average are Karnataka, Haryana, Madhya Pradesh, Delhi, Uttar Pradesh, Rajasthan and Bihar where it ranges between 10% and 20% with Jammu and Kashmir recording the lowest proportion of 9.4%. The overall performance of the states shows moderate consistency with the value of the coefficient of variation as 32.49.

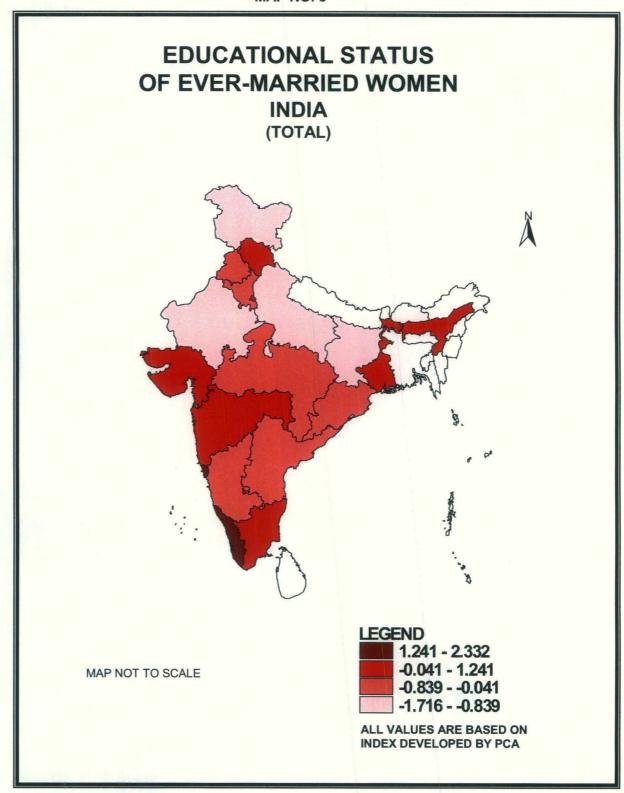
In case of the women completing education upto the secondary level, the proportions vary within a range between 17.1% and 3.8% over the states. Kerala has got the highest percentage of 17.1% followed by the states like Assam, Tamil Nadu, Himachal Pradesh, Goa, Delhi, Maharashtra, Punjab and West Bengal where the percentage range above 10%. Apart from these states like Jammu and Kashmir and Gujarat also score above the national average. Haryana, Orissa, Uttar Pradesh, Karnataka, Rajasthan, Madhya Pradesh and Andhra Pradesh all club themselves in the category of below the national average along with Bihar, which scores the lowest percentage of 3.8%. The variable is moderately consistent over the states with a coefficient of variation score of 37.66.

TABLE 3.3
STATUS OF EDUCATION AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(TOTAL)

States	Level of education						
	Primary	Secondary	HS & above	Literates			
Delhi	15.2	11.6	44.1	70.9			
Haryana	16.7	8.1	20	44.8			
Himachal Pradesh	27.9	12.6	23.2	63.7			
Jammu & Kashmir	9.4	8.9	11.9	30.2			
Punjab	21.2	10.5	0.4	61.2			
Rajasthan	11.4	5.9	30.3	24.5			
Madhya Pradesh	16.3	5.8	26.2	31.5			
Uttar Pradesh	11.8	6.8	12.5	29.8			
Bihar	11.2	3.8	9.1	23.4			
Orissa	26.1	6.9	7.2	40.5			
West Bengal	29.3	10.2	5.5	50			
Assam	22.4	14.1	4.8	46.1			
Goa	27.2	12.5	31.7	71.4			
Gujarat	20.8	8.7	20.2	49.7			
Maharashtra	26.9	10.8	17.7	55.4			
Andhra Pradesh	20.6	4.8	10.8	36.2			
Karnataka	18.7	6.6	19.5	44.8			
Kerala	30.2	17.1	40.2	87.4			
Tamil Nadu	23.2	13.4	15.8	52.5			
All India	19.3	8.3	14.2	41.8			

Source: NFHS-2, 1998-99.

The level of education of higher secondary and above as has been completed by the evermarried women varies widely over the states of India. The highest proportion has been found in Delhi as 44.1% and Punjab records the lowest proportion of 0.4%. The states where it ranges between 30% and 40% are Kerala, Goa and Rajasthan. Over the states of Madhya Pradesh, Himachal Pradesh, Gujarat and Haryana it scores in between 20% and 30%. In the states of Karnataka, Maharashtra, Tamil Nadu, Uttar Pradesh, Jammu and Kashmir and Andhra Pradesh it ranges between 10% and 20%. And those below the 10% mark are Bihar, Orissa, West Bengal, Assam and Punjab. Among these, the states that score below the national average are Tamil Nadu, Uttar Pradesh, Jammu and Kashmir, Andhra Pradesh, Bihar, Orissa, West Bengal, Assam and Punjab. The coefficient of



variation for this variable is 64.72, which is quite high and reveals the moderate inconsistent nature of the dataset.

## 3.1.3 CONCLUSION

Thus it can be highlighted that the education variable shows a wide variation over the states of India. The primary level of education shows relatively lesser variation over the states compared to the secondary level of education and the level of variation increases with higher secondary and above level of education. The states with better socio-economic status and good educational infrastructure have normally performed better regarding this aspect. The states of Kerala, Goa, Himachal Pradesh, Tamil Nadu and Maharashtra cater to this category. However, states of Assam, West Bengal, Delhi, Gujarat and Punjab have performed moderately in the field of female education, though much needs to be done to improve the condition. The central states along with some of the northern and southern states of India in general have the worst performance. This has lot to do with their poor environment of socio-economic status and education infrastructure, which often makes education unable to reach to the poor members of the society at the grass root level contributing to their overall poor performance.

# 3.2 WORK PARTICIPATION AND OCCUPATIONAL STATUS OF EVER-MARRIED WOMEN

#### 3.2.1 INTRODUCTION

Another important factor that influences fertility is the occupation of the ever-married women. Employment outside the home has the potential to reduce women's dependence on others; provide alternative sources of social identity and support; increase women's desire to delay marriage; motivate women to terminate unsatisfactory relationships; and space or limit births. While economic activity generally provide women with resource and its influence on women's reproductive decision-making is determined largely by the underlying institutional structures that govern the value of women's labour in any society and conditions under which women engage in economic activity.

The female labour force participation is a powerful means of depressing fertility. It has been tested in a number of empirical studies and the hypothesis on closer inspection seems to be based on a set of assumptions. *Firstly*, labour force participation raises the age at marriage (UN, 1975; Dubey et.al. 1975; Chaudhery, 1977). *Secondly*, it promotes the use of contraceptives. *Thirdly*, work provides satisfaction alternative to children such as recreation, creative activity and companionship (Berelson, 1969; Blake, 1965; Kirk, 1969). *Fourthly*, employment provides economic independence by dint of which they do not require to look upon children as an old age economic security. *Fifthly*, 'indirect cost' of raising children has a negative bearing on the decision to have an additional child (Blake, 1965). And *lastly*, the net income of the family is increased by the employment of women, which pushes them up in the status scale and subsequently depresses fertility (Cassen, 1976). Researches in developing countries assess that women's control over earnings, not just their employment, is a better predictor of demand for children and subsequent fertility.

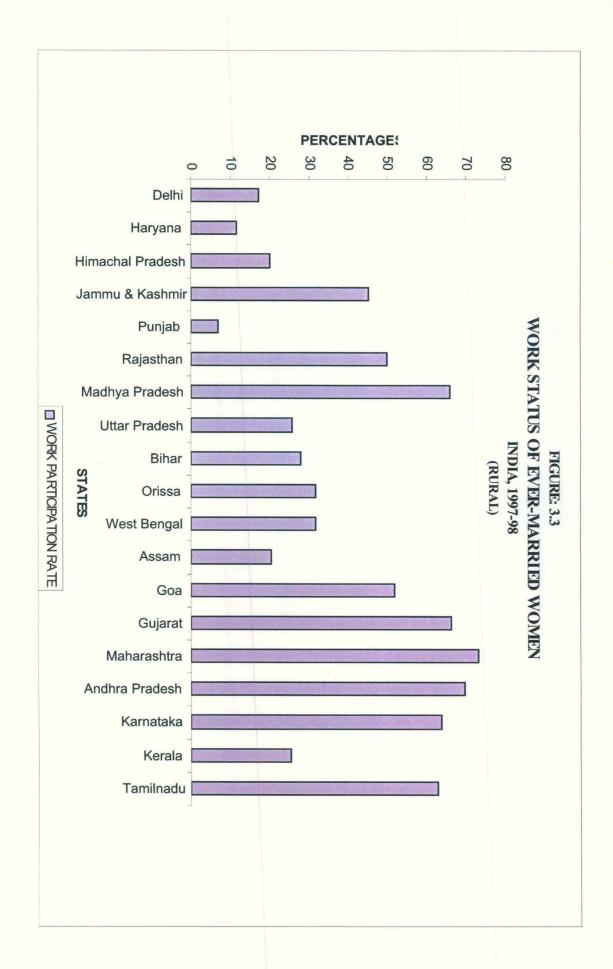
As has been mentioned in the section related to education, similarly classifying women into two categories, namely housewives and working women cannot make any distinction between different work cultures and their influence on fertility behaviour. Working women in different sectors of employment may have different motivations and inhibitions to have a definite number of children. This is because of the fact that the kind of occupation undertaken by the respondents not only reflects her level of education and training but also her socio-economic background, which is inversely related with fertility. It is usually seen that those engaged in mental work, for example, professionals, engaged in white-collar jobs, sales workers, service workers, and the like, have less number of children, as compared with those who do some sort of physical labour. Autonomy of women is enhanced if cooperative work settings are available that allow participation in decision-making, provide credit and marketing facilities, and improve access to jobrelated services such as health and childcare, and it also has its positive impact in reducing fertility. At times the nature of employment, status of the job, chances of social and spatial mobility, etc. may also account for lesser number of children born to a woman.

The empowering effects of employment for women are likely to depend on their occupation, the continuity of their workforce participation, and whether they earn and control income. It is generally expected that women who work at a regular job, who earn money, and who perceive that their contribution is a substantial part of total family earnings are more likely to be empowered than other employed and unemployed women (Youssef, 1982; Sen, 1990; Mahmud and Johnston, 1994). The National Population Policy adopted by the Government of India in 2000 (Ministry of Health and Family Welfare, 2000) explicitly recognises the importance of women's paid employment in achieving the goal of population stabilisation in India and also specifies measures that will encourage paid employment and self-employment of women.

An improvement in women's status arising from their inclusion in the labour market depends on the type of work that they have access to. While modern sector and professional occupations do provide sources of income that allow an increase in independence and autonomy, inclusion constricted by economic necessity into low productivity jobs can have the effect of decreasing status, for it entails a double work burden, increases the number of hours worked (taking from leisure time) while providing but a meager income. In the contemporary times, the status of women has undergone some change, particularly of those who have moved into employment outside the house and that too among those living in the urban areas. Among the employed it is the women in the organised sector who enjoy relatively more economic and social security than those in the unorganised sector. In this way employment, sector of employment and nature and type of employment have become important indicators of women's status in the society. All these have their cumulative effect on the fertility behaviour of the employed women. However, economic dependency plays a role in fertility behaviour when it is combined with the socio-economic and institutional environment. This is because it has been observed that in some societies even women who are not engaged in any gainful activity want smaller families than women who are economically active with different socio-economic and cultural background.

Career for ladies in India is a secondary consideration, primary being marriage and family. Being a traditional male dominated society, men folk rarely share the household chores and the working ladies have to stretch themselves hard to prove themselves at both fronts; home and working place. Role incompatibility is the instant result of this diversification of roles. Thus it is assumed that role incompatibility strains the working ladies hard and compels them to rationalise and plan for smaller family size.

For the present study the variables chosen in the category of work participation of evermarried of women are working in family farm or business, employed by someone else and self-employed apart from the total work force participation of the ever-married women. For that of the occupational status of women the concerned variables are categorised as professional, sales worker, service worker, production worker, agricultural worker and other worker. The following section analyses the spatial distribution of the variables of work participation and occupational status of ever-married women with respect to the rural, urban and total scale.



range is between 60% and 80%. In the states like Orissa, Haryana, West Bengal, Assam, Delhi, Goa, and Kerala the percentages range between 40% and 50%. Punjab has got the lowest number of agricultural workers of 22.3%.

TABLE 3.5
OCCUPATIONAL STATUS AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(RURAL)

States	Occupational Status						
	Professional	Sales Worker	Service Worker	Production Worker	Agricultural Worker	Other Worker	
Delhi	12.2	6	0	0	51.1	24.4	
Haryana	8.3	1.7	2.1	12.9	54.6	18	
Himachal Pradesh	12.1	1.6	0.7	8.2	65.1	11.2	
Jammu & Kashmir	2.6	0.3	0.2	15	80	1.7	
Punjab	12.7	1.6	2.5	28.9	22.3	31.3	
Rajasthan	1.8	0.6	0.4	5.2	83.8	7.4	
Madhya Pradesh	1.6	1	0.2	6.1	85.5	5.4	
Uttar Pradesh	2.4	1.8	0.3	5.9	78.6	9.9	
Bihar	2.2	4.7	0.3	10.6	70.9	10.6	
Orissa	3.8	6	0.9	13.1	54.8	21.3	
West Bengal	3	4	0.1	25	51.7	10.5	
Assam	7	5.4	0.2	13.2	51.5	21.6	
Goa	7.8	6.4	3	11.4	49.5	20.6	
Gujarat	1.7	1.5	0.4	3.5	86.9	5.8	
Maharashtra	2.3	1.3	0.1	4.2	85.9	5.6	
Andhra Pradesh	1.4	2.2	0.3	7	77.2	11.6	
Karnataka	2.1	2.3	0.2	6.7	84.1	4.5	
Kerala	12.8	2.5	1.9	18.4	40.5	23.7	
Tamil Nadu	2	3.4	1.2	11.9	72.1	9.3	
All India	2.5	2.4	0.4	8.6	76.1	9.2	

Source: NFHS-2, 1998-99.

The state of Punjab has got the highest number of workers in the category of other workers with a score of 31.3% followed by the states of Delhi, Kerala, Assam, Orissa, Goa and Madhya Pradesh, with their percentages ranging around 20% and 30%. States like Andhra Pradesh, Himachal Pradesh, Bihar, West Bengal, Uttar Pradesh and Tamil Nadu record their scores in and around 10% mark followed by Rajasthan, Gujarat. Maharashtra, Madhya Pradesh and Karnataka with Jammu and Kashmir scoring the lowest of 1.7%.

In case of the production workers, Punjab has the highest percentage of 28.9% followed by West Bengal, Kerala, Jammu and Kashmir, Assam, Orissa, Haryana, Tamil Nadu, Goa and Bihar, all ranging in around 10% and 20%. The states, which fall below the national average, are Himachal Pradesh, Andhra Pradesh, Karnataka, Madhya Pradesh, Uttar Pradesh, Rajasthan, Maharashtra and Gujarat.

As has been already mentioned, the occupations like professional, sales worker and service worker are of less importance in the rural sector. However, some of the states like Kerala (12.8%), Punjab, Delhi and Himachal Pradesh need special mention for their higher percentages of the ever-married women working as professionals. Rajasthan, Gujarat, Madhya Pradesh and Andhra Pradesh (1.4%) have some of the lowest percentages in this category.

Goa records the highest percentage for both the categories of sales worker (6.4%) and service worker (3.0%). Jammu and Kashmir scores the lowest percentage of sales worker with a value of only 0.3%.

As for the consistency of the data on occupational status is concerned, that of the agricultural worker is the most consistent with a coefficient of variation of 28.12, while that of the service worker, it is most inconsistent with the coefficient of variation of 115.39. The other worker, production worker and the sales worker categories show very low consistencies with their coefficient of variation values of 61.94, 66.63 and 68.81 respectively. However, the professional category shows moderate inconsistency in the dataset with the coefficient of variation value of 82.75.

#### 3.2.2b URBAN SCENARIO

The urban scenario reveals the picture of lesser number of ever-married women joining the workforce. The national average for the total workforce participation of the ever-married women is only 25.6%, with the highest participation rate found in Goa (41.0%) and the lowest in Bihar (13.0%). Tamil Nadu, Jammu and Kashmir, Madhya Pradesh, Maharashtra, Karnataka and Gujarat all club themselves in the range between 30% and 40%. These are followed by the states like Himachal Pradesh, Andhra Pradesh, Rajasthan, Kerala, Orissa and Delhi, which fall in the range between 20% and 30%. The states, which fall below the national average, are Rajasthan, Kerala, Orissa, and Delhi, apart from the states of West Bengal, Assam, Haryana, Punjab, Uttar Pradesh and Bihar that club themselves within the range of 10% and 20%. The coefficient of variation for the total workforce is 32.78, which shows moderate level of consistency.

In the urban sector also, the percentage of ever-married women employed by someone else scores the highest within the total workforce with a national average of 15.3%. This is followed by that of self-employed category and those employed in family farm or business with their respective national averages of 5.9% and 4.4%. The percentages for the category of women employed by someone else vary within the range of 28.3% (Tamil Nadu) and 5.3% (Bihar). The respective highest and lowest values of the self-employed category are 10.4% (Jammu and Kashmir) and 1.1% (Haryana) and for the category of employed in family farm or business, these values are 9.7% (Jammu and Kashmir) and 0.7% (Punjab).

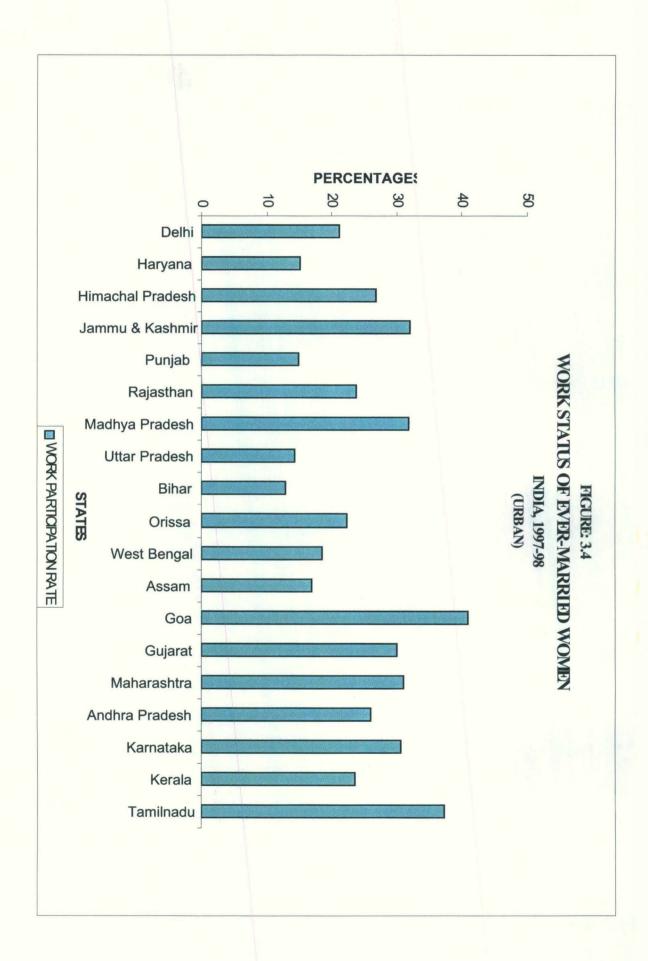
TABLE 3.6
STATUS OF WORK AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(URBAN)

States	Work status					
	Working in Family Farm/Business	Employed By Someone Else	Self Employed	Total		
Delhi	3	13.9	4.2	21.1		
Haryana	0.7	13.3	1.1	15.1		
Himachal Pradesh	1.9	23.7	1.3	26.9		
Jammu & Kashmir	9.7	11.9	10.4	32		
Punjab	0.7	12.7	1.6	15		
Rajasthan	8.3	8.6	6.9	23.8		
Madhya Pradesh	5.9	19.9	6	31.8		
Uttar Pradesh	3.7	5.9	4.7	14.3		
Bihar	3.8	5.3	3.9	13		
Orissa	4.1	10.7	7.5	22.3		
West Bengal	2.5	9.2	6.9	18.6		
Assam	3.6	7.4	5.9	16.9		
Goa ·	7.6	26.6	6.9	41		
Gujarat	6.2	18.1	5.7	30		
Maharashtra	3.9	20.2	6.9	31		
Andhra Pradesh	5.7	14.8	5.6	26.1		
Karnataka	5.4	17.4	7.8	30.6		
Kerala	1.5	14.5	7.6	23.6		
Tamil Nadu	3.5	28.3	5.4	37.2		
All India	4.4	15.3	5.9	25.6		

Source: NFHS-2, 1998-99.

Regarding the occupational status of the ever-married women in the urban sector, the highest percentages of them are employed as production worker wherein the national average is 27.2%. This is closely followed by the other worker category where the national average is 26.1% and professional category has a national average of 17.0%. The agricultural worker score a national average of 15.0% followed by the sales worker with a national average of 9.2% and service worker with a national average of 4.0%.

The highest percentage of production worker is recorded by the state of Jammu and Kashmir with a 46% mark. This is followed by the states like Rajasthan, Madhya



Pradesh, Uttar Pradesh, Tamil Nadu and Andhra Pradesh, which range in between 30% and 40%. The states, which are below the national average, are Karnataka, Kerala, Punjab, West Bengal, Gujarat, Haryana, Delhi and Maharashtra with score ranging between 20% and 30% and Bihar, Orissa, Assam, Himachal Pradesh and Goa, all of which club within the range of 10% and 20%. The state of Goa records the lowest percentage of 14.5%.

TABLE 3.7
OCCUPATIONAL STATUS AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(URBAN)

States	Occupational Status							
	Professional	Sales Worker	Service Worker	Production Worker	Agricultural Worker	Other Worker		
Delhi	26.4	6.7	6.6	21.3	2.1	33.2		
Haryana	46.5	4.8	1.6	22.2	3.2	19.2		
Himachal Pradesh	39.5	6.3	9.7	14.7	4.1	25.3		
Jammu & Kashmir	18.1	2.3	2.8	46	20.1	9.9		
Punjab	41.7	7.4	4	25.5	1.3	20.1		
Rajasthan	13.8	4.3	1.7	39.6	20.1	16.7		
Madhya Pradesh	14.9	7.9	2.9	34.5	25.4	14		
Uttar Pradesh	25.1	12.6	2.9	33.5	4.9	16.9		
Bihar	16.4	14.2	4.3	18.9	21.2	23.7		
Orissa	19	10.4	3.6	18.7	10.3	38		
West Bengal	16.6	9.2	2.7	23.1	2.4	40.7		
Assam	35	5.8	3.5	15.7	0.7	36.1		
Goa	16.8	13.4	6.4	14.5	13.1	34.4		
Gujarat	13	11.9	3	22.2	16.1	32.5		
Maharashtra	15.7	8.6	7.7	21	14.6	30.9		
Andhra Pradesh	12.8	10	5.6	30.4	15.5	25.6		
Karnataka	14.8	8.7	1.8	25.7	22.7	25.8		
Kerala	23.8	5.5	3	25.7	11.5	30		
Tamil Nadu	13.4	9.3	2.6	32.6	17.5	24.2		
All India	17	9.2	4	27.2	15	26.1		

Source: NFHS-2, 1998-99.

The category of other worker varies in between 40.7% (West Bengal) and 9.9% (Jammu and Kashmir). The states, which fall above the national average, are Orissa, Assam, Goa, Delhi, Gujarat, Maharashtra and Kerala with their percentages ranging between 30% and

# 3.2.2 SPATIAL DIMENSION OF WORK PARTICIPATION OF EVER-MARRIED WOMEN

## 3.2.2a RURAL SCENARIO

The work force participation of the ever-married women in the rural sector has been found out to be highly variable over the states of India. In the western and southern states, the percentages recorded are the highest. The state with the highest percentage of workingwomen of the ever-married cohort is Maharashtra (73.1%), followed by Andhra Pradesh, Gujarat, Madhya Pradesh, Karnataka and Tamil Nadu all scoring above 60%. States like Goa, Rajasthan and Jammu and Kashmir record their percentages around 50% mark. The states, which score below the national average of 44%, are West Bengal, Orissa, Bihar, Uttar Pradesh, Kerala, Assam and Himachal Pradesh scoring between 20% and 30% along with Delhi and Haryana, between 10% and 20% and Punjab scoring the lowest of 6.9%. The dataset is moderately inconsistent in nature with the coefficient of variation of 54.01.

Within the total work force of ever-married women, in the rural sector most of them are either employed by someone else or are working in family farm or business. The national average for women working in family farm or business is 18.0% and the data ranges between 0.3% (Punjab) and 37.3% (Rajasthan). For that employed by someone else, the national average is 21.3% and the highest and lowest values are 5.9% (Punjab) and 45% (Tamil Nadu). And for those who are self-employed, the national average is 4.7% with 0.3% (Himachal Pradesh) as the lowest and 8.5% (West Bengal) as the highest scores. The details of the statewise percentages are being represented in the table.

TABLE 3.4
STATUS OF WORK AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(RURAL)

States	Work status					
	Working in Family Farm/Business	Employed By Someone Else	Self Employed	Total		
Delhi	9.3	6.9	1.1	17.3		
Haryana	4.4	6.5	0.6	11.5		
Himachal Pradesh	12.8	7.1	0.3	20.2		
Jammu & Kashmir	35.7	6.6	3	45.3		
Punjab	0.3	5.9	0.7	6.9		
Rajasthan	37.3	9	3.6	49.9		
Madhya Pradesh	33.1	29.9	2.8	65.8		
Uttar Pradesh	14.8	7.6	3.2	25.6		
Bihar	9.7	12.3	6	28		
Orissa	7.5	16.6	7.5	31.6		
West Bengal	6.4	16.8	8.5	31.7		
Assam	4.9	11.2	4.4	20.5		
Goa	15.1	29.1	7.5	51.7		
Gujarat	36	26.3	3.8	66.1		
Maharashtra	32.6	34.6	5.9	73.1		
Andhra Pradesh	22	42.5	5	69.5		
Karnataka	22.6	36.2	4.8	63.6		
Kerala	2.6	17.7	5.1	25.4		
Tamil Nadu	14.1	45	3.5	62.6		
All India	18	21.3	4.7	44		

Source: NFHS-2, 1998-99.

As far as the occupational status of ever-married women is concerned, it can be observed that in the rural areas most of them are engaged as agricultural workers with the national average of 76.1%. This is followed by the other workers and production workers categories with the national averages of 9.2% and 8.6% respectively. The professionals, sales workers and service workers score their respective national averages as 2.5%, 2.4% and 0.4%.

In the states like Gujarat, Maharashtra, Madhya Pradesh, Karnataka, Rajasthan and Jammu and Kashmir the percentages of agricultural workers are above 80% followed by Uttar Pradesh, Andhra Pradesh, Tamil Nadu, Bihar and Himachal Pradesh where the

40%. States like Karnataka, Andhra Pradesh, Himachal Pradesh, Tamil Nadu, Bihar and Punjab range between 20% and 30% and they all fall below the national average along with other states like Haryana, Uttar Pradesh, Rajasthan, Madhya Pradesh and Jammu and Kashmir which score in between 10% and 20%.

The professional category varies within the range of 46.5% (Haryana) and 12.8% (Andhra Pradesh). The states, which have above the national average percentages, are Punjab, Himachal Pradesh and Assam that falls within the range of around 30% and 40%, followed by Delhi, Uttar Pradesh, Kerala, Orissa and Jammu and Kashmir that falls within the range of around 20% and 30%. The rest of the states like Goa, West Bengal, Bihar, Maharashtra, Madhya Pradesh, Karnataka, Rajasthan, Tamil Nadu, Gujarat and Andhra Pradesh all ranging between 10% and 20%.

The participation of ever-married women as agricultural worker is found out to be highest in the state of Madhya Pradesh with a value of 25.4%. This is followed by states like Karnataka, Bihar, Jammu and Kashmir, Rajasthan, Tamil Nadu, Gujarat and Andhra Pradesh, which range around 15% and 25%. The states, which fall below the national average, are Maharashtra, Goa, Kerala, Orissa, Uttar Pradesh, Himachal Pradesh, Haryana, West Bengal, Delhi and Punjab with Assam scoring the lowest percentage of 0.7%.

As far as the sales worker category is concerned, the percentages vary within a range of 14.2% (Bihar) and 2.3% (Jammu and Kashmir). In case of the service worker category, the scores range between 9.7% (Himachal Pradesh) and 1.6% (Haryana).

Within the dataset of the occupational status of the ever-married women, the other worker, production worker and the sales worker categories show moderate consistencies with the coefficient of variation values of 32.84, 33.59 and 38.48 respectively. The categories of professional and service worker show less moderate consistencies with the respective coefficient of variation values of 47.96 and 54.72 and the agricultural worker

category shows very low consistency, rather a tendency towards inconsistency, with a coefficient of variation value of 68.48, as compared to that of the rural sector.

#### 3.2.2c TOTAL SCENARIO

The picture of the workforce participation of the ever-married women over the states of India in both the rural and the urban sectors get averaged out in the total scenario. The percentages of the total workforce participation vary over the states within a range of 58.7% (Andhra Pradesh) and 9.4% (Punjab) with a national average of 39.2%. The states with higher workforce participation are Andhra Pradesh, Madhya Pradesh, Maharashtra, Tamil Nadu, Karnataka and Gujarat, which have their percentages ranging between 50% and 60%. The other states, which are above the national average, are Goa, Rajasthan and Jammu and Kashmir, all of which fall within the range of 40% and 50%. The states scoring below the national average are Orissa, West Bengal, Bihar, Kerala, Uttar Pradesh, Delhi, Himachal Pradesh and Assam, which club themselves within the range of 20% and 30%. Along with these states are Haryana and Punjab, which score the lowest percentages. The coefficient of variation for the total workforce participation is 45.70, which shows that the dataset is moderately consistent in nature.

Within the total workforce participation, the percentages of ever-married women who are employed by someone else is the highest, with a national average of 19.7%, followed by those employed in family farm or business and those who are self-employed with the national averages of 14.4% and 5% respectively. The percentages of ever-married women who are employed by someone else range between 39.2% (Tamil Nadu) and 7.2% (Uttar Pradesh). And the highest and lowest values for the category of those employed in family farm or business are 30.3% (Rajasthan) and 0.4% (Punjab) respectively, and for that of self-employed category the respective percentages are 8.1% (West Bengal) and 0.4% (Himachal Pradesh).

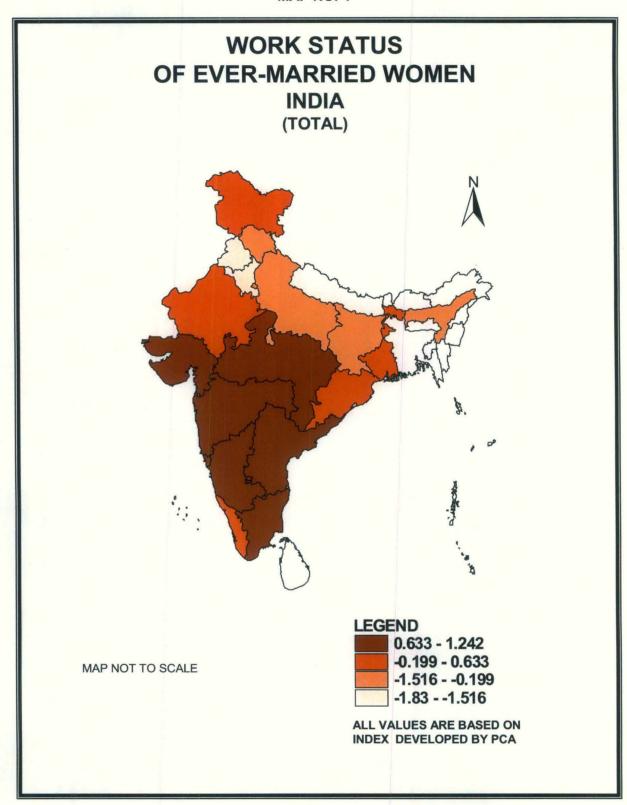
TABLE 3.8
STATUS OF WORK AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(TOTAL)

States	Work status						
	Working in Family Farm/Business	Employed By Someone Else	Self Employed	Total			
Delhi	3.5	13.4	3.9	20.8			
Haryana	3.3	8.5	0.8	12.6			
Himachal Pradesh	11.8	8.6	0.4	20.8			
Jammu & Kashmir	30.1	7.8	4.6	42.5			
Punjab	0.4	8	1	9.4			
Rajasthan	30.3	8.9	4.4	43.5			
Madhya Pradesh	26.2	27.4	3.6	57.2			
Uttar Pradesh	12.5	7.2	3.5	23.2			
Bihar	9.1	11.6	5.7	26.4			
Orissa	7.2	15.9	7.5	30.6			
West Bengal	5.5	14.9	8.1	28.5			
Assam	4.8	10.8	4.5	20.2			
Goa	12	28.1	7.3	47.4			
Gujarat	23.4	22.8	4.6	50.8			
Maharashtra	20.7	28.7	6.3	55.7			
Andhra Pradesh	17.9	35.6	5.2	58.7			
Karnataka	16.6	29.6	5.8	52.1			
Kerala	2.4	16.9	5.7	25			
Tamil Nadu	10.4	39.2	4.2	53.8			
All India	14.4	19.7	5	39.2			

Source: NFHS-2, 1998-99.

In the occupational status of ever-married women, the highest percentage is recorded by the category of agricultural worker with a national average of 65.6% followed by that of other worker and production worker categories with their respective national averages of 12.1% and 11.8%. The professional category comes in the next order with a national average of 5%, closely followed by the sales worker category with a national average of 3.6% and that of service worker with a national average of only 1%.

In analyzing the category of agricultural workers, it has been found out that there is a wide variation over the states with a range between 77.1% (Madhya Pradesh) and 0.9% (West Bengal). The states, which score above the national average, are Madhya Pradesh, Rajasthan, Karnataka, Andhra Pradesh, Jammu and Kashmir, Uttar Pradesh, Gujarat and



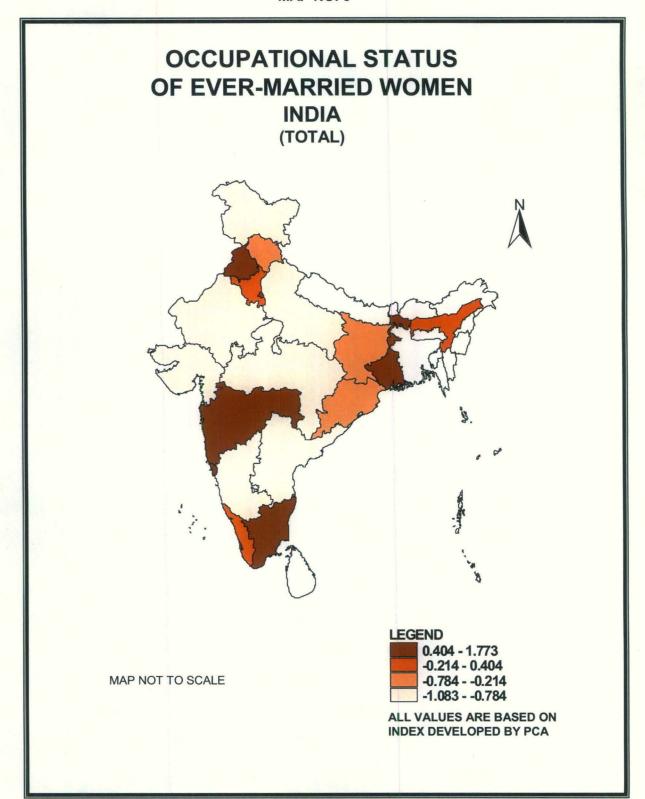
Bihar that all club themselves within the range of 60% and 80%. The states, which fall below the national average, are Himachal Pradesh, Orissa, Assam, Haryana, Goa and Kerala that score within the range of around 35% and 60%. These are followed by the states of Punjab, Delhi, Maharashtra and West Bengal, all of which score in and around 10% with West Bengal recording the lowest of 0.9%.

TABLE 3.9
OCCUPATIONAL STATUS AMONG EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(TOTAL)

States	Occupational Status							
	Professional	Sales Worker	Service Worker	Production Worker	Agricultural Worker	Other Worker		
Delhi	25.5	6.6	6.2	19.9	5.3	32.6		
Haryana	21.6	2.8	1.9	16.1	36.8	18.4		
Himachal Pradesh	15.3	2.1	1.7	9	57.9	12.9		
Jammu & Kashmir	5.1	0.7	0.7	20.1	70.3	3		
Punjab	27	4.4	3.2	27.2	12	25.8		
Rajasthan	3.4	1.1	0.5	9.7	75.4	8.6		
Madhya Pradesh	3.5	2	0.6	10	77.1	6.6		
Uttar Pradesh	5.2	3.1	0.7	9.3	69.6	10.7		
Bihar	2.9	5.2	0.5	11	68.4	11.3		
Orissa	5	6.4	1.1	13.6	51.3	22.7		
West Bengal	17.5	12.9	6.5	10.9	0.9	45.9		
Assam	9	5.4	0.4	13.4	47.5	22.7		
Goa	11.1	8.9	4.2	12.5	36.3	25.6		
Gujarat	4.6	4.1	1.1	8.2	69.2	12.5		
Maharashtra	19.6	11.7	9.7	19.5	2.7	35.5		
Andhra Pradesh	2.6	3	0.9	9.6	70.3	13.2		
Karnataka	4.7	3.6	0.5	10.6	71.5	8.9		
Kerala	15.2	3.1	2.2	20	34.2	25.1		
Tamil Nadu	19.2	16.4	4.5	13.5	0	43		
All India	5	3.6	1	11.8	65.6	12.1		

Source: NFHS-2, 1998-99.

The category of other worker has their percentages ranging between 45.9% (West Bengal) and 3.0% (Jammu and Kashmir). Most of the Indian states have their percentages above the national average, which are West Bengal, Tamil Nadu, Maharashtra and Delhi that score between 30% and 50%, followed by Punjab, Goa, Kerala, Orissa and Assam that fall within the range of 20% and 30%, and the states of Haryana, Andhra Pradesh,



Himachal Pradesh and Gujarat that range between 10% and 20%. The states below the national average are Bihar, Uttar Pradesh, Karnataka, Rajasthan, Madhya Pradesh and Jammu and Kashmir, all of which range mostly within 10%.

Regarding the category of the production worker, the state of Punjab scores the highest of 27.2% and Gujarat scores the lowest of 8.2%. Apart from Punjab, the other states that fall above the national average mark are Jammu and Kashmir, Kerala, Delhi, Maharashtra, Haryana, Orissa, Tamil Nadu, Assam and Goa, all of which range in between 10% and 20%. The states that fall below the national average are Bihar, West Bengal, Karnataka, Madhya Pradesh, Rajasthan, Andhra Pradesh, Uttar Pradesh, Himachal Pradesh and Gujarat, all of them clubbing themselves within the score ranging in and around 10%.

The percentages of professional category of occupation range between 27.0% (Punjab) and 2.6% (Andhra Pradesh). The states, which have comparatively higher scores, are Punjab, Delhi, Haryana, Maharashtra, Tamil Nadu, West Bengal, Himachal Pradesh and Kerala – all of them ranging in and around 15% and 25%. Apart from these states, Goa, Assam, Uttar Pradesh, Jammu and Kashmir and Orissa also score above the national average. Rest of the states like Karnataka, Gujarat, Madhya Pradesh, Rajasthan, Bihar and Andhra Pradesh score below the national average.

The sales worker category ranges in between 16.4% (Tamil Nadu) and 0.7% (Jammu and Kashmir). As far as the service worker category is concerned the states have their records ranging in between 9.7% (Maharashtra) and 0.4% (Assam).

While analyzing the dataset, it has been found that out of the total data on the occupational status, the production worker shows moderate consistency in the data with the coefficient of variation value of 37.32. The other worker and agricultural worker categories also show moderate consistencies but towards a lower level with their respective coefficient of variation values of 60.92 and 63.10. The professional and the sales worker categories, however, have low to moderate inconsistent nature of dataset with their coefficient of variation of 72.14 and 77.85 respectively. But the most

inconsistent nature of data have been found in the case of that of service worker category with the coefficient of variation of 105.44, which is quite a high value.

## 3.2.3 CONCLUSION

In a nutshell it can be summarized that the work participation of ever-married women has portrayed a picture of its varied spatial distribution. Where the societies are more conservative regarding the aspect of women working outside the house, the participation of ever-married women in the workforce have shown lower percentages. Until and unless they are compelled to join the workforce by the economic status of their household, they mainly stay away from joining the workforce outside the house. However, women belonging to the more advanced and liberal societies have a comparatively better work participation rate. They try to prove their economic independence by joining the workforce. Regarding the occupational status of women, in the rural areas women are mostly engaged as agricultural workers, while in the urban areas they are mainly engaged as production workers, other workers or as professional workers. In the service worker and sales worker categories, they are found to be engaged in very small proportions. In case of the work participation, the southern states and the western states of India mostly perform well compared to the rest of India. The occupational status reveals the fact that the progressive states from all the four zones of India have performed really well. States of Maharashtra, Tamil Nadu, West Bengal, Delhi, Punjab, Goa and Kerala fall in this category. Thus we can say that women's participation in the work force is mainly guided by a milieu of socio-economic and cultural factors in the Indian scenario.

# **CHAPTER 4**

## CHAPTER - 4

## AUTONOMY OF EVER-MARRIED WOMEN

#### 4.1 INTRODUCTION

The dictionary defines 'autonomy' as the right to self-government and at the individual female level, this meaning could be extended to define autonomy as the right of a woman to rule her own life. Autonomy is the woman's ability and right to make her own decisions about how she will conduct her life.

Issues with respect to women's autonomy are raised in many of the papers with reference to the work of Tim Dyson and Mick Moore. For them, 'autonomy' is 'the capacity to manipulate one's personal environment' and 'the ability – technical, social, and psychological – to obtain information and to use it as the basis for making decisions about one's private concerns and those of one's intimate' (Dyson and Moore, 1983).

In the simplest form, autonomy implies the freedom or ability to make decisions on a given matter, or the right to exercise choice. Freedom, defined as the right to make one's own choices, as long as these do not harm others. But even in this simple form, words such as freedom, ability and choice acquire a menacing complexity.

To quote Amartya Sen (1992), "the issue of equality immediately arises as a supplement to the assertion of the importance of liberty". He explained that the happiest form of female autonomy is one wnich raises female freedom to levels similar to those of males, without surpassing these or ending up merely replacing one system of absolute authority with another.

Women's status in the households as well as in the society get reflected by the autonomy and decision-making power they hold in different household matters, which in turn helps towards improvement in their productive and reproductive roles in the household and

communities that are considered essential for the overall demographic and development processes.

Understanding the complexity of women's status has led to the development of alternative concepts such as female autonomy, women's rights and men's situational advantage. Mason's review of these diverse concepts indicates that most of these, focus on gender inequality. Three dimensions of gender inequality highlighted most commonly are inequality in prestige, inequality in power and inequality in access to or control over resources. Because there is more than one dimension and location in which it is possible for men and women to be unequal, women may be powerful in one dimension, such as routine household affairs, while completely powerless in another, such as control over productive resources, including their own labour. Gender inequality may vary by location such as the social unit, and by stage in the life cycle.

Regarding the autonomy in terms of monetary aspects, women must have an independent source of income if they are to have the kind of freedom needed for them to make their own decisions about expenditures. In the absence of women's formal sector employment opportunities, structures of subordination co-exist with a reluctance of women to seek 'autonomy'. While relating the economic autonomy of women with fertility behaviour, it is fair to comment that the women's status variable most strongly connected with demand through the implied need for or benefits from children is the variable of economic and other autonomy; the greater her economic and social dependence, the greater her need for several children.

The autonomy of women empowers them in many spheres – in terms of knowledge, decision-making, control over economic and other household resources, interaction with the outside world, and intimacy within the conjugal family. These aspects of autonomy not only enhance women's well being but also bear on decisions relating to reproduction. From the fertility change point of view, perhaps what is crucial, is the absolute level of female autonomy irrespective of the gap between male and female authority levels.

However, the position of women is unusual. Often it can be found that they have to deal not only with external constraints on their behaviour but also with the implications of the ways in which older women police the behaviour of younger women. In such circumstances, we might expect women to engage in everyday resistance to the powers that limit their scope for action. Herein lies the importance of autonomy, where they can voice out their rights and demands. Thereby, focusing on women's reproductive rights provides a useful corrective to any idea that women's autonomy (in terms of domestic relationships) by itself, can ensure that her reproductive goals are reached.

Women's autonomy is likely to have a significant impact on the demographic and health-seeking behaviour of couples by altering women's relative control over fertility and contraceptive use, and by influencing their attitudes (for example, attitudes towards the sex composition of children) and abilities (for example, the ability to obtain health services for themselves and their children) (Sen and Batliwala, 1997). Women's status and autonomy are critical in promoting change in reproductive attitudes and behaviour, especially in patriarchal societies (Dyson and Moore, 1983; Das Gupta, 1987; Jeffery and Basu, 1996). Increased female autonomy plausibly allows more scope to obtain family planning information and supplies, and, perhaps more importantly, to exercise the right to have as few children as they desire. Thus family planning programmes can facilitate the former, but cannot really promote the domestic authority a woman might need in order to be able to use the available family planning services.

Education, work participation, and exposure to mass media are some of the means by which women gain status and autonomy, both of which are important aspects of their empowerment. To measure autonomy and empowerment of women more directly, in the present study a number of dimensions have been considered, since it is a composite variable. These include, individuality of women represented by variables like participation as a decision-making authority within the family unit or household and own health care, freedom of movement, access to money that they can spend as they wish, and decision about expenditure of money by them etc. All these items can be placed on a

continuum to measure the relative differential status of women on a number of facets of their life.

# 4.2 SPATIAL DIMENSION OF AUTONOMY OF EVER-MARRIED WOMEN

#### 4.2.1 RURAL SCENARIO

The autonomy of ever-married women of the rural sector varies widely over the states of India. The rural women are mostly entitled to the decision-making process pertaining only to the household chores like cooking. They mostly have lesser voice in deciding about certain factors like purchasing of products required by them, in staying with their parents or siblings, or their own health care. They also have restricted freedom of movement like going to market places or visiting friends or relatives. Regarding the factor of access to money, they also have to follow certain restrictions and they don't have easy access to money. In most of the cases they are also not entitled to spend the money earned by them. The statistics available for the study shows that the related factors vary from state to state. However, in the backward states of India the conditions prevailing are worse than the rest of India.

The freedom of decision-making about the daily chores of cooking by the ever-married women records the highest values in all the states with the percentages ranging between 96.7% (Punjab) and 76.4% (Uttar Pradesh) and the national average is 84.7%. Among the states, Punjab, Himachal Pradesh, Haryana, Tamil Nadu, and Goa score above 90%. Along with these states, Gujarat, Delhi, Karnataka, Assam, Maharashtra, West Bengal, Andhra Pradesh and Orissa have their records above the national average. The coefficient of variation for this variable is 6.62, which shows very high consistent nature of the data.

Regarding the freedom of deciding about the purchasing of jewellery, etc. by the ever-married women, the dataset ranges between the highest of 93.3% (Himachal Pradesh) and the lowest of 39.2% (Uttar Pradesh) with the national average of 49.9%. The states that rank higher in the range are Himachal Pradesh, Haryana, Punjab, Gujarat, Tamil Nadu, Kerala and Andhra Pradesh all scoring above 60%. Along with these states are the other ones that also score above the national average like Goa, Jammu and Kashmir, Delhi,

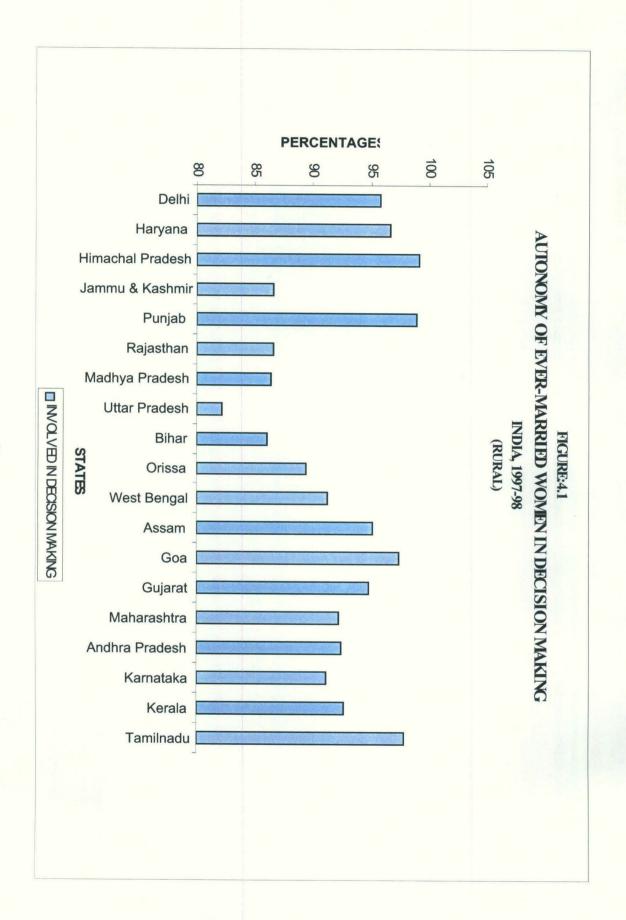
Orissa, Assam and Madhya Pradesh. Here the coefficient of variation is 24.65, marking a moderately consistent data variable.

TABLE 4.1
AUTONOMY OF EVER-MARRIED WOMEN IN DECISION MAKING PROCESS
OVER THE STATES OF INDIA
(RURAL)

States	Women	involved in ho	Women involved in any decision making		
1	What to	Purchasing	Staying with	Own health	
•	cook	jewellery, etc.	parents/siblings	саге	<del></del>
Delhi	88.5	55.3	44.2	66	95.8
Haryana	93.7	76.5	64	67.7	96.7
Himachal Pradesh		93.3	91.2	80.7	99.2
Jammu & Kashmir	79.5	56.1	46.9	54.3	86.6
Punjab	96.7	73.3	67.1	80.9	98.9
Rajasthan	82.7	40.8	37.8	38.4	86.6
Madhya Pradesh	77.8	50.8	44.2	43.5	86.4
Uttar Pradesh	76.4	39.2	34.1	43	82.2
Bihar	82.3	41.8	43.1	46.9	86.1
Orissa	86.3	54.5	48.3	38.4	89.4
West Bengal	87	43.8	41.7	41	91.3
Assam	88	53.4	44	64.7	95.2
Goa	90.7	59.4	72.7	60.4	97.4
Gujarat	89.2	68.8	59.6	66.3	94.8
Maharashtra	87.8	46.8	41.1	44	92.2
Andhra Pradesh	86.4	60.3	57.1	55.9	92.4
Karnataka	88.1	43.5	41.1	45.9	91.2
Kerala	81	63.2	59.6	72.5	92.7
Tamil Nadu	93.1	66.8	61.8	59.5	97.9
All India	84.7	49.9	45.7	49	89.7

Source: NFHS-2, 1998-99.

In case of decision-making about staying with parents or siblings, most of the states record lower than 50% mark. The variable ranges between 72.7% (Goa) and 34.1% (Uttar Pradesh), apart from the state of Himachal Pradesh scoring a very high percentage of 91.2%, with a national average of 45.7%. The states that range above the national average are Goa, Punjab, Haryana, Tamil Nadu, Kerala, Gujaat, Andhra Pradesh, Orissa and Jammu and Kashmir, all of which range in and around 50% and 70%. The coefficient of variation is 27.39, depicting a moderately consistent dataset.



The decision-making about taking care of their own health also shows low scores in general over the states. It varies between as high as 80.9% in Punjab and as low as 38.4% in Rajasthan with a national average of 49%. The states with higher percentages are Punjab, Himachal Pradesh, Kerala, Haryana, Gujarat, Delhi, Assam and Goa, all scoring in between 60% and 80%. The coefficient of variation shows a 24.59 score, which goes for the moderate to high consistent nature of the data.

However, the percentages showing the ever-married women taking any kind of household decision-making are of higher values ranging mostly between 80% and 90%. The highest and the lowest values are 99.2% (Himachal Pradesh) and 82.2% (Uttar Pradesh) respectively with a national average of 89.7%. The coefficient of variation is also of lower value of 5.39, depicting the very high consistent nature of the data.

Regarding the freedom of movement, both the variables, of going to market and visiting friends or relatives, mostly show lower percentage values. In case of freedom of going to market, the national average is only of 26.1% whereas that of visiting friends or relatives is even lower with only 20.6%. The highest and the lowest values for the variable of freedom to go to market are 77.5% (Tamil Nadu) and 8.7% (Jammu and Kashmir). Apart from Tamil Nadu and Goa, most of the states score below the 50% mark with some of the states having percentages below 20% and 10%. As for the freedom of visiting friends or relatives, again Tamil Nadu has the highest percentage of 54.7% and Jammu and Kashmir has the lowest of 6.5%. Here also some of the states score below 40% mark and most of them below 20%, apart from Tamil Nadu and Goa. Both the variables have moderately high coefficient of variation scores, depicting the lower degree of consistency in the data – the freedom to go to market scores 56.72 and freedom to visit friends or relatives scores 57.36.

The access to money is another variable representing the autonomy of ever-married women, which also shows wide spatial variability. The percentages range between 81.4% (Goa) and 32.9% (Assam) with a national average of 54.6%. The states that score above the national average are Goa, Himachal Pradesh, Tamil Nadu, Punjab, Delhi, Madhya

Pradesh, Gujarat, Bihar, Haryana, Kerala and Karnataka recording in between 60% and 80%, closely followed by Maharashtra, Andhra Pradesh and Jammu and Kashmir. The rest of the states of Uttar Pradesh, West Bengal, Orissa, Rajasthan and Assam score below the national average ranging between 30% and 50%. The coefficient of variation is 23.40, which is of moderate consistent nature.

TABLE 4.2
AUTONOMY OF EVER-MARRIED WOMEN IN FREEDOM OF MOVEMENT AND ACCESS TO MONEY OVER THE STATES OF INDIA
(RURAL)

States	Freedo	Freedom of movement	
	Go to market	Visit friends/ relatives	
Delhi	39.5	15.2	68.5
Haryana	31.4	16.3	64.8
Himachal Pradesh	30.7	29.6	79
Jammu & Kashmir	8.7	6.5	54.6
Punjab	47.9	24.8	73.7
Rajasthan	15.3	14.1	35.4
Madhya Pradesh	35.2	32.3	68
Uttar Pradesh	14.7	10.9	47.8
Bihar	20.7	19.6	65.6
Orissa	16.9	14.5	43.8
West Bengal	15.4	12.8	46.2
Assam	12.6	13.3	32.9
Goa	62.2	53.9	81.4
Gujarat	45.4	40.5	67.9
Maharashtra	37	25.5	57.6
Andhra Pradesh	18.6	14.2	55.1
Karnataka	37.7	30.7	60.3
Kerala	44.7	35.8	64.4
Tamil Nadu	77.5	54.7	77.2
All India	26.1	20.6	54.6

Source: NFHS-2, 1998-99.

The ever-married women are often not entitled to have a control over the expenditure of the money earned by them. They often have to consult with their husband or with other people in the household and in some cases their husband or the others in the household alone decides about the expenditure of the money. However, the interference of the husband is much more than the other members of the household, As per the statistics

available, the national average for the category where the respondent, that is, the evermarried women, alone decides about the expenditure of the money is 36.5%, where the highest and the lowest values are 65.1% (Goa) and 27.7% (Orissa) respectively. The states that score above the national average are Goa, Delhi, Jammu and Kashmir, Himachal Pradesh, Punjab, Haryana, and Bihar recording above 50% mark, followed by West Bengal, Uttar Pradesh, Kerala, Assam and Tamil Nadu, all having percentages in and around 40% and 50%. The coefficient of variation for this is 28.04, which shows a moderately consistent nature towards a higher level. In the category where the husband only decides about the expenditure of money, Maharashtra scores the highest of 39.7% and Himachal Pradesh scores the lowest of 6.4% with the national average of 31%. States like Maharashtra, Karnataka, Madhya Pradesh, West Bengal, Orissa and Andhra Pradesh have their percentages above the national average. The coefficient of variation for this is 45.90, depicting its moderate consistency. The percentages of respondents who take the decision of expenditure of money along with their husband, vary between 41.7% (Gujarat) and 13.4% (West Bengal) with the national average of 25.3%. Gujarat, Himachal Pradesh, Assam, Orissa, Kerala, Andhra Pradesh, Haryana, Tamil Nadu, Punjab, Rajasthan and Madhya Pradesh have their records above the national average. The coefficient of variation is 26.30, which shows a moderate consistent data. However, the percentages of the category where the other members of the household take the decision about the expenditure of money range between 5.9% (Andhra Pradesh) and 0% (Delhi, Haryana, Himachal Pradesh, Punjab) with the national average of 3.5%. The data is very inconsistent in nature with the coefficient of variation of 86.46. In the category where the respondent takes the decision of spending the money along with the other members of the household, Punjab scores the highest of 5.2% and Delhi has got 0% with the national average of 3.6%. Here also the data is moderately consistent with the coefficient of variation of 41.34.

TABLE 4.3
AUTONOMY OF EVER-MARRIED WOMEN IN EXPENDITURE OF THE MONEY
EARNED BY THEM OVER THE STATES OF INDIA
(RURAL)

States	Decision about the Expenditure of Money Earned by the Respondent (Women)							
	Respondent only	Husband only	Respondent with Husband	Others in Household only	Respondent with others in household			
Delhi	59.8	16.2	24	0	0			
Haryana	56.7	11.4	29.3	0	2			
Himachal Pradesh	57.9	6.4	33.9	0	1.7			
Jammu & Kashmir	59.6	11.4	20.1	5.7	3.2			
Punjab	57.9	9.6	27:3	0	5.2			
Rajasthan	35.7	28.7	26.7	5.8	3			
Madhya Pradesh	27.9	36.4	26.6	4.3	4.8			
Uttar Pradesh	42.8	30.4	19.6	2.2	3.4			
Bihar	50.4	26.7	19.9	0.4	2.6			
Orissa	27.7	32.5	33.3	2.5	4			
West Bengal	46.5	35.4	13.4	1 .	3.7			
Assam	39.2	23.9	33.6	0.4	2.3			
Goa	65.1	7.9	21.6	3.5	1.9			
Gujarat	34.5	15.7	41.7	3.9	4.2			
Maharashtra	31.1	39.7	19.7	5.6	3.8			
Andhra Pradesh	29.3	31.4	30.5	5.9	2.9			
Karnataka	35.9	36.9	19.3	5.5	2.3			
Kerala	39.9	22.3	31	2	4.8			
Tamil Nadu	38.2	27.4	28	1.6	4.6			
All India	36.5	31	25.3	3.5	3.6			

In order to get the overall picture of the autonomy of women, the Principal Component Analysis (PCA) has been run including all these variables, to capture the interrelationships among the variables also. The resultant factor scores have been ranked to analyse the statewise position of the ever-married women regarding their status of autonomy. The following table represents the PCA factor scores and the ranks arranged in the fashion where the highest factor score has been assigned the lowest rank.

TABLE 4.4
AUTONOMY OF EVER-MARRIED WOMEN OVER THE STATES OF INDIA
(RURAL)

States	PCA Autonomy	Rank
Himachal Pradesh	1.97343	1
Punjab	1.43775	2
Goa	1.25366	3
Haryana	1.01687	4
Tamil Nadu	1.01201	5
Gujarat	0.74286	6
Delhi	0.48671	7
Kerala	0.37122	8
Assam	-0.20541	9
Andhra Pradesh	-0.36296	10
Jammu & Kashmir	-0.59814	11
Bihar	-0.61257	12
Karnataka	-0.63227	13
Maharashtra	-0.74282	14
Orissa	-0.75942	15
Madhya Pradesh	-0.82135	16
West Bengal	-0.87757	17
Rajasthan	-1.28828	18
Uttar Pradesh	-1.39372	19

### **VARIABLES:**

- 1. Decision to cook
- 2. Decision to purchase jewellery, etc.
- 3. Decision to stay with parents/siblings
- 4. Decision about own health care
- 5. Freedom of movement to market
- 6. Freedom of movement to visit friends/relatives
- 7. Access to money
- 8. Involved in any kind of decision making
- 9. Decision about expenditure of money earned by the respondents taken by respondent only
- Decision about expenditure of money earned by the respondents taken by husband only
- 11. Decision about expenditure of money earned by the respondents taken by respondent along with husband
- 12. Decision about expenditure of money earned by the respondents taken by others in the household
- 13. Decision about expenditure of money earned by the respondents taken by respondent along with others in the household

### 4.2.2 URBAN SCENARIO

The condition regarding the autonomy of ever-married women in decision-making in the urban areas is better than that of their rural counterparts. The statistics shows that the overall percentages of the variables representing the factor of autonomy are much higher in the urban scenario.

In case of the variable regarding the decision-making of household chores like cooking, it is the women who generally are taking majority of the decisions. The range for this variable is between 96.5% (Punjab) and 80.7% (Kerala) with a national average of 86.3%. The states that score above the 90% mark are Punjab, Himachal Pradesh, Assam, Haryana, Gujarat and Tamil Nadu. Along with these states, Karnatāka, Goa, West Bengal and Maharashtra also score above the national average. The coefficient of variation is 5.60 and it shows strong consistent nature of the data.

Regarding the decision-making about purchasing of jewellery etc., the national average is 60.4% and the state of Himachal Pradesh scores the highest of 93.7% and Madhya Pradesh has the lowest percentage of 42.1%. The states that score above the national average are Himachal Pradesh, Haryana, Gujarat and Punjab recording around 80% and more, followed by Tamil Nadu, Goa, Jammu and Kashmir, Andhra Pradesh, Kerala, Assam and West Bengal all having their percentages ranging between 60% and 70%. The rest of the states have their percentages below the national average and ranging around 50% and 60%. The coefficient of variation marks a moderate value of 20.32, depicting the moderate consistency towards a higher level in the data.

The variable showing the percentage of ever-married women taking decision about staying with parents or siblings has a national average of 54.6% and the state of Himachal Pradesh scores the highest of 93.1% and Madhya Pradesh has the lowest of 36.0%. Apart from Himachal Pradesh, the other states scoring higher percentages are Gujarat and Goa with above 70% mark, Punjab, Haryana, Tamil Nadu, West Bengal, Kerala and Assam recording in between 60% and 70%, closely followed by Andhra pradesh and Jammu and

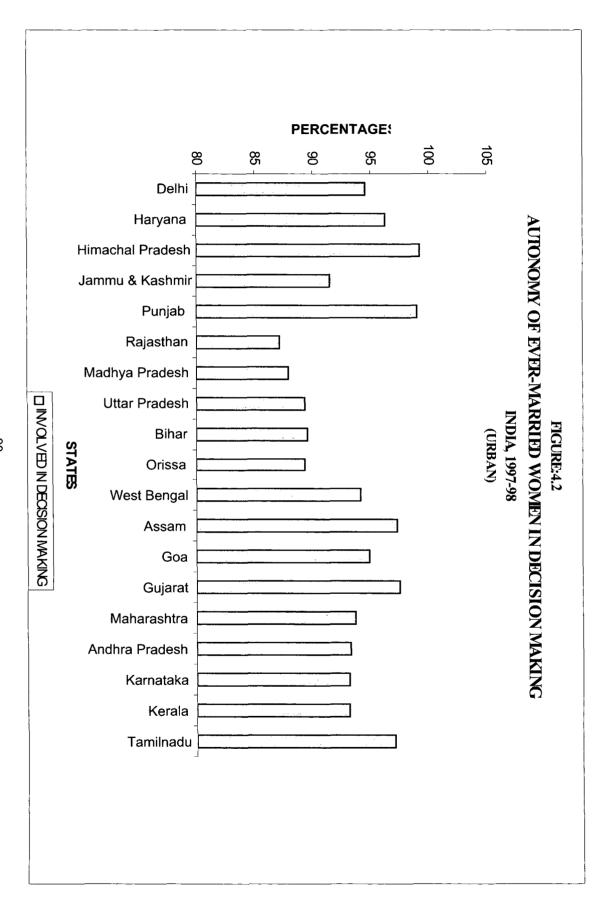
Kashmir – all having their percentages above the national average. The coefficient of variation for this is 22.77, showing the moderate to high consistent nature of the data.

TABLE 4.5
AUTONOMY OF EVER-MARRIED WOMEN IN DECISION MAKING PROCESS
OVER THE STATES OF INDIA
(URBAN)

States	lnv	olved in house	Women involved in any decision making		
	What to	Purchasing	Staying with	Own health	
	cook	jewellery, etc.	parents/siblings	care	
Delhi	82.6	58.8	46.7	69	94.6
Haryana	92.9	81.3	65.7	65.9	96.3
Himachal Pradesh	94.8	93.7	93.1	82.4	99.2
Jammu & Kashmir	82.1	65.9	55.9	59.6	91.5
Punjab	96.5	79.7	68.6	73.2	99
Rajasthan	81.1	48.6	43.7	47.2	87.2
Madhya Pradesh	83.1	42.1	36	34.2	87.9
Uttar Pradesh	83.2	50.1	44.2	51.9	89.4
Bihar	83.2	52	51.3	54.2	89.6
Orissa	86	57.2	48.5	39.6	89.4
West Bengal	88.6	63.3	62.4	58.3	94.1
Assam	93.2	63.3	60.1	68.8	97.3
Goa	88.8	66.9	71.9	63.2	94.9
Gujarat	92	80	72.5	78.2	97.5
Maharashtra	87.1	55.2	49.1	58.3	93.7
Andhra Pradesh	85.8	65	59.5	56.8	93.3
Karnataka	89.1	54.4	50.7	55.5	93.1
Kerala	80.7	63.9	60.3	72.6	93.2
Tamil Nadu	90.3	68.7	63.7	64	97.1
All India	86.3	60.4	54.6	58.9	92.9

Source: NFHS-2, 1998-99.

The variable regarding the decision-making about their own health care, the ever-married women of the urban areas shows higher percentages than their rural counterparts. The national average for this variable is 58.9% and the highest and the lowest percentages are 82.4% (Himachal Pradesh) and 34.2% (Madhya Pradesh) respectively. The states having their percentages above the national average are Himachal Pradesh, Gujarat, Punjab, Kerala, Delhi, Assam, Haryana, Tamil Nadu, Goa Jammu and Kashmir, all of them



ranging around 60% and 80%. The data is moderate to high consistent in nature with the coefficient of variation of 20.40.

However, the overall percentages of ever-married women involved in any kind of decision-making in the urban areas are mainly ranging around 90% and above with the highest and the lowest values of 99.2% (Himachal Pradesh) and 87.2% (Rajasthan) respectively with the national average of 92.9%. The coefficient of variation is also showing a very consistent nature of the data with a value of 3.91.

Regarding the freedom of movement of ever-married women in the urban sector, both the variables, freedom to go to the market and freedom to visit friends or relatives, show wide scale variation over the states of India. In case of freedom to go to the market, though the national average is 46.9%, the variable ranges between the highest mark of 80.3% (Tamil Nadu) and the lowest value of 16.1% (Madhya Pradesh). In most of the states the percentages record around 50% and 70% mark, some have their records around 20% and 30%, while two states have below 20% score. For the freedom of visiting friends or relatives, the national average is 35% and the state of Goa records the highest percentage of 65.4% and Jammu and Kashmir records the lowest of 13%. Most of the states have their percentages above the national average, ranging between 35% and 65%, some states have their scores between 20% and 30% while few states have below 20% as their records. Both the variables, freedom to go to the market and freedom to visit friends or relatives, have moderately high coefficient of variation values, of 45.33 and 48.90, depicting the moderate consistent nature of the dataset.

In case of the variable of access to money for the ever-married women in the urban sector, the dataset range between 90.7% (Himachal Pradesh) and 42.9% (Madhya Pradesh) with a national average of 73.6%, which is much higher than the rural sector. Most of the states like Himachal Pradesh, Punjab, Haryana, Goa, Delhi, Tamil Nadu, Gujarat, Karnataka, Bihar and Manarashtra have their percentages above the national average ranging around 70% and 90%. The rest of the states have their percentages below the national average level, though their values range in and around 50% and 70%, very

unlike the rural sector where the percentages have gone much below in some states. The coefficient of variation is 16.72 and shows the highly consistent nature of the data.

TABLE 4.6
AUTONOMY OF EVER-MARRIED WOMEN IN FREEDOM OF MOVEMENT AND ACCESS TO MONEY OVER THE STATES OF INDIA (URBAN)

States	Freedo	m of movement	Access to money
	Go to market	Visit friends/ relatives	
Delhi	52.7	35.5	83.4
Haryana	49.9	32	85.8
Himachal Pradesh	50.8	46.7	90.7
Jammu & Kashmir	23.9	13	70.9
Punjab	55.1	35.2	88.7
Rajasthan	30.7	26.2	56.2
Madhya Pradesh	16.1	15.1	42.9
Uttar Pradesh	27.8	18.7	70.3
Bihar	30.5	28.2	77
Orissa	28.4	22.4	66.4
West Bengal	25.4	18.1	68.2
Assam	19.4	20.1	57.8
Goa	73	65.4	83.7
Gujarat	68.3	64.2	81.3
Maharashtra	64.8	41.6	73.6
Andhra Pradesh	24.7	15.7	65.3
Karnataka	52.9	41.2	79.5
Kerala	57.7	44.6	72
Tamil Nadu	80.3	58.2	82.4
All India	46.9	35	73.6

Source: NFHS-2, 1998-99.

Regarding the factor of the autonomy of ever-married women in spending the money earned by them, in the urban sector, the percentages are mainly concentrated in the category where the women alone takes the decision of the expenditure of money. The national average for this variable is 57.0% with the state of West Bengal scoring the highest of 78.1% and Orissa the lowest of 44.1%. The states that score above the national average are West Bengal, Jammu and Kashmir, Uttar Pradesh, Goa, Delhi, Bihar, Rajasthan, Haryana, Himachal Pradesh and Gujarat, all recording their percentages

around 60% and 80%. The rest of the states have their percentages below the national average and scoring around 50% and 60%. The coefficient of variation is 16.79 and proves to be highly consistent in nature. This category is followed by the next higher response of the variable where the respondent, that is, the ever-married women takes the decision about the expenditure of the money along with the husband. The national average for this is 24% with Punjab having the highest score of 40.2% and West Bengal having the lowest score of 6.5%. There is a wide variation in this data. The states recording above national average percentages are Punjab, Himachal Pradesh, Assam, Orissa, Haryana, Tamil Nadu, Gujarat, Andhra Pradesh, Kerala and Delhi, all having their percentages around 30% and 40%. The rest of the states have their percentages around 10% and 20% with West Bengal going down below the 10% level. The coefficient of variation for this variable is 34.10 and it is moderately consistent in nature. In the category where the husband alone decides about the expenditure of the money earned by the ever-married women, the national average is 14.2% and Orissa scores the highest of 20.1% and Himachal Pradesh scores the lowest of 4.3%. The states having their percentages above the national average are Orissa, Karnataka, Madhya Pradesh, Kerala, Tamil Nadu, Andhra Pradesh, Maharashtra and Rajasthan, all scoring within 20%, while the rest of the states have their percentages around 10%. The coefficient of variation for this dataset is 42.67, which shows moderate consistency. The next category that follows is the one where the respondent along with the others in the household take the decision about the expenditure of the money earned by the ever-married women. Here the national average is 2.8% with the highest score of 5.2% (Assam) and the lowest of 0.6% (Goa). The states with above national average percentages are Assam, Madhya Pradesh, Maharashtra, Tamil Nadu, Gujarat, Punjab and West Bengal. The rest of the states have below the national average scores with very low percentages. The coefficient of variation for this is 51.10 depicting the moderate consistency towards the lower level. Lastly comes the category where the other members of the household take the decision about\_the expenditure of the money. The national average for this is 1.9% and it ranges between 3.2% (Madhya Pradesh) and 0% in few states like Haryana, Himachal Pradesh, Punjab and Assam. The states of Madhya Pradesh, Rajasthan, Maharashtra, Bihar, Karnataka, Andhra Pradesh, Goa and Gujarat have their percentage scores above the national average. The rest of the states have very negligible percentage scores, below the national average level. The coefficient of variation for this is 81.96, which is highly inconsistent in nature.

TABLE 4.7
AUTONOMY OF EVER-MARRIED WOMEN IN EXPENDITURE OF THE MONEY
EARNED BY THEM OVER THE STATES OF INDIA
(URBAN)

Decision about the Expenditure of Money Earned by the Respondent (Women)					
Respondent only	Husband only	Respondent with Husband	Others in Household only	Respondent with others in household	
65.7	7.6	24	0.4	2.1	
60.1	6.5	31.8	0	1.7	
59.5	4.3	34.4	0	1.9	
74.9	11.8	11.3	1	1	
50.2	6.8	40.2	0	2.8	
60.5	14.4	19.9	3	2.1	
51.2	18.4	23.1	3.2	4.2	
73.8	6	16.6	0.7	2.5	
63.3	12.7	20.2	2.6	1.2	
44.1	20.1	33.5	0.6	1.7	
78.1	11.4	6.5	1.2	2.8	
49.1	11.4	34.3	0	5.2	
67.1	9.8	20.7	1.9	0.6	
59.1	5.4	30.6	1.9	3	
56.3	16.7	20.1	2.8	4.1	
50.8	17.1	28.4	2.4	0.8	
54.4	19.1	22.3	2.5	1.8	
50.7	18.2	27.9	1.1	2.2	
46.4	18.1	31.4	0.7	3.1	
57	14.2	24	1.0	2.8	
	Respondent only  65.7 60.1 59.5 74.9 50.2 60.5 51.2 73.8 63.3 44.1 78.1 49.1 67.1 59.1 56.3 50.8 54.4 50.7	Respondent only  65.7 7.6 60.1 6.5 59.5 4.3 74.9 11.8 50.2 6.8 60.5 14.4 51.2 18.4 73.8 6 63.3 12.7 44.1 20.1 78.1 11.4 49.1 11.4 67.1 9.8 59.1 5.4 56.3 16.7 50.8 17.1 54.4 19.1 50.7 18.2 46.4 18.1	Respondent only Husband only Respondent with Husband  65.7 7.6 24  60.1 6.5 31.8  59.5 4.3 34.4  74.9 11.8 11.3  50.2 6.8 40.2  60.5 14.4 19.9  51.2 18.4 23.1  73.8 6 16.6  63.3 12.7 20.2  44.1 20.1 33.5  78.1 11.4 6.5  49.1 11.4 34.3  67.1 9.8 20.7  59.1 5.4 30.6  56.3 16.7 20.1  50.8 17.1 28.4  54.4 19.1 22.3  50.7 18.2 27.9  46.4 18.1 31.4	Respondent only	

Source: NFHS-2, 1998-99.

In the urban sector also, in order to get the overall picture of the autonomy of women, the Principal Component Analysis (PCA) has been run including all these variables, to capture the interrelationships among the variables also. The resultant factor scores have been ranked to analyse the statewise position of the ever-married women regarding their status of autonomy. The following table represents the statewise PCA factor scores and

their respective ranks, arranged in the fashion where the highest factor score has been assigned the lowest rank.

TABLE 4.8
AUTONOMY OF EVER-MARRIED WOMEN OVER THE STATES OF INDIA
(URBAN)

States	PCA Autonomy	Rank
Himachal Pradesh	1.95328	1
Punjab	1.44454	2
Gujarat	1.29221	3
Haryana	0.99332	4
Tamil Nadu	0.81713	5
Goa	0.68078	6
Assam	0.24997	7
Delhi	0.13881	8
Kerala	0.06185	9
Karnataka	-0.28465	10
Maharashtra	-0.30739	11
West Bengal	-0.3727	12
Andhra Pradesh	-0.46544	13
Jammu & Kashmir	-0.59445	14
Bihar	-0.7499	15
Orissa	-0.76788	16
Uttar Pradesh	-0.80417	17
Rajasthan	-1.3733	18
Madhya Pradesh	-1.912	19

### **VARIABLES:**

- 1. Decision to cook
- 2. Decision to purchase jewellery, etc.
- 3. Decision to stay with parents/siblings
- 4. Decision about own health care
- 5. Freedom of movement to market
- 6. Freedom of movement to visit friends/relatives
- 7. Access to money
- 8. Involved in any kind of decision making
- 9. Decision about expenditure of money earned by the respondents taken by respondent only
- 10. Decision about expenditure of money earned by the respondents taken by husband only
- 11. Decision about expenditure of money earned by the respondents taken by respondent along with husband
- 12. Decision about expenditure of money earned by the respondents taken by others in the household
- 13. Decision about expenditure of money earned by the respondents taken by respondent along with others in the household

#### 4.2.3 TOTAL SCENARIO

The total scenario is the reflection of the combined picture existing in the rural as well as in the urban sectors. Since a major proportion of Indian population comprises of the rural population so the picture of the rural sector becomes more prominent in the total scenario.

As have been represented both in the rural and urban scenario, the freedom of decision-making about the household chores like cooking is generally taken by the ever-married women. The overall national average for this variable in the total scenario is 85.1% and the data ranges between 96.7% (Punjab) and 77.8% (Uttar Pradesh). The states that have their percentages above the national average are Punjab, Himachal Pradesh, Haryana, Tamil Nadu and Gujarat, with scores above 90%, followed by Goa, Karnataka, Assam, Maharashtra, West Bengal, Orissa and Andhra Pradesh. The rest of the states have their scores below the national average and they generally have their percentages around 80% and 90%. The coefficient of variation for this variable is 6.14, showing the very high consistent nature of the data.

The freedom of purchasing jewellery, etc by the ever-married women in the total scenario have a national average of 52.6% and the state of Himachal Pradesh mark the highest score of 93.4% and Uttar Pradesh mark the lowest score of 41.4%. Apart from Himachal Pradesh, the states with above national average scores are Haryana, Punjab, Gujarat, Tamil Nadu, Kerala, Andhra Pradesh, Delhi, Jammu and Kashmir, Orissa and Assam, all having their percentages around 50% and 80%. The rest of the states have their percentages below the national average and ranging between 40% and 50%. The coefficient of variation for this variable is 24.12, marking its consistent nature.

TABLE 4.9
AUTONOMY OF EVER-MARRIED WOMEN IN DECISION MAKING PROCESS
OVER THE STATES OF INDIA
(TOTAL)

States	In	volved in hous	sehold decision	making	Women involved in any decision making
	What	Purchasing	Staying with	Own health	
	to cook	jewellery, etc.	parents/siblings	care	
Delhi	83	58.5	46.5	68.7	94.7
Haryana	93.5	77.8	64.5	67.2	96.6
Himachal Pradesh	95.1	93.4	91.4	80.8	99.2
Jammu & Kashmir	80	58.2	48.9	55.5	87.6
Punjab	96.7	75.3	67.6	78.5	99
Rajasthan	82.3	42.7	39.3	40.6	86.7
Madhya Pradesh	81.7	44.3	38.1	36.6	87.5
Uttar Pradesh	77.8	41.4	36.1	44.8	83.6
Bihar	82.4	42.9	44	47.6	86.5
Orissa	86.3	54.8	48.3	38.6	89.4
West Bengal	87.4	48.4	46.7	45.1	92
Assam	88.4	54.3	45.4	65.1	95.4
Goa	89.9	52.5	72.4	61.6	96.4
Gujarat	90.4	73.6	65.1	71.4	95.9
Maharashtra	87.5	50.3	44.4	49.9	92.8
Andhra Pradesh	86.2	61.4	57.7	56.1	92.6
Karnataka	88.4	47.3	44.5	49.3	91.9
Kerala	80.9	63.4	59.7	72.6	92.8
Tamil Nadu	92.1	67.4	62.4	61.1	97.6
·					
All India	85.1	52.6	48.1	51.6	90.6

In case of the variable of freedom of ever-married women in decision-making about staying with their parents or siblings, the national average is 48.1% and the highest and the lowest scores are 91.4% (Himachal Pradesh) and 36.1% (Uttar Pradesh) respectively. States like Goa, Punjab, Gujarat, Haryana and Tamil Nadu have their scores ranging around 60% and 70%. These are followed by the states like Kerala, Andhra Pradesh, Jammu and Kashmir and Orissa with their percentages around 40% and 50%. The remaining states have below national average percentages ranging around 35% and 45%. The coefficient of variation for this is 26.21 and is quite moderate in its consistency level.

Regarding the autonomy of the ever-married women in taking decision about their own health care, the national average is 51.6%. The state of Himachal Pradesh scores the maximum of 80.8% with Madhya Pradesh having the minimum percentage of 36.6%. The states with above the national average mark are Himachal Pradesh, Punjab, Kerala and Gujarat, having their scores between 70% and 80%, closely followed by Delhi, Haryana, Assam, Goa, Tamil Nadu, Andhra Pradesh and Jammu and Kashmir, ranging around 55% and 70%. The rest of the states have their percentages below national average ranging around 35% and 55%. The coefficient of variation is 23.71 and it is moderately consistent towards a higher degree.

However, the overall percentages of ever-married women involved in any kind of decision-making in the total scenario are mainly ranging around 90% and above with the highest and the lowest values of 99.2% (Himachal Pradesh) and 83.6% (Uttar Pradesh) respectively with the national average of 90.6%. The coefficient of variation is also showing a very consistent nature of the data with a value of 4.95.

Regarding the autonomy of freedom of movement of the ever-married women, both the variables of freedom to go to the market and freedom to visit friends or relatives, have wide variation in percentage records over the states. The national average for the variable of freedom to go to the market is 31.6% with the highest record of 78.5% (Tamil Nadu) and lowest of 12.0% in Jammu and Kashmir. The states having above the national average percentages are Tamil Nadu, Goa, Gujarat, Delhi, Punjab, Maharashtra, Kerala, Karnataka, Haryana and Himachal Pradesh, having their scores within a wide range of around 30% and 80%. The rest of the states have their percentages below the national average with their scores around 10% and 20%. The coefficient of variation for this is 55.71, which shows low consistent nature of the data. In case of the freedom to visit friends or relatives, the national average is 24.4% with Goa having the highest score of 58.7% and Jammu and Kashmir have the lowest of 7.8%. States like Goa, Tamil Nadu, Gujarat, Kerala, Karnataka, Delhi, Maharashtra, Himachal Pradesh and Punjab scores above the national average, all clubbing themselves within a range of around 30% and 60%. The rest of the states have their percentages below the national average with some

scoring around 10% and 20%, while Jammu and Kashmir scores below 10%. The coefficient of variation is 55.33, which is also low in its consistency level.

TABLE 4.10
AUTONOMY OF EVER-MARRIED WOMEN IN FREEDOM OF MOVEMENT AND ACCESS TO MONEY OVER THE STATES OF INDIA (TOTAL)

States	Freedon	n of movement	Access to money
	Go to market	Visit friends/ relatives	
Delhi	51.7	33.9	82.3
Haryana	36.7	20.8	70.8
Himachal Pradesh	32.5	31.1	80.1
Jammu & Kashmir	12	7.8	58.1
Punjab	50.1	28	78.3
Rajasthan	19	17	40.5
Madhya Pradesh	21	19.5	49.3
Uttar Pradesh	17.4	12.4	52.3
Bihar	21.7	20.5	66.7
Orissa	18.2	15.4	46.3
West Bengal	17.8	14.1	51.4
Assam	13.2	13.9	35
Goa	66.7	58.7	82.4
Gujarat	55.1	50.6	73.6
Maharashtra	48.5	32.1	64.2
Andhra Pradesh	20.1	14.6	57.7
Karnataka	43	34.3	67
Kerala	47.7	37.9	66.2
Tamil Nadu	78.5	55.9	79
All India	31.6	24.4	59.6

Source: NFHS-2, 1998-99.

The autonomy of ever-married women measured in terms of the variable of access to money reveals the fact that it varies widely over the states, with the national average of 59.6%. The state of Goa scores the highest of 82.4% and Assam scores the lowest of 35.0%. States like Goa, Delhi, Himachal Pradesh, Tamil Nadu, Punjab, Gujarat, Haryana, Karnataka, Bihar, Kerala and Maharashtra, all score above the national average and range around 60% and 80%. The remaining states have their range between 35% and 50% and they score below the national average. The coefficient of variation for this is 22.99 and it shows the moderately high consistent nature of the data.

TABLE 4.11
AUTONOMY OF EVER-MARRIED WOMEN IN EXPENDITURE OF THE MONEY
EARNED BY THEM OVER THE STATES OF INDIA
(TOTAL)

States	Decision about the Expenditure of Money Earned by the Respondent (Women)					
	Respondent only	Husband only	Respondent with Husband	Others in Household only	Respondent with others in household	
Delhi	65.4	8	24	0.4	2	
Haryana	58.2	9.3	30.4	0	1.8	
Himachal Pradesh	58.3	5.9	34	0	1.8	
Jammu & Kashmir	65.7	11.5	16.6	3.8	2.3	
Punjab	54	8.2	33.9	0	3.9	
Rajasthan	42.8	24.6	24.8	5	2.8	
Madhya Pradesh	33	32.5	25.8	4	4.7	
Uttar Pradesh	50.3	24.5	18.9	1.8	3.2	
Bihar	51.3	25.8	19.9	0.5	. 2.5	
Orissa	29.1	31.4	33.3	2.3	3.8	
West Bengal	51.7	31.5	12.3	1.1	3.5	
Assam	39.9	23	33.7	0.4	2.5	
Goa	65.9	8.7	21.2	2.8	1.4	
Gujarat	43	12.2	37.9	3.2	3.8	
Maharashtra	39.1	32.4	19.8	4.7	3.9	
Andhra Pradesh	32.1	29.5	30.2	5.5	2.6	
Karnataka	40.5	32.5	20	4.7	2.2	
Kerala	42.3	21.4	30.3	1.8	4.2	
Tamil Nadu	40.4	24.9	28.9	1.4	4.2	
All India	41.1	27.2	25	3.1	3.4	

The autonomy of ever-married women represented by the decision-making about the expenditure of money earned by them mainly shows that on a national average scale about 41.1% of the ever-married women takes the decision on their own. Among the states, Goa scores the maximum of 65.9% and Orissa the lowest of 29.1%. Most of the states score above the national average like Goa, Jammu and Kashmir and Delhi, recording above 60%, followed by Himachal Pradesh, Haryana, Punjab, West Bengal, Thiar and Uttar Pradesh, recording between 50% and 60%, closely followed by Gujarat, Rajasthan and Kerala recording around 40%. The rest of the states record below the national average and score around 30% and 40%. The coefficient of variation is 24.23,

indicating a moderately high consistent nature of the data. Next in the picture comes the variable where the husband alone takes the decision about the expenditure of the money earned by the ever-married women. The national average for this is 27.2% with Madhya Pradesh and Karnataka scoring the highest value of 32.5% and Himachal Pradesh scoring the lowest of 5.9%. The states scoring above the national average are Madhya Pradesh, Karnataka, Maharashtra, West Bengal, Orissa and Andhra Pradesh, with percentages around 30%. The rest of the states record below the national average with their scores around 20% and 30%, some having their percentages in between 20% and 30%, whereas a few number of states score below 10% level. The data is moderately consistent in nature with the coefficient of variation of 47.35. The category where the respondent, that is, the ever-married women takes the decision along with their husbands about the expenditure of money earned by them, have a national average of 25.0% and the state of Gujarat have the highest score of 37.9% with West Bengal having the lowest record of 12.3%. The states like Gujarat, Himachal Pradesh, Punjab, Assam, Orissa, Haryana, Kerala, Andhra Pradesh, Tamil Nadu and Madhya Pradesh score above the national average around 30% and 40% marks. The other states have their percentages below the national average level scoring around 10% and 25%. The dataset is moderately high in its consistency with the coefficient of variation of 27.26. The following category is that of the variable where the respondent takes the decision along with the other members of the household about the expenditure of money earned by them. Here the national average is 3.4% with the highest percentage recorded by the state of Madhya Pradesh (4.7%) and the lowest by Goa (1.4%). The states that have their scores above the national average are Madhya Pradesh, Kerala, Tamil Nadu, Maharashtra, Punjab, Gujarat, Orissa and West Bengal. Apart from these states, there are other states that score below the national average level with low percentages. The coefficient of variation is 32.56, depicting a moderate consistent nature of the dataset. In the last category comes the variable where the other members of the household takes the decision about the expenditure of the money earned by the respondent, that is, the ever-married women. The national average for this is 3.1%. Andhra Pradesh score the highest value of 5.5% and Haryana, Himachal Pradesh and Punjab scores the lowest 0.0%. States of Andhra Pradesh, Rajasthan, Maharashtra, Karnataka, Madhya Pradesh, Jammu and Kashmir and Gujarat score above the national average with the remaining states scoring negligible percentages that are below the national average. The dataset is highly inconsistent in nature with a coefficient of variation value of 82.76.

In order to get the overall picture of the autonomy of women, the Principal Component Analysis (PCA) has been run including all these variables, to capture the interrelationships among the variables also. The resultant factor scores have been ranked to analyse the statewise position of the ever-married women regarding their status of autonomy. The following table represents the PCA factor scores of the states along with their ranks, arranged in the fashion where the highest factor score has been assigned the lowest rank.

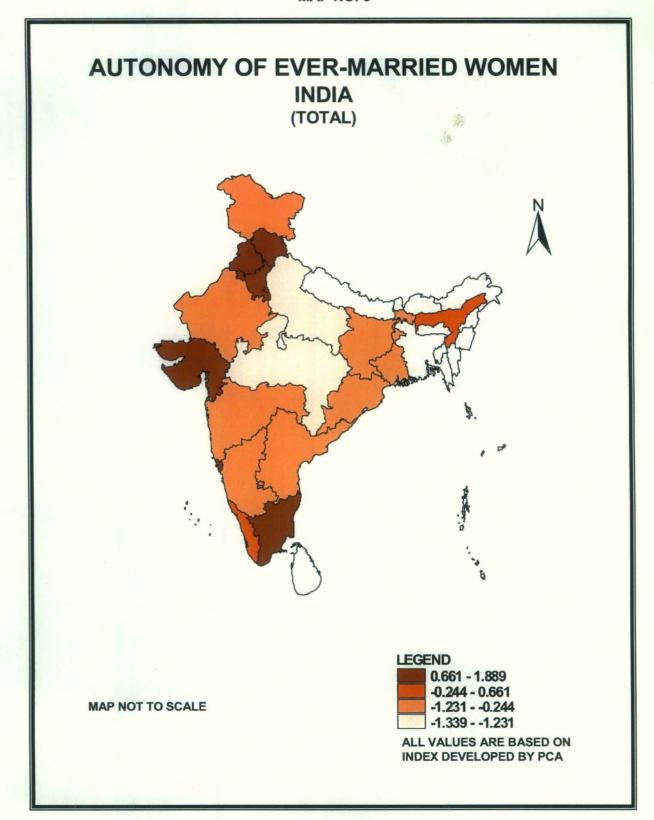
TABLE 4.12
AUTONOMY OF EVER-MARRIED WOMEN OVER THE STATES OF INDIA
(TOTAL)

States	PCA Autonomy	Rank
Himachal Pradesh	1.88943	1
Punjab	1.42039	2
Goa	1.10214	3
Haryana	1.05228	4
Gujarat	1.02011	5
Tamil Nadu	0.91302	6
Delhi	0.66114	. 7
Kerala	0.26303	8
Assam	-0.24365	9
Andhra Pradesh	-0.42473	10
Karnataka	-0.44682	11
Maharashtra	-0.49698	12
Jammu & Kashmir	-0.55191	13
Bihar	-0.69052	14
West Bengal	-0.7716	15
Orissa	-0.86262	16
Rajasthan	-1.23123	17
Uttar Pradesh	-1.2627	18
Madhya Pradesh	-1.33879	19

## **VARIABLES:**

- 1. Decision to cook
- 2. Decision to purchase jewellery, etc.
- 3. Decision to stay with parents/siblings
- 4. Decision about own health care

- 5. Freedom of movement to market
- 6. Freedom of movement to visit friends/relatives
- 7. Access to money
- 8. Involved in any kind of decision making
- Decision about expenditure of money earned by the respondents taken by respondent only
- 10. Decision about expenditure of money earned by the respondents taken by husband only
- 11. Decision about expenditure of money earned by the respondents taken by respondent along with husband
- 12. Decision about expenditure of money earned by the respondents taken by others in the household
- 13. Decision about expenditure of money earned by the respondents taken by respondent along with others in the household



## 4.3 CONCLUSION

Thus, in a nutshell, it can be highlighted that in general the freedom of ever-married women is highly restricted within the household premises and they are given importance in deciding matters pertaining to household chores only. She has also limited access to the money, even it has been observed from the available statistics that in taking decision about the expenditure of the money earned by the ever-married women, in many cases she has not been taking it independently, but deciding along with either the husband, who is getting the priority in most cases, or some other members of the household, in a fewer number of cases. The Indian scenario is thus quite suggestive about the limited autonomy of the ever-married women. In all the cases, that is, in rural, urban and total scenario the states where the autonomy is of higher degree are that of Himachal Pradesh, Punjab, Goa, Haryana, Tamil Nadu and Gujarat, shuffling their positions within the top five positions. The socio-economically backward states, mainly the BIMARU states of Bihar, Madhya Pradesh, Rajasthan, and Uttar Pradesh along with Orissa (the term being coined by Dr. Ashish Bose) are the states where the ever-married women experience limited autonomy being restricted within the household.

# CHAPTER 5

### CHAPTER - 5

## AWARENESS OF EVER-MARRIED WOMEN

### 5.1 INTRODUCTION

Awareness of women imparts knowledge about the outside world and helps them to become considerably awakened. A host of variables have been selected to represent the factor of degree of awareness among the ever-married women. The awareness is generated mostly by the exposure of a person to the external world beyond the four walls of the household. Since this study deals with the status of women and their fertility behaviour, emphasis has been given on their exposure to the mass media and also to the family planning messages, which enable them to gather information and take likewise decision about their own family planning and that, gets reflected on the overall fertility variable. In a country like India where a large majority of women are illiterate or have little formal education, informal channels such as mass media can play an important role in bringing about awareness.

Communication through exposure to mass media and family planning messages and inter-personal relations create the necessary opportunity for an awareness of knowledge, besides developing credibility leading to decision-making for acceptance, indecision or even rejection of contraception (Mahadevan, 1984; Rogers, 1981, 1973). It is a well known and confirmed fact that receiving a message through multi-media channels might make a couple take a favourable decision on contraception (Mahadevan, 1984). Overall development and exposure to new ideas inevitably lead to the abandonment of traditional behaviours.

In all civilised societies, women have their legal rights and have organised themselves to ensure that these rights are not violated. Once aware of one's rights, they now claim equal rights with men and as such men now cannot force women to increase their fertility without their own will or consent. Social awakening among developing and

underdeveloped societies is very limited. The couple is not fully aware of the social responsibilities, which fall upon them with an increase in the size of family. Therefore, they go on adding to the number of children, due to which the total fertility shoots up.

Family planning behaviour in terms of the acceptance of family planning, is generally associated with the higher status of women; and non-contraception results out of their lower status. Women are conditioned by the autonomy they enjoy in the family. As long as most decisions in the family are made by the men, the status of women alone cannot influence the contraceptive behaviour (Mahadevan, 1984). Nevertheless, improvement of the status of women through education has directly and indirectly contributed to the development of the small family norm leading to the acceptance of family planning; and sometimes even goes beyond, leading to the adoption of family planning measures with limited number of children (Hull, 1977; Oppong, 1980; Kupinsky, 1977; WFS, 1980). Early acceptance of family planning leads to a low fertility.

Family planning with limited numbers of children directly provides opportunity to women for development in several ways. It indirectly benefits the status of women through maternal health, improvement in longevity and reduction in fertility, besides giving women the opportunity for education, modernisation and alleviation of drudgery.

Regarding the discussion on family planning, it has been observed that the ever-married women have discussed family planning with their husband, friends, neighbours or other relatives. Inter-personal sources of communication widely exist and they generally form a common and effective source of communication. Information on whether women talk about family planning at all, and with whom they discuss it, sheds light on their level of interest in family planning, their familial or other sources of family planning information, and the possibility of communication with others on such a personal topic. Inter-personal relations of husband and wife exert immense influence on the decision-making process of the family, that is to say, on family planning. Even Hill et.al. (1955) found long back that the communication between the husband and wife is an important factor which influences the adoption of contraceptive practices and, thereby, fertility.

It is a common observation that messages in the printed media have more appeal to the masses than oral communication. Moreover, in a semi-literate society the printed word has come to stand as a powerful force because it is considered as synonymous to truth and hence believable and tends to promote or favour change. The media frequently presents the population problem and its effects on man and society, as well as the government's attempts to combat it. Thus, awareness about the population problem and the need to adopt small family size norm gets diffused among the masses. Moreover, awareness is an exact indicator of the effective level of literacy of the individual. Therefore, it is assumed that the respondents who are regular readers of newspaper and/or magazines have lesser number of children than those who are not exposed to any form of printed media. However, in the present Television boom, exposure may be widened to include exposure to audio-visual media also, in addition to printed media. For many years the family planning programmes has been using electronic and other mass media to promote family planning. Studies have confirmed that even after controlling the effect of residence and education, the exposure to electronic mass media has a substantial effect on contraceptive use (Ramesh et al., 1996). It has also been found that media strengthens women's motivation to prevent unwanted fertility. (Kulkarni and Choe, 1998).

In the following section an attempt has been taken to gauge the awareness status of the ever-married women over the states of India. Since it is a composite factor, a number of dimensions measuring the awareness status have been considered for the present study. These include women's exposure to mass media and family planning messages through the various sources – be it print or electronic media.

## 5.2 SPATIAL DIMENSION OF AWARENESS OF EVER-MARRIED WOMEN

### 5.2.1 RURAL SCENARIO

In the rural sector, a wide variation is observed regarding the regular exposure of evermarried women to the mass media, over the states of India. The national average for the exposure of ever-married women to the mass media on a regular basis is 49.9%, that is, on an average one in every two women in the rural areas is exposed to the mass media regularly. The range, however, varies between 86.3% (Kerala) and 22.7% (Bihar). Most of the states have their percentages above the national average, which include Kerala, Goa, Delhi, Himachal Pradesh, Punjab, Tamil Nadu, Karnataka and Jammu and Kashmir, with scores around 70% and 85%, closely followed by Haryana, Maharashtra, West Bengal and Gujarat, with scores around 50% and 60%. The states that have their percentages below the national average are Assam, Madhya Pradesh, Orissa and Uttar Pradesh, with scores around 30% and 40%, while Rajasthan and Bihar have their scores around 20% and 30%. The coefficient of variation is 33.19, which is moderately consistent in nature.

Among the variables representing the exposure of women to mass media regularly, that of watching TV has the highest score followed by that of listening to radio, reading newspaper or magazine and visiting cinema or theatre. The national average for watching TV as an exposure to mass media is 33.4%, with Delhi scoring the highest of 80.4% and Bihar scoring the lowest of 11.9%. States like Delhi, Goa, Himachal Pradesh and Punjab have their scores around 70% and 80%. These states are followed by Kerala, Tamil Nadu, Haryana, Andhra Pradesh, Maharashtra, Jammu and Kashmir, Karnataka and Gujarat, with their percentages around 40% and 60% – all scoring above the national average. The remaining states have their percentages below the national average scoring around 30% and 20% while some scoring below 20%. The dataset is moderately consistent towards a lower degree with a coefficient of variation of 46.38.

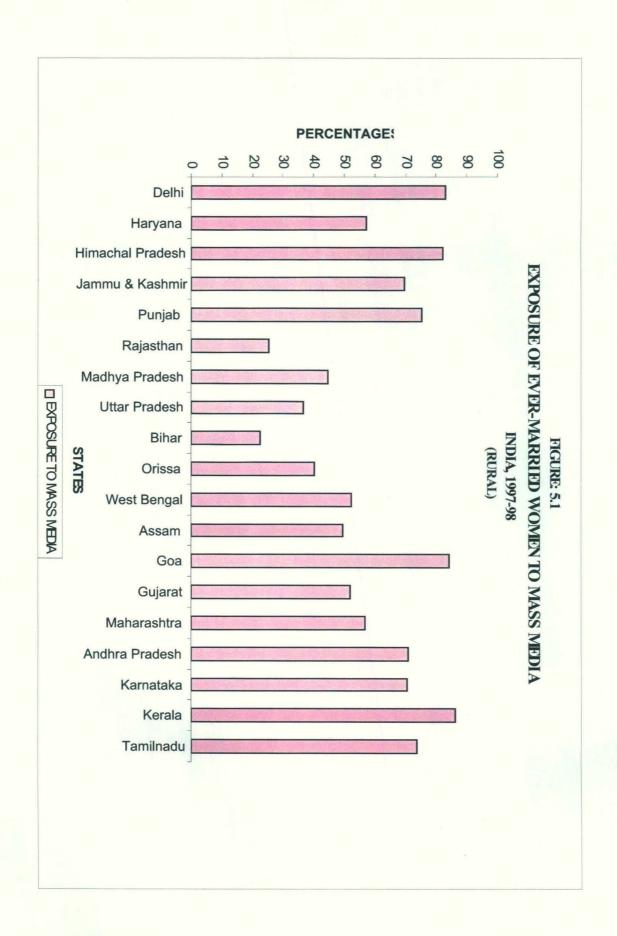
In the category of listening to the radio, the national average is 33.0% and Kerala has the highest score of 69.9% and Rajasthan has the lowest of 13.7%. Apart from Kerala, the other states that have their percentages above the national average are Karnataka, Himachal Pradesh, Jammu and Kashmir, Goa and Tamil Nadu, scoring around 50% and 60%, closely followed by Delhi, West Bengal, Andhra Pradesh and Assam, scoring around 40%. The rest of the states include mainly the backward states scoring around 20% and 30%, with few of them scoring below 20%. The coefficient of variation is 39.21 and shows the moderate consistent nature of the dataset.

Regarding the case of reading newspaper or magazine, the national average is 12.8%, with Kerala having the highest score of 61.2% and in Rajasthan it is the lowest of 5.1%. Apart from Kerala and Goa, most of the states score around 15% and 30%. The states within this category are Delhi, Himachal Pradesh, Maharashtra, Punjab, Gujarat, Karnataka, Tamil Nadu, Assam and Andhra Pradesh, all scoring above the national average. Rest of the states score below the national average having percentages around 5% and 10%. The dataset has been found to be quite inconsistent in nature towards a higher degree with a coefficient of variation of 79.62.

TABLE 5.1
EXPOSURE OF EVER-MARRIED WOMEN TO MASS MEDIA
OVER THE STATES OF INDIA
(RURAL)

States	Women's exposure to mass media						
	Reads newspaper/magazine at least once/week	Watches TV at least once/week	Listens to radio at least once/week	Visits cinema/theatre at least once /month	Women exposed to any media regularly		
					·		
Delhi	29.5	80.4	42	4.8	83.1		
Haryana	11.5	50.3	26.1	0.6	57.3		
Himachal Pradesh	23.7	71.7	55.7	1.1	82.2		
Jammu & Kashmir	7	46.4	55	1.7	69.8		
Punjab	17.7	69.9	28.7	0.9	75.5		
Rajasthan	5.1	18	13.7	1.3	25.3		
Madhya Pradesh	9.1	32.5	25.2	4.6	44.9		
Uttar Pradesh	7.3	21.4	25.9	1.5	36.6		
Bihar	6.8	11.9	18.1	2.8	22.7		
Orissa	8.4	22.9	32	3	40.2		
West Bengal	7.1	27.2	40.1	9.4	52.6		
Assam	13.9	24.3	39.3	5.2	49.6		
Goa.	40.6	75.6	51.2	2.8	84.4		
Gujarat	16.9	38.3	28	3.5	52.1		
Maharashtra	19.3	46.5	29.5	4.9	56.9		
Andhra Pradesh	13	49.4	39.5	31.5	70.8		
Karnataka	16.3	44.2	57.2	15.5	70.7		
Kerala	61.2	56.3	69.9	10.5	86.3		
Tamil Nadu	15.8	53.2	49.2	19.7	73.8		
All India	12.8	33.4	33	7.9	49.9		

The variable of visiting cinema or theatre has recorded mostly lower percentages. The national average is 7.9% with Andhra Pradesh scoring the highest of 31.7% and Haryana scoring the lowest of 0.6%. The southern states have mainly recorded the higher values around 10% and 20%, apart from Andhra Pradesh with a comparatively higher score. The rest of the states have lower scores ranging below the national average and few have very low and negligible percentages. The coefficient of variation is 120.37 and depicts a highly inconsistent nature of the data.



The exposure of ever-married women to family planning messages reveals the fact that in the rural areas on an average about one in every two women is exposed to these kind of messages and have discussed about it with anyone like husband or any other person. The national average for this variable is 51.6% with Himachal Pradesh scoring the highest of 87.6% and Rajasthan scoring the lowest of 24.9%. The states that record above the national average are Himachal Pradesh, Goa, Delhi, Karnataka, Kerala, Punjab, Andhra Pradesh, Haryana and Tamil Nadu, all scoring around 70% and 90%, closely followed by Assam, Jammu and Kashmir and Orissa. The rest of the states have their percentages below the national average scoring around 30% and 50%. The coefficient of variation is 30.67, which depicts a moderately consistent nature of the data.

For the convenience of the study, the aspect of discussion on family planning have been reduced to two variables by clubbing the discussion with friends, neighbours, or other relatives and husband into one category as discussion on family planning with anyone; and only with husband as the other category.

In case of discussion with husband on family planning, the national average is 16.4%, with Punjab scoring the highest of 45.5% and Gujarat scoring the lowest of 8.9%. The states that score above the national average are Punjab, Haryana and Himachal Pradesh, having higher percentages around 40% and 45%, followed by Delhi, Goa, Orissa and Jammu and Kashmir, with percentages around 20% and 30%, along with Assam, Kerala, Rajasthan, Uttar Pradesh, with percentages around 20%. The rest of the states that have their percentages below the national average are Madhya pradesh, West Bengal, Maharashtra, Bihar, Karnataka, Tamil Nadu, Andhra Pradesh and Gujarat, with scores around 10% and 15%. The coefficient of variation for this is 54.01; which is moderately consistent towards a lower degree.

TABLE 5.2
EXPOSURE OF EVER-MARRIED WOMEN TO FAMILY PLANNING MESSAGES AND DISCUSSION ON FAMILY PLANNING OVER THE STATES OF INDIA (RURAL)

States	Women's exposure to messages & discussion on family planning						
	Exposed to FP messages	Discussed FP with husband	Discussed FP with anyone				
Delhi	81.5	27.7	29.8				
Haryana	70	44.1	53.8				
Himachal Pradesh	87.6	43.9	54.3				
Jammu & Kashmir	56.2	22.2	29.1				
Punjab	78.9	45.5	55.3				
Rajasthan	24.9	16.9	21.8				
Madhya Pradesh	39.3	16.2	22.8				
Uttar Pradesh	38.9	16.6	20.8				
Bihar	36.1	13.6	19.5				
Orissa	56.1	23.7	30.3				
West Bengal	49.9	15.5	23.1				
Assam	58.4	19.9	25				
Goa	82.7	24.4	31.7				
Gujarat	47.7	8.9	17.2				
Maharashtra	48.2	14.2	16.6				
Andhra Pradesh	71.3	9.7	21.9				
Karnataka	80.2	11.8	17.9				
Kerala	79.2	18.4	24.2				
Tamil Nadu	69	11.1	21.7				
All India	51.6	16.4	23				

In case of discussion with anyone about family planning, including that of husband also, the national average is 23.0% and the state of Punjab scores the highest of 55.3% with Maharashtra scoring the lowest of 16.6%. Apart from Punjab, the other states that score above the national average are Punjab, Himachal Pradesh and Haryana, having higher percentages of around 50% and 55%, followed by Goa, Orissa, Delhi, Jammu and Kashmir, Assam, Kerala and West Bengal, scoring around 25% and 30%. The rest of the states have their percentages below the national average around a range between 15% and 25%. The dataset shows moderate consistency with coefficient of variation of 44.05.

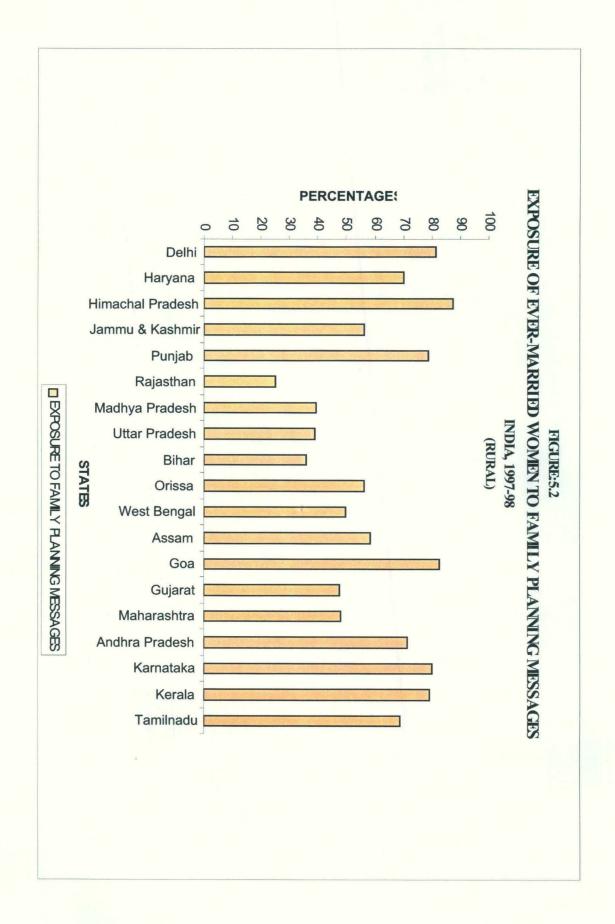


TABLE 5.3
EXPOSURE OF EVER-MARRIED WOMEN TO FAMILY PLANNING MESSAGES BY SOURCES OVER THE STATES OF INDIA (RURAL)

States	Women Exposed To FP Messages (by sources)						
	Radio	TV	Cinema/Filmshow	Newspaper/ Magazine	Wall painting/ Hoarding	Drama/Folkdance/ Street-play	
Delhi	42.6	78.8	9.5	17.9	19.9	1.1	
Haryana	30.1	52.5	0.9	8.1	32.6	0.4	
Himachal Pradesh	54.2	74.5	2.8	24	57.3	0.3	
Jammu & Kashmir	42.4	37.7	1.5	6.3	13.9	3.3	
Punjab	28.7	69.9	1.6	13.8	32.8	0.4	
Rajasthan	14.4	18.8	1.7	4	5.4	0.7	
Madhya Pradesh	21.9	28.8	4.8	7.6	14.3	5	
Uttar Pradesh	29.9	23.3	2.8	5.8	11.5	2.5	
Bihar	23.7	16.2	4.8	5.7	20.1	2.9	
Orissa	42.7	30.2	5.2	9.5	30.9	6.8	
West Bengal	37.6	23.6	4.6	5.8	19.9	3.7	
Assam	47.2	26.5	7.8	11.8	21.2	2.8	
Goa	47.7	69.3	10.2	32.5	58.9	22.5	
Gujarat	22.8	31.4	4.6	15	33.3	4.2	
Maharashtra	22.5	36.5	7	13.4	27.8	2.9	
Andhra Pradesh	45.5	49.9	26.1	12.7	33.2	7.8	
Karnataka	69	53.7	30.8	20.5	48.3	8.7	
Kerala	57.4	40.6	15.9	48.3	57	5.6	
Tamil Nadu	46.4	47.5	20.6	15.3	41.9	4.2	
				``			
All India	34.3	32.5	8.9	11	25	4	

According to the available statistics the messages on family planning disseminated through the mass media like radio, TV, cinema or film show, newspaper or magazine, wall painting or hoarding, and drama, folkdance or street play, reach out to almost about half of the population of ever-married women concerned in this study, in case of rural areas. In the rural areas, on an average, the most important media of exposure to family planning messages is the radio, followed TV and wall painting and hoarding, and then comes newspaper or magazine and cinema or film show with drama, folkdance and street play having negligible importance. In case of the radio as a media, the national average is 34.3% and the percentages range between 69.0% (Karnataka) and 14.4%(Rajasthan) with a coefficient of variation of 37.35, which shows a moderately consistent dataset. As per

the exposure to family planning messages through TV is concerned, the national average is 32.5% and the data ranges between 78.8% (Delhi) and 16.2%(Bihar), and the coefficient of variation of 45.86 proves the moderate consistency of the data. For the category of wall painting or hoarding, the national average is 25.0% with the percentages ranging between 58.9% (Goa) and 5.4% (Rajasthan) and the dataset shows lower degree of consistency with a coefficient of variation of 52.66. In case of the newspaper or magazine, the national average is 11.0% and the states varying between 48.3% (Kerala) and 4.0% (Rajasthan) with a coefficient of variation of 74.47%, showing moderate inconsistency of the dataset. The other two variables of cinema or film show and drama, folkdance or street play have lower values of national average of 8.9% and 4.0% respectively and both the dataset are highly inconsistent in nature with very high values of coefficient of variation of 100.79 and 110.82 respectively.

TABLE 5.4
AWARENESS AMONG EVER-MARRIED WOMEN
OVER THE STATES OF
INDIA
(RURAL)

States	PCA Awareness	Rank
Kerala	1.74595	1
Goa	1.65916	2
Himachal Pradesh	1.31995	3
Karnataka	1.10676	4
Delhi	0.72241	5
Tamil Nadu	0.52821	6
Andhra Pradesh	0.4848	7
Punjab	0.37016	8
Haryana	-0.0866	9
Jammu & Kashmir	-0.31299	10
Assam	-0.36026	11
Orissa	-0.40504	12
Maharashtra	-0.48194	13
Gujarat	-0.56577	14
West Bengal	-0.66483	15
Madhya Pradesh	-0.96419	16
Uttar Pradesh	-1.13579	17
Bihar	-1.30019	18
Rajasthan	-1.65979	19

#### **VARIABLES:**

- 1. Exposure to mass media through newspaper/magazine
- Exposure to mass media through TV
- 3. Exposure to mass media through radio
- 4. Exposure to mass media through cinema/ theatre
- 5. Exposure to Family Planning messages
- 6. Discussion of Family Planning with husband
- 7. Discussion of Family Planning with anyone
- 8. Exposure to Family Planning messages through radio
- 9. Exposure to Family Planning messages through TV
- 10. Exposure to Family Planning messages through cinema/film-show
- 11. Exposure to Family Planning messages through newspaper/magazine
- 12. Exposure to Family Planning messages through wall-painting/hoarding13. Exposure to Family Planning messages through drama/folkdance/street-play

The Principal Component Analysis has been computed to get the summary score of all the interacting variables representing the awareness of ever-married women. The resultant factor scores have been ranked to analyse the statewise position of the ever-married women regarding their status of awareness. The table in the above section represents the statewise PCA factor scores; and the ranks are arranged in the fashion where the highest factor score has been assigned the lowest rank.

#### 5.2.2 URBAN SCENARIO

In the urban areas, the exposure of ever-married women to mass media as well as to that of family planning messages shows better response compared to their rural counterparts. This naturally improves the overall awareness factor score of the ever-married women of urban residence.

The variable of exposure to mass media regularly shows a wide variability over the states of India, ranging between 98.2% in Himachal Pradesh and 67.3% in Bihar with the national average of 87.1%. States like Himachal Pradesh, Punjab, Kerala, Goa, Delhi, Karnataka, Andhra Pradesh, Tamil Nadu, Jammu and Kashmir, Haryana, Maharashtra and West Bengal score above the national average with percentages ranging around 90% and above. These are followed by states like Gujarat, Assam, Madhya Pradesh, Uttar Pradesh, Orissa and Rajasthan, with scores around 70% and 85%, all clubbing themselves

in the below national average category. The dataset shows very high consistency with coefficient of variation of 9.55.

Among the various sources of exposure to mass media, TV is the most common of the lot in the urban areas, followed by that of listening to radio, reading newspaper or magazine and visiting cinema or theatre. The national average for exposure of ever-married women to mass media through TV is 80.6%, quite high in comparison to rural sector. The state of Himachal Pradesh scores the maximum of 96.9% and Bihar records the lowest of 59.1%. The states that score above the national average are Himachal Pradesh, Punjab, Delhi, Goa, Haryana, Karnataka, Andhra Pradesh, Jammu and Kashmir, West Bengal, Maharashtra, Kerala and Tamil Nadu, all having percentages above 80%. These are closely followed by states like Madhya Pradesh, Gujarat, Assam, Uttar Pradesh, Rajasthan, Orissa and Bihar, all clubbing themselves in the category of below national average scores and they range within 60% and 80%. The coefficient of variation is 11.45 and reveals the very high consistent level of the data.

In case of listening to radio, the national average is 46.3% with Kerala scoring the highest of 74.4% and Rajasthan scoring the lowest of 26.4%. States like Kerala, Karnataka, Jammu and Kashmir, Himachal Pradesh, Tamil Nadu, Assam, Delhi, Goa and Punjab with percentages ranging around 50% and 70%, score above the national average. The rest of the states of West Bengal, Maharashtra, Haryana, Uttar Pradesh, Orissa, Bihar, Andhra Pradesh and Madhya Pradesh, having percentage around 40% and 50%, followed by Gujarat and Rajasthan that club themselves in the below the national average category, with scores around 30%. The coefficient of variation of 25.67 depicts the moderately high consistency of the dataset.

Regarding the variable of reading newspaper or magazine, the national average is 43.4% with Kerala scoring the highest of 74.3% and Orissa scoring the lowest of 29.4%. States of Kerala, Himachal Pradesh, Punjab, Goa, Delhi, Maharashtra, Karnataka, Haryana, Gujarat and Assam score above the national average, with percentages around 45% and 75%. The states that club themselves in the below the national average category are West

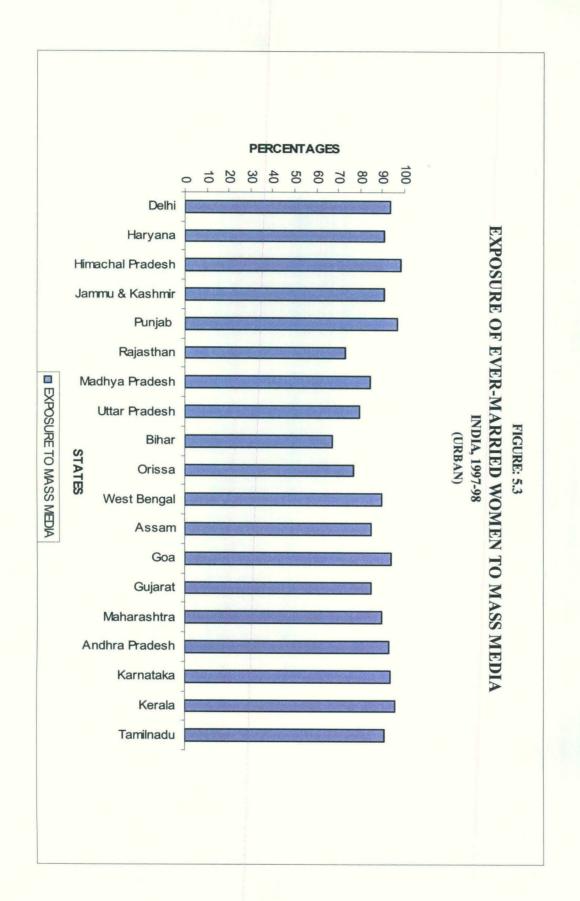
Bengal, Andhra Pradesh, Madhya Pradesh, Tamil Nadu, Rajasthan, Uttar Pradesh, Bihar and Orissa, with percentages around 30% and 40%. The coefficient of variation is 27.35, revealing the moderately high consistent nature of the data.

TABLE 5.5
EXPOSURE OF EVER-MARRIED WOMEN TO MASS MEDIA
OVER THE STATES OF INDIA
(URBAN)

States	Women's exposure to mass media					
	Reads newspaper/magazine at least once/week	Watches TV at least once/week	Listens to radio at least once/week	Visits cinema/theatre at least once /month	Women exposed to any media regularly	
Delhi	51.9	90.9	55.2	15.3	93.6	
Haryana	47.2	87.3	44.5	12.5	90.8	
Himachal Pradesh	65.4	96.9	64	10.8	98.2	
Jammu & Kashmir	33.4	84.5	67	5.2	90.9	
Punjab	62.1	94	50.3	16.4	96.6	
Rajasthan	35.2	68.3	26.4	8	73.1	
Madhya Pradesh	37.8	79.8	37.1	15.6	84.2	
Uttar Pradesh	33.9	74.7	43.8	11.7	79.8	
Bihar	31.4	59.1	39.6	18.3	67.3	
Orissa	29.4	67.1	41.7	17.3	76.8	
West Bengal	40.3	84.3	46.2	10.6	89.6	
Assam	45	76.2	56.2	9.3	85.1	
Goa	59.4	88.2	53	6.3	94.1	
Gujarat	47.1	79.7	33.8	13	85.2	
Maharashtra	50.5	83.6	45.5	13.1	89.6	
Andhra Pradesh	39.4	84.6	38.2	45.9	93.1	
Karnataka	49.8	84.9	67.7	27.5	93.4	
Kerala	74.3	82.5	74.4	17.6	95.7	
Tamil Nadu	36.9	81.3	56.4	26	91	
All India	43.4	80.6	46.3	18.1	87.1	

Source: NFHS-2, 1998-99.

In case of visiting cinema or theatre, the data range shows a wide variation scoring between 45.9% (Andhra Pradesh) and 5.2% (Jammu and Kashmir), with the national average of 18.1%. Apart from Andhra Pradesh, the other-states that score above the national average are Karnataka, Tamil Nadu and Bihar with percentage ranging around



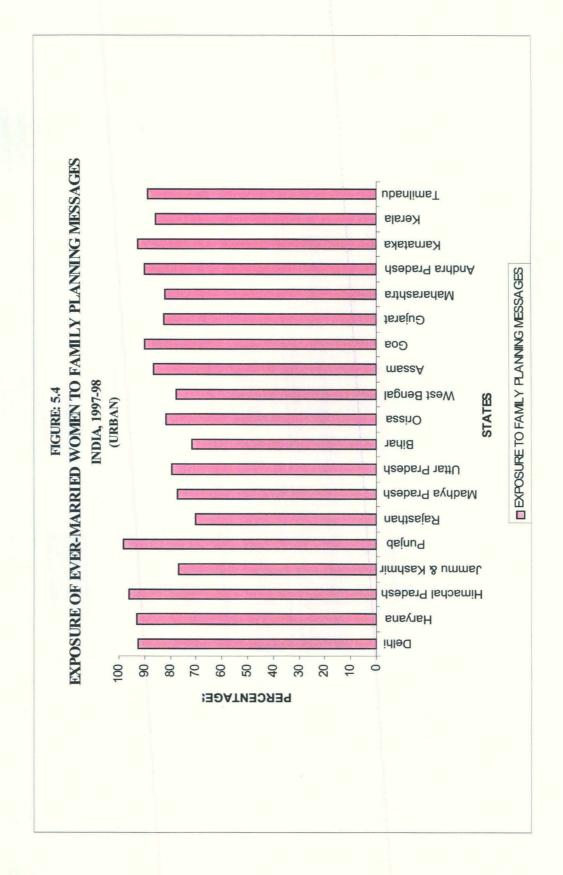
20% and 45%. Most of the states score below the national average, with a range between 10% and 20% and few states scoring below 10%. The dataset shows moderately low consistency with coefficient of variation of 58.88.

TABLE 5.6
EXPOSURE OF EVER-MARRIED WOMEN TO FAMILY PLANNING MESSAGES AND DISCUSSION ON FAMILY PLANNING OVER THE STATES OF INDIA (URBAN)

States	Women's exposure to messages & discussion on family planning			
4 7 7 6	Exposed to FP messages	Discussed FP with husband	Discussed FP with anyone	
Delhi	92.6	23.3	27.3	
Haryana	93.1	55.5	64.9	
Himachal Pradesh	96	49.6	56.7	
Jammu & Kashmir	76.8	21.2	28	
Punjab	98.2	59	66.5	
Rajasthan	70.3	20.1	24.9	
Madhya Pradesh	77.1	16.8	26.5	
Uttar Pradesh	79.5	26.2	30.3	
Bihar	71.7	16.6	23.2	
Orissa	81.7	30.3	37.7	
West Bengal	77.6	25	31.7	
Assam	86.2	27	29.7	
Goa	89.8	26.1	35.9	
Gujarat	82.6	14.7	25.2	
Maharashtra	82	22.1	26	
Andhra Pradesh	90	11	25	
Karnataka	92.4	20.3	29	
Kerala	85.4	15.7	22.7	
Tamil Nadu	88.4	16.7	27.8	
All India	83.4	21.8	29.3	

Source: NFHS-2, 1998-99.

Regarding the exposure of ever-married women to family planning messages in the urban areas, the percentages score higher values in comparison to the rural counterpart. The national average is 83.4%, with Punjab scoring the maximum of 98.2% and Rajasthan scoring the lowest of 70.3%. The states scoring above the national average are Punjab, Himachal Pradesh, Haryana, Delhi, Karnataka, Andhra Pradesh, Goa, Tamil Nadu, Assam and Kerala with percentages around 80% and 98%. The rest of the states like



Gujarat, Maharashtra, Orissa, Uttar Pradesh, West Bengal, Madhya Pradesh, Jammu and Kashmir and Rajasthan score below the national average, with percentages around 70% and 80%. The data shows very high consistency with coefficient of variation of 9.49.

Regarding the variable of discussion of family planning with the husband, about 21.8% of ever-married women, on an average, in the urban areas, discuss family planning with their husbands. The highest value is scored by the state of Punjab (59.0%) and the lowest value scored by Andhra Pradesh (11.0%). The states that scores above national average are Punjab, Haryana and Himachal Pradesh, with percentages around 50% and 60%, followed by Orissa, Assam, Uttar Pradesh, Goa, West Bengal, Delhi and Maharashtra, with percentages around 20% and 30%. The rest of the states have scores below the national average, ranging around 10% and 20%. The coefficient of variation is 52.27, showing moderately low consistency of the data.

In case of the variable of discussion of family planning with anyone, the national average is 29.3%, with Punjab scoring the highest of 66.5% and Kerala scoring the lowest of 22.7%. States like Punjab, Haryana and Himachal Pradesh have higher scores around 55% and 60%. Along with these states, Orissa, Goa, West Bengal, Uttar Pradesh and Assam also score above the national average, with percentages around 30% and 40%. The rest of the states like Karnataka, Jammu and Kashmir, Tamil Nadu, Delhi, Madhya Pradesh, Maharashtra, Gujarat, Andhra Pradesh, Rajasthan, Bihar and Kerala score below the national average, with percentages around 20% and 30%. The coefficient of variation is 40.43, which shows that the dataset have moderate consistency.

The exposure of ever-married women to the family planning messages through the various sources reveals the fact that the most important media in this case is the TV, followed by radio, wall painting or hoarding, newspaper or magazine, cinema or film show and drama, folkdance or street play. The national average, for TV as an electronic media for the exposure to family planning messages, is 75.9% with Himachai-Pradesh scoring the highest of 94.8% and Kerala scoring the lowest of 60.7%. The coefficient of variation is 12.97, revealing the very high consistency level of the variable. In case of

radio as the media, the national average is 49.0% and Karnataka score the maximum of 75.7% with Rajasthan scoring the lowest of 32.1%. The variable shows moderately high consistency with coefficient of variation of 21.76.

TABLE 5.7
EXPOSURE OF EVER-MARRIED WOMEN TO FAMILY PLANNING MESSAGES BY SOURCES OVER THE STATES OF INDIA (URBAN)

States	Women Exposed To FP Messages (by sources)					
	Radio	TV	Cinema/Filmshow	Newspaper /Magazine	Wall painting/ Hoarding	Drama/Folkdance/ Street-play
		<del></del>				
Delhi	54.3	90.6	22.5	44.8	40.1	. 8.2
Haryana	49.7	88.1	9.7	42	48.5	0.6
Himachal Pradesh	63	94.8	12.8	60	67.4	1.3
Jammu & Kashmir	55.7	70.2	5.7	26.4	29.7	4.8
Punjab	47.2	94.4	10	57.1	58.7	0.3
Rajasthan	32.1	67.3	13	28.6	22.4	3.4
Madhya Pradesh	34.5	72.3	19.4	34.5	37	14
Uttar Pradesh	51.5	75.6	19.6	30.7	31.9	6.2
Bihar	45.5	61.7	26.6	26.2	35.7	3.6
Orissa	51.5	69	21	31	47.7	9.8
West Bengal	41.4	71.8	15.5	30	38.4	6.8
Assam	62.6	75	31.4	43.8	46.3	6.6
Goa	44.7	81.4	14.8	52	69.9	19.6
Gujarat	39.1	74.3	19.3	45.5	59	3.3
Maharashtra	43.6	74.7	20.3	38.6	53.3	5.7
Andhra Pradesh	47.7	82.5	42.2	34.1	46.8	3.7
Karnataka	75.7	84.4	44.3	49.1	63.8	7.2
Kerala	61.5	60.7	26.6	57	64.3	5
Tamil Nadu	63.3	77	37.9	39.5	62.9	1.7
All India	49	75.9	24.5	38.1	47.3	5.6

Source: NFHS-2, 1998-99.

Regarding the wall painting or hoarding category the national average is 47.3%, with Goa scoring the highest of 69.9% and Rajasthan scoring the lowest of 22.4%. The data has a coefficient of variation of 28.80, depicting its moderately high consistency nature. The national average for the variable of exposure to family planning messages through newspaper or magazine is 38.1%, with the highest score of 60.0% recorded by Himachal Pradesh and Bihar scoring the lowest of 26.2%. The coefficient of variation is 26.71,

thereby revealing the moderately high consistent level of the variable. For the category of exposure to family planning messages through cinema or film show, the national average is 24.5%. The data ranges between the highest and the lowest values of 44.3% (Karnataka) and 5.7% (Jammu and Kashmir) respectively, with a coefficient of variation of 50.12, showing the moderate consistency of the variable towards a lower level. The variable of drama, folkdance or street play as the media source for dissemination of family planning messages has very low percentage records over the states of India, with a national average of only 5.6%. The respective highest and the lowest values record within a range of 19.6% (Goa) and 0.3% (Punjab), with moderate inconsistency of the dataset as revealed by the coefficient of variation of 80.15.

TABLE 5.8
AWARENESS AMONG EVER-MARRIED WOMEN
OVER THE STATES OF
INDIA
(URBAN)

States	PCA Awareness	Rank
Himachal Pradesh	2.01313	1
Punjab	1.78226	2
Haryana	0.94368	3
Karnataka	0.86059	4
Goa	0.67371	5
Kerala	0.61199	6
Delhi	0.51144	7
Tamil Nadu	0.14294	8
Assam	0.04037	9
Maharashtra	-0.18162	10
Andhra Pradesh	-0.24633	11
Gujarat	-0.30529	12
West Bengal	-0.61646	13
Jammu & Kashmir	-0.61945	14
Orissa	-0.73183	15
Uttar Pradesh	-0.73212	16
Madhya Pradesh	-0.95616	17
Bihar	-1.58004	18
Rajasthan	-1.61082	19

#### **VARIABLES:**

- 1. Exposure to mass media through newspaper/magazine
- 2. Exposure to mass media through TV
- 3. Exposure to mass media through radio
- 4. Exposure to mass media through cinemal theatre
- 5. Exposure to Family Planning messages
- 6. Discussion of Family Planning with husband
- 7. Discussion of Family Planning with anyone
- 8. Exposure to Family Planning messages through radio
- 9. Exposure to Family Planning messages through TV
- 10. Exposure to Family Planning messages through cinema/film-show
- 11. Exposure to Family Planning messages through newspaper/magazine
- 12. Exposure to Family Planning messages through wall-painting/hoarding
- 13. Exposure to Family Planning messages through drama/folkdance/street-play

The Principal Component Analysis has been computed separately for the urban sector also to gauge the degree of awareness among the ever-married women. The resultant factor scores have been ranked to analyse the statewise position of the ever-married women regarding their status of awareness. The statewise PCA factor scores, regarding the awareness of ever-married women, and their respective ranks, arranged in the fashion where the highest factor score has been assigned the lowest rank, has been represented in the above table.

#### 5.2.3 TOTAL SCENARIO

The exposure of ever-married women to the mass media and family planning messages, in the total scenario, shows that around 60% of the women on an average are exposed to the media regularly and they are aware of the family planning messages. The national average for the exposure to any kind of media on a regular basis is 59.7%, with Delhi scoring the maximum of 92.7% and Bihar scoring the minimum of 27.3%. The states with higher scores around 80% and 90% are Delhi, Kerala, Goa, Himachal Pradesh and Punjab. These are closely followed by the states of Tamil Nadu, Karnataka, Andhra Pradesh, Jammu and Kashmir and Maharashtra, scoring between 70% and 80%. Along with these states, Haryana, Gujarat and West Bengal, with scores around 60% and 70%, also club themselves together for their percentage records in the above national average category. States of Madhya Pradesh, Assam, Uttar Pradesh, Orissa, Rajasthan and Bihar

falls in the below national average category, with their scores around 30% and 50%. The coefficient of variation of 28.18 proves the moderately high consistent nature of the data. In case of the exposure to mass media through sources, watching TV scores the highest percentages followed by listening to radio, reading newspaper or magazine and visiting cinema or theatre. The national average for the category of watching TV as a media source is 45.7%, with the highest score of 90.1% recorded by Delhi and the lowest of 16.8% by Bihar. The states having above the national average scores are Delhi, Goa, Punjab and Himachal Pradesh, with percentages around 70% and 90%, followed by Tamil Nadu, Kerala, Maharashtra, Haryana, Karnataka, Andhra Pradesh, Gujarat and Jammu and Kashmir, with percentages around 55% and 60%. The rest of the states like Madhya Pradesh, West Bengal, Uttar Pradesh, Rajasthan, Assam and Orissa score below the national average, with percentages ranging around 30% and 45%, apart from Bihar scoring below 20%. The data is moderately consistent in nature with coefficient of variation of 37.53.

Regarding the exposure to mass media through the radio, the national average is 36.5%, with Kerala scoring the maximum of 70.9% and Rajasthan the minimum of 16.7%. Apart from Kerala, states like Karnataka, Jammu and Kashmir, Himachal Pradesh, Delhi, Goa and Tamil Nadu score above the national average, with percentages around 50% and 60%, along with states of West Bengal, Assam and Andhra Pradesh, with percentages around 40%. The states that score below the national average are Maharashtra, Punjab, Orissa, Haryana, Gujarat, Uttar Pradesh, Madhya Pradesh, Bihar and Rajasthan, with percentages around 20% and 35%. The coefficient of variation is 35.33, revealing the moderate consistency of the dataset.

In case of reading newspaper or magazine, the national average is 20.8% and Kerala scores the highest of 64.2% and Bihar the lowest of 9.3%. Apart from Kerala, most of the states have their records below 50%. The states with above national average percentages are Kerala, Delhi, Goa, Maharashtra, Punjab, Gujarat, Karnataka, Himachal Pradesh, Tamil Nadu and Haryana, with scores between 20% and 50%. The rest of the states of Andhra Pradesh, Assam, Madhya Pradesh, West Bengal, Jammu and Kashmir, Uttar

Pradesh, Rajasthan, Orissa and Bihar score below the national average, with percentages around 10% and 20%. The coefficient of variation of 59.20 proves that the data has very low consistency and points towards the inconsistent nature of the data.

TABLE 5.9
EXPOSURE OF EVER-MARRIED WOMEN TO MASS MEDIA
OVER THE STATES OF INDIA
(TOTAL)

States	Women's exposure to mass media					
	Reads newspaper/magazine at least once/week	Watches TV at least once/week	Listens to radio at least once/week	Visits cinema/theatre at least once /month	Women exposed to any media regularly	
Delhi	50.1	90.1	54.1	14.5	92.7	
Haryana	21.7	60.9	31.4	4	66.9	
Himachal Pradesh	27.5	73.9	56.5	2	83.7	
Jammu & Kashmir	12.7	54.6	57.6	2.5	74.4	
Punjab	31.4	77.3	35.4	5.7	82	
Rajasthan	12.4	30.2	16.7	2.9	36.9	
Madhya Pradesh	16.4	44.5	28.2	7.4	54.8	
Uttar Pradesh	12.6	32.1	29.5	3.5	45.3	
Bihar	9.3	16.8	20.3	4.4	27.3	
Orissa	10.7	27.7	33.1	4.6	44.3	
West Bengal	15	40.8	41.6	9.7	61.4	
Assam	16.5	28.8	40.8	5.6	52.6	
Goa	48.4	80.8	52	4.3	88.4	
Gujarat	29.7	55.9	30.5	7.5	66.2	
Maharashtra	32.2	61.8	36.1	8.3	70.4	
Andhra Pradesh	19.5	58.2	39.2	35.1	76.3	
Karnataka	27.9	58.4	60.9	19.7	78.6	
Kerala	64.2	62.4	70.9	12.1	88.5	
Tamil Nadu	23.1	63	51.7	21.9	79.7	
All India	20.8	45.7	36.5	10.6	59.7	

Source: NFHS-2, 1998-99.

The variable of visiting cinema or theatre as an exposure to mass media have some of the lowest percentages among the other variables of sources of exposure to mass media. The national average for this is 10.6%, with Andhra Pradesh scoring the highest of 35.1% and Himachal Pradesh scoring the lowest of 2.0%. Apart from Andhra Pradesh, all the other states have their percentages below 20%. The states that score above the national average

are Andhra Pradesh, Tamil Nadu, Karnataka, Delhi and Kerala. All the other states have their percentages below the national average. The coefficient of variation is 91.03, depicting the highly inconsistent nature of the variable.

TABLE 5.10
EXPOSURE OF EVER-MARRIED WOMEN TO FAMILY PLANNING MESSAGES AND DISCUSSION ON FAMILY PLANNING OVER THE STATES OF INDIA (TOTAL)

States	Women's exposure to messages & discussion on family planning				
	Exposed to FP messages	Discussed FP with husband	Discussed FP with anyone		
Delhi	91.7	23.6	27.5		
Haryana	76.6	47.4	57		
Himachal Pradesh	88.4	44.4	54.5		
Jammu & Kashmir	60.6	22	28.9		
Punjab	84.8	49.7	58.8		
Rajasthan	35.9	17.7	22.6		
Madhya Pradesh	48.9	16.4	23.7		
Uttar Pradesh	47.1	18.5	22.7		
Bihar	39.7	13.9	19.8		
Orissa	58.9	24.4	31.1		
West Bengal	56.5	17.8	25.2		
Assam	60.8	20.5	25.4		
Goa	85.7	25.1	33.4		
Gujarat	62.5	11.4	20.6		
Maharashtra	62.2	17.5	20.5		
Andhra Pradesh	75.9	10	22.7		
Karnataka	84.4	14.8	21.8		
Kerala	80.6	17.8	23.8		
Tamil Nadu	75.7	13.1	23.8		
All India	59.9	17.8	24.6		

Source: NFHS-2, 1998-99.

Regarding the variable of exposure to family planning messages, the national average is 59.9%, with the maximum score of 91.7% recorded by Delhi and the minimum of 35.9% by Rajasthan. The states with above national average scores are Delhi, Himachal Pradesh, Goa, Punjab, Karnataka and Kerala, with percentages around 80% and 90%, followed by Haryana, Andhra Pradesh, Tamil Nadu, Gujarat, Maharashtra, Assam and Jammu Akashmir, with percentages around 60% and 80%. The states that score below the national average are Orissa, West Bengal, Madhya Pradesh, Uttar Pradesh, Bihar and Rajasthan,

with percentages around 35% and 60%. The coefficient of variation is 25.30, revealing the moderately high consistent nature of the data.

In case of the variable where the ever-married women have discussed family planning with anyone including friends, relatives and neighbours, the national average is 24.6%. The state of Punjab scores the highest of 58.8% with Bihar having the lowest record of 19.8%. Apart from the states of Punjab, Haryana and Himachal Pradesh, with higher scores around 50% and 60%, the states of Goa, Orissa, Jammu and Kashmir, Delhi, Assam and West Bengal also score above the national average, with percentages around 25% and 30%. The rest of the states like Kerala, Tamil Nadu, Madhya Pradesh, Uttar pradesh, Andhra Pradesh, Rajasthan, Karnataka, Gujarat, Maharashtra and Bihar score below the national average, with percentages around 20%. The coefficient of variation is 42.40, showing the moderate consistent nature of the variable.

In case of the variable where the ever-married women have discussed family planning with their husband, the national average is 17.8% and the state of Punjab scores the highest percentage of 49.7% and Andhra Pradesh scores the lowest percentage of 10.0%. The states of Punjab, Haryana and Himachal Pradesh have recorded higher scores around 45% and 50%. Along with these states are the other ones that also have their scores above the national average, like Goa, Orissa, Delhi, Jammu and Kashmir, Assam, Uttar Pradesh, Kerala and West Bengal, with their scores around 20% and 25%. The remaining states of Rajasthan, Maharashtra, Madhya Pradesh, Karnataka, Bihar, Tamil Nadu, Gujarat and Andhra Pradesh have their scores below the national average, with percentages around 10% and 20%. The coefficient of variation is 52.58, which shows that the data has very low consistency.

Following the trend as maintained by the rural and the urban sectors, the total scenario also reveals the fact that the TV is the most important source of dissemination of family planning messages, followed by radio, wall painting or newspaper or magazine, cinema or film show and drama, folk dance or street play. In case of TV as the source, the national average is 43.9%, with Delhi scoring the maximum of 89.6% and Bihar scoring

the lowest percentage of 20.9%. The coefficient of variation is 37.05, which is moderately consistent in nature.

TABLE 5.11
EXPOSURE OF EVER-MARRIED WOMEN TO FAMILY PLANNING MESSAGES BY SOURCES OVER THE STATES OF INDIA (TOTAL)

States		Wor	nen Exposed To Fl	P Messages (	by source	s)
	Radio	TV	Cinema/Filmshow	Newspaper/ Magazine	Wall painting/ Hoarding	Drama/Folkdance/ Street-play
Delhi	53.4	89.6	21.4	42.7	38.5	7.7
Haryana	35.7	62.7	3.4	17.9	37.2	0.4
Himachal Pradesh	55	76.3	3.8	27.3	58.2	0.4
Jammu & Kashmir	45.3	44.7	2.4	10.6	17.3	3.6
Punjab	34.4	77.4	4.2	27.1	40.8	0.4
Rajasthan	18.7	30.6	4.5	10	9.5	1.3
Madhya Pradesh	25.1	39.8	8.5	14.4	20	7.3
Uttar Pradesh	34.2	33.8	6.1	10.8	15.6	3.2
Bihar	25.9	20.9	7	7.8	21.7	2.9
Orissa	43.7	34.5	7	11.9	32.8	7.1
West Bengal	38.5	35.1	7.2	11.5	24.3	4.4
Assam	48.5	30.6	9.8	14.6	23.3	3.2
Goa	46.4	74.4	12.1	40.6	63.5	21.3
Gujarat	29.8	49.6	10.9	27.9	44.2	3.8
Maharashtra	31.2	52.3	12.5	23.8	38.3	4.1
Andhra Pradesh	46.1	58	30.1	18.1	36.6	6.8
Karnataka	71.3	64.4	35.5	30.5	53.7	8.2
Kerala	58.3	45.2	18.4	50.3	58.7	5.4
Tamil Nadu	52.3	57.7	26.2	23.7	49.2	3.3
All India	38.1	43.9	13	18.1	30.9	4.4

Source: NFHS-2, 1998-99.

For the variable of radio, the national average is 38.1% and Karnataka scores the highest of 71.3% with Rajasthan scoring the lowest of 18.7%. The dataset is moderately consistent in nature, with coefficient of variation of 31.63. The variable of wall painting or hoarding as the source also has a wide range between the highest value of 63.5% (Goa) and lowest of 9.5% (Rajasthan), with a national average of 30.9%. The coefficient of variation is 44.41 and it shows the moderately low consistent nature of the data. The variable of newspaper or magazine has a national average of 18.1%, with the highest and

lowest scores of 50.3% (Kerala) and 7.8% (Bihar) respectively. The variable has very low consistency with coefficient of variation of 55.21. In case of the variable of cinema or film show as the source of dissemination of family planning messages, the national average is 13.0% and the state of Karnataka scores the highest of 35.5% and Jammu and Kashmir scores the lowest percentage of 2.4%. It has a coefficient of variation of 79.63, depicting the moderately high inconsistent nature of the dataset. The variable where drama, folk dance or street play acts as the source of dissemination of family planning messages, the national average is 4.4%. The state of Goa scores the highest value of 21.3% and most of the states have low percentages of negligible order with Haryana, Himachal Pradesh and Punjab recording the lowest percentages of 0.4%. The variable is highly inconsistent in nature with a very high coefficient of variation score of 93.51.

TABLE 5.12
AWARENESS AMONG EVER-MARRIED WOMEN
OVER THE STATES OF
INDIA
(TOTAL)

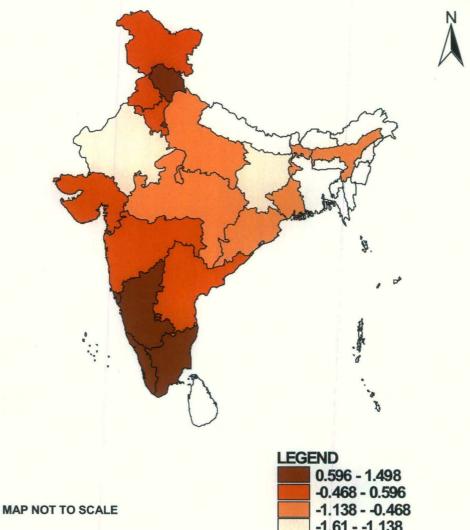
States	PCA Awareness	Rank
Delhi	1.49825	1
Goa	1.43164	2
Kerala	1.37299	3
Karnataka	1.201	4
Himachal Pradesh	0.93606	5
Tamil Nadu	0.5962	6
Punjab	0.5312	7
Andhra Pradesh	0.378	8
Haryana	-0.00563	9
Maharashtra	-0.08513	10
Gujarat	-0.16573	11
Jammu & Kashmir	-0.46828	12
Assam	-0.65088	13
West Bengal	-0.68223	14
Orissa	-0.69984	15
Madhya Pradesh	-0.88427	16
Uttar Pradesh	-1.13773	17
Bihar	-1.55521	18
Rajasthan	-1.61043	19

#### **VARIABLES:**

- 1. Exposure to mass media through newspaper/magazine
- 2. Exposure to mass media through TV
- 3. Exposure to mass media through radio
- 4. Exposure to mass media through cinema/ theatre
- 5. Exposure to Family Planning messages
- 6. Discussion of Family Planning with husband
- 7. Discussion of Family Planning with anyone
- 8. Exposure to Family Planning messages through radio
- 9. Exposure to Family Planning messages through TV
- 10. Exposure to Family Planning messages through cinema/film-show
- 11. Exposure to Family Planning messages through newspaper/magazine
- 12. Exposure to Family Planning messages through wall-painting/hoarding
- 13. Exposure to Family Planning messages through drama/folkdance/street-play

The Principal Component Analysis has been computed to get the summary score of all the interacting variables representing the awareness of ever-married women. The resultant factor scores have been ranked to analyse the statewise position of the ever-married women regarding their awareness status. The above table represents the statewise PCA factor scores of awareness of ever-married women. The ranks are arranged in the fashion where the highest factor score has been assigned the lowest rank.

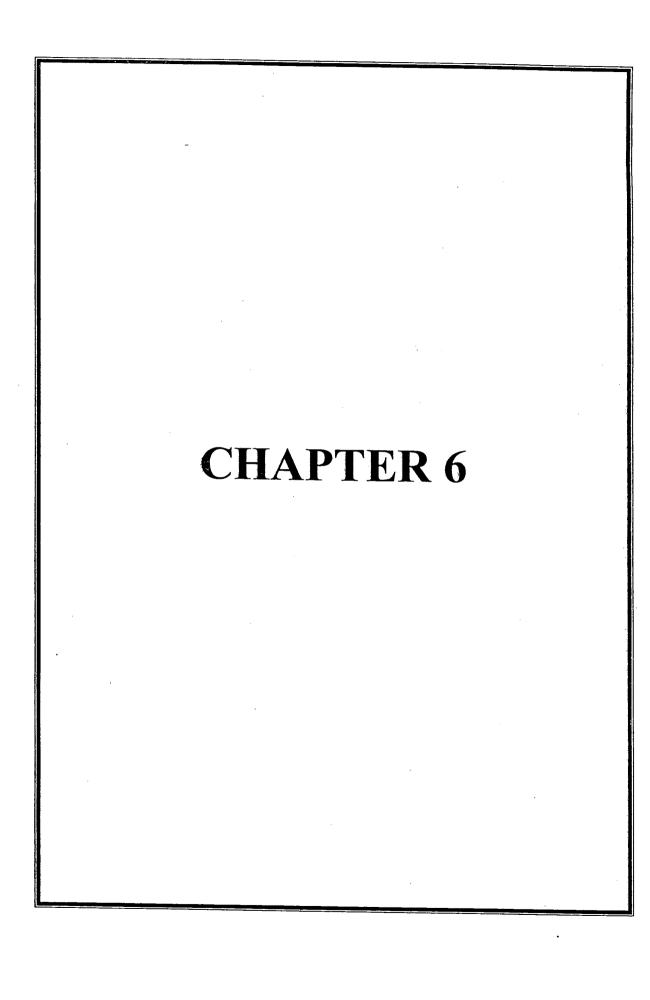
### **AWARENESS OF EVER-MARRIED WOMEN INDIA** (TOTAL)



INDEX DEVELOPED BY PCA

#### 5.3 CONCLUSION

The analysis of the data at the rural, urban and total level reveal the fact that on an average, about 60% of the ever-married women are exposed to the mass media and family planning messages. Thus the ever-married women are aware of the external world beyond their household courtyard and family planning, which helps them in developing their own views and ideas to take independent decisions. This also helps them to gather autonomy to place their own voice. As far as the sources of mass media and family planning message dissemination are concerned, the radio in rural areas plays a very significant role. Nowadays the electronic media has gathered great importance in disseminating family planning messages. The TV is yet another important source in this field. Among the different types of mass media, TV has the greatest reach across almost all categories of women. The wall painting or hoarding is significant mainly to the literate cohort as a source of message dissemination. The combined effect of all these has made an important effort to generate awareness about the family planning to the concerned population. Regarding the overall performance of the states in the degree of awareness of ever-married women it can be seen that the most important states on a zonal scale are the southern states of Kerala, Karnataka and Tamil Nadu, western state of Goa, and the northern states of Himachal Pradesh, Delhi, Haryana and Punjab. Once again the central BIMARU states, the term as coined by Dr. Ashish Bose, rank in the lower orders in awareness scale of the ever-married women along with the eastern states of Orissa, Assam and West Bengal.



#### CHAPTER - 6

#### STATUS OF EVER-MARRIED WOMEN

#### **6.1 INTRODUCTION**

The status of women in the real and complete sense is a recent and emerging concept. As has already been mentioned in the introductory chapter, status is a complex, dynamic and relative concept, encompassing certain powers derived either from one's own achievements and/or from ancestors. The power is manifested in prestige and privileges along with rights, roles and autonomy for independent action. The term status refers first, to an access to resources such as education, gainful employment, and health services and second, to the position (power, prestige, authority) that a woman enjoys in various situations.

According to the *Encyclopaedia of Social Sciences* (1934, p. 373) status denotes (a) position in a social system, involving reciprocal expectation of action with respect to occupants of other positions in the same structure, (b) place with respect to the distribution of prestige within a social system, and sometimes, by implications, with respect to the distribution of rights, obligations, power and authority within the same system as in the phrases, "high status" and "low status"; and (c) high place with respect to the distribution of rights, obligations, power and authority within the same as in the phrases, "Status Keeper".

Various authors have focused on different aspects of status of women. Some authors focus on the woman's prestige, while others talk of female autonomy, the power of women and freedom of control from others. Dyson and Moore (1983) define female autonomy as "the ability... to obtain information and use it as the basis for making decisions about one's private concerns and those of one's intimates. Thus equality of autonomy between the sexes... implies equal decision-making ability with regard to personal affairs". Dixon-Mueller (1985) talks of the access to (and control over) material

and social resources while other authors talk of the sex stratification system determining that only men control all the valuable resources of society.

The status granted to women in the society is also considered to be a strong social factor of fertility. The status of women as a key determinant of fertility suggests that changes in women's status may be the central element in successful effort to reduce fertility. The literature linking women's status and fertility is voluminous.

Fertility depends on the social status of women. In societies where women are confined only to household jobs, they are considered suitable only for producing children and as such, the women who can produce good number of children are held in high esteem. Obviously, in such societies fertility is very high as compared with other societies where women are expected to participate in all walks of life, along with men. In such societies, women want to limit their children. Similarly, educated and employed women also avoid having big families.

Status index or even scales comprising suitable and selected dimensions could be constructed to make the variables more sensitive, and quantifiable besides condensing the data for deriving meaningful generalisations. The measurement of variables in a discrete manner and the selection of appropriate control variables are highly essential. Suitable statistical procedures to pinpoint the direct and indirect influence of most of the casual factors are to be considered in this context. There may also be dual contribution of achieved and ascribed status variables, which individually and collectively, affect the overall status of the women differentially. If they are complementary to each other, their joint influence may emerge in a pronounced manner and if it is otherwise, one source of status may nullify the effect of the other and the real status situation may be vitiated at the final stage of assessment.

may include not only the respondents' psychological characteristics but familial, environmental and community characteristics as well. This is necessary because the

status of a person is in relation to the total environment and it is a diverse and changing concept. In this context, care has to be taken to project the status free from the intervening influence of other related factors. Generally, measurement of the status of women is based on limited major dimensions of their status, namely, educational attainment and occupational categories in a broad sense. This undermines the real influence of status differences per se, on population parameters. For instance, a woman may be endowed with certain crucial dimensions of status like higher education and better occupation and yet, she may not manifest the real influence of these dimensions of status when she has less personal autonomy in decision-making. Apart from these factors, other important variables that should be considered in evaluating the status of women are the health status of women and the degree of awareness. Therefore, the measurement of the autonomy of women, along with other dimensions of the status should go together for the measurements of real and complete manifestation of their emancipation in life. Various aspects and details of each broad idea has been considered in different studies in the previous chapters but within a holistic perspective on the lines of analytical framework suggested in this paper.

In this literature, health status of women, the level of educational attainment, participation within the work force as well as the occupational status, autonomy of women including decision-making authority within the family unit and own health care, freedom of movement, access to money, decision about expenditure of money by them etc., and awareness through exposure to mass media and family planning messages are all treated as measures of women's status that may influence fertility.

In order to get the overall picture of the status of women, the Principal Component Analysis (PCA) has been run including all these variables, considered for measuring the complex index of status of women, to capture the interrelationships among the variables also. The resultant factor scores have been ranked to analyse the statewise position of the ever-married women regarding their overall status. The following table represents the PCA factor scores and the ranks arranged in the fashion where the highest factor score has been assigned the lowest rank.

#### 6.2 SPATIAL DIMENSION OF STATUS OF EVER-MARRIED WOMEN

#### 6.2.1 RURAL SCENARIO

As per the PCA factor scores, the states with higher status of women in the rural scenario are Punjab, Himachal Pradesh, Kerala, Goa, and Delhi, holding the first five positions. The socio-economic environment of these states are most likely conducive for better status of women. However, one thing is common to all these states. Although these states have more or less higher scores in the fields of education, health, occupation, autonomy and awareness, they have lower scores in the field of work participation.

TABLE 6.1 STATUS OF EVER-MARRIED WOMEN OVER THE STATES OF INDIA (RURAL)

States	PCA Status of Women	Rank
Punjab	1.80669	1
Himachal Pradesh	1.47582	2
Kerala	1.31222	3
Goa	1.30746	4
Delhi	0.98325	5
Haryana	0.88325	6
Tamil Nadu	0.38677	7
Assam	0.10231	8
Gujarat	-0.12557	9
Orissa	-0.45451	10
West Bengal	-0.54663	11
Andhra Pradesh	-0.64477	12
Bihar	-0.69361	13
Jammu & Kashmir	-0.725	14
Karnataka	-0.80662	15
Maharashtra	-0.86132	16
Uttar Pradesh	-1.04332	17
Madhya Pradesh	-1.08203	18
Rajasthan	-1.27439	19

#### **VARIABLES:**

- 1. Education upto primary level
- 2. Education upto secondary level
- 3. Education upto higher secondary level and above
- 4. Working in family farm/business
- 5. Working in with someone else

- 6. Working as self-employed
- 7. Decision to cook
- 8. Decision to purchase jewellery, etc
- 9. Decision to stay with parents/siblings
- 10. Decision about own health care
- 11. Freedom of movement to market
- 12. Freedom of movement to visit friends/relatives
- 13. Access to money
- 14. Mean Body Mass Index
- 15. Anaemia
- 16. Engaged in occupation as professional worker
- 17. Engaged in occupation as sales worker
- 18. Engaged in occupation as service worker
- 19. Engaged in occupation as production worker
- 20. Engaged in occupation as agricultural worker
- 21. Engaged in occupation as other worker
- 22. Decision about expenditure of money earned by the respondents taken by respondent only
- Decision about expenditure of money earned by the respondents taken by husband only
- 24. Decision about expenditure of money earned by the respondents taken by respondent along with husband
- 25. Decision about expenditure of money earned by the respondents taken by others in the household
- 26. Decision about expenditure of money earned by the respondents taken by respondent along with others in the household
- 27. Involved in any kind of decision making

In the middle order status are the states like Haryana, Tamil Nadu, Assam, Gujarat, Orissa, West Bengal, Andhra Pradesh, Bihar and Jammu and Kashmir. However, among these states Haryana and Tamil Nadu generally have good scores in all the aspects, except the field of work participation, in case of Haryana, and health and occupation variables, in case of Tamil Nadu. In Assam work participation and health status of women are of lower order, in Gujarat women have lower occupational status, while both the states of Orissa and West Bengal have lower order of health and autonomy. The remaining states have moderate scores for all the considered variables, which have contributed to get the moderate scores in the overall status of women. The state of Bihar, though, has lower scores in all the variables especially education, health and awareness, yet, it has ranked in the middle order of status of women.

The states with low status of women are Karnataka, Maharashtra, Uttar Pradesh, Madhya Pradesh and Rajasthan. Here also, Karnataka and Maharashtra, with middle order scores

in all the variables, and higher order scores of work participation in case of Maharashtra, and work participation and awareness in case of Karnataka, have lower status of women. For the rest of the states the lower orders of scores in all the aspects have contributed to their lower order status of women.

#### 6.2.2 URBAN SCENARIO

In case of the urban areas, states of Himachal Pradesh, Punjab, Haryana, Gujarat and Delhi rank the first five positions in the status of women. In all the states, the scores for the variables like education, occupation, health, autonomy and awareness are quite in the higher order, except for the variable of work participation, where apart from the state of Himachal Pradesh, all of them mostly have moderate scores. However, in case of the state of Gujarat, the scores for autonomy is only of higher order and all the other variables have middle order scores and they have contributed to rank a higher order in the status of women for the state.

The middle order states in the status variable are Goa, Assam, Tamil Nadu, Kerala, Maharashtra, West Bengal, Karnataka, Andhra Pradesh and Uttar Pradesh. In case of Goa and Assam, all the variables have moderate scores, apart from work participation in Goa, which is of higher order and health of women in Assam, which record lower score, thereby contributing in positioning the states in the middle order. Tamil Nadu generally has all the variables in the middle order except that of work participation, which is of highest order and occupational status and health status, which are of lower order. In case of Kerala, we can see that the educational status and health status are of highest order, with all the other variables in the upper middle order, except for that of work participation and occupational status, which have scores of comparatively lower order. In all the other states the variables are of middle order, contributing to their moderate status of women, except in West Bengal the health status, in Karnataka the occupational status, and in Andhra Pradesh the educational status, are of lower order. The state of Uttar Pradesh has all its variables in the lower middle order, contributing to its moderately low status among the middle order states.

#### TABLE 6.2 STATUS OF EVER-MARRIED WOMEN OVER THE STATES OF INDIA (URBAN)

States	PCA Status of women	Rank
Himachal Pradesh	2.05866	1
Punjab	1.70573	2
Haryana	1.21257	3
Gujarat	0.69425	4
Delhi	0.57518	5
Goa	0.49551	6
Assam	0.35019	7
Tamil Nadu	0.34495	8
Kerala	0.27947	9
Maharashtra	-0.25932	10
West Bengal	-0.27897	11
Karnataka	-0.43163	12
Andhra Pradesh	-0.54763	13
Uttar Pradesh	-0.57206	14
Orissa	-0.75684	15
Bihar	-0.80883	16
Jammu & Kashmir	-0.90093	17
Rajasthan	-1.49928	18
Madhya Pradesh	-1.661	19

#### **VARIABLES:**

- 1. Education upto primary level
- 2. Education upto secondary level
- 3. Education upto higher secondary level and above
- 4. Working in family farm/business
- 5. Working in with someone else
- 6. Working as self-employed
- 7. Decision to cook
- 8. Decision to purchase jewellery, etc
- 9. Decision to stay with parents/siblings
- 10. Decision about own health care
- 11. Freedom of movement to market
- 12. Freedom of movement to visit friends/relatives
- 13. Access to money
- 14. Mean Body Mass Index
- 15. Anaemia
- 16. Engaged in occupation as professional worker
- 17. Engaged in occupation as sales worker
- 18. Engaged in occupation as service worker
- 19. Engaged in occupation as production worker
- 20. Engaged in occupation as agricultural worker
- 21. Engaged in occupation as other worker
- 22. Decision about expenditure of money earned by the respondents taken by respondent only
- 23. Decision about expenditure of money earned by the respondents taken

- by husband only
- 24. Decision about expenditure of money earned by the respondents taken by respondent along with husband
- 25. Decision about expenditure of money earned by the respondents taken by others in the household
- Decision about expenditure of money earned by the respondents taken by respondent along with others in the household
- 27. Involved in any kind of decision making

The states with low status of women are Orissa, Bihar, Jammu and Kashmir, Rajasthan and Madhya Pradesh. The state of Orissa have middle order score in occupation, the state of Jammu and Kashmir have the highest score in occupation and middle order score in health, while the state of Madhya Pradesh has higher score in work participation. Apart from these variables in case of all the other variables the states have lower order scores contributing to their lower status of women.

#### 6.2.3 TOTAL SCENARIO

In the total scenario, the states with high status of women are Punjab, Himachal Pradesh, Delhi, Tamil Nadu and Goa. In case of Punjab, all the variables have higher scores, apart from that of work participation, which is of lowest order, and education, which is of middle order. Himachal Pradesh has only work participation and occupational status of middle order, with other variables having higher scores. Delhi have moderately low score in work participation, and record moderate scores in health status and autonomy. Goa and Tamil Nadu have all their variables of higher order, except for low order of health status in Tamil Nadu.

The states of Haryana, Kerala, Gujarat, Maharashtra, West Bengal, Assam, Karnataka, Andhra Pradesh and Jammu and Kashmir have moderate status of women. In Haryana, the work participation is of lower order. In case of Kerala, though the educational status and health status are of highest order, with high awareness score, yet, it has a middle order ranking in case of the overall status of women. In case of Maharashtra, work participation and occupational status are of higher order. In Assam, health and work participation of women are of moderately lower order. In both the states of Karnataka and

Andhra Pradesh, the work participation and awareness variables are of higher order. Apart from the above mentioned exceptions, all the states have moderate order scores for the remaining variables. Jammu and Kashmir has records of moderately lower order in case of all the considered variables, thereby ranking it in the lower middle order.

TABLE 6.3
STATUS OF EVER-MARRIED WOMEN OVER THE STATES OF INDIA
(TOTAL)

	PCA Status of	
States	Women	Rank
Punjab	1.58295	1
Himachal Pradesh	1.25008	2
Delhi	1.21272	3
Tamil Nadu	1.14314	4
Goa	1.00401	5
Haryana	0.83466	6
Kerala	0.82875	7
Gujarat	0.31695	8
Maharashtra _	0.19804	9
West Bengal	-0.14009	10
Assam	-0.24287	11
Karnataka	-0.62687	12
Andhra Pradesh	-0.74675	13
Jammu & Kashmir	-0.8252	14
Orissa	-0.84339	15
Bihar	-1.0164	16
Uttar Pradesh	-1.19261	17
Madhya Pradesh	-1.36333	18
Rajasthan	-1.3738	19

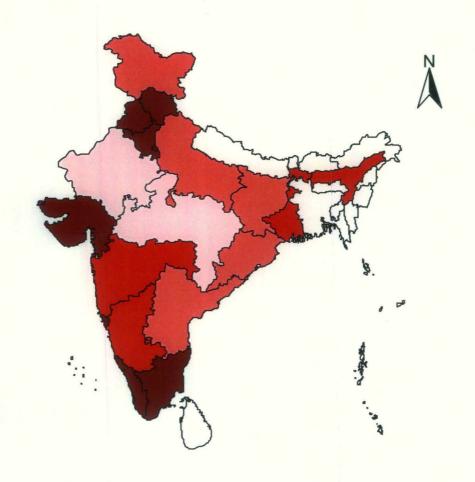
#### VARIABLES:

- 1. Education upto primary level
- 2. Education upto secondary level
- 3. Education upto higher secondary level and above
- 4. Working in family farm/business
- 5. Working in with someone else
- 6. Working as self-employed
- 7. Decision to cook
- 8. Decision to purchase jewellery, etc
- 9. Decision to stay with parents/siblings
- 10. Decision about own health care
- 11. Freedom of movement to market
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- 22. Decision about expenditure of money earned by the respondents taken by respondent only
- 23. Decision about expenditure of money earned by the respondents taken by husband only
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- 25. Decision about expenditure of money earned by the respondents taken by others in the household
- 26. Decision about expenditure of money earned by the respondents taken by respondent along with others in the household
- 27. Involved in any kind of decision making

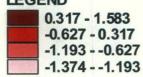
The lower status of women is found in the states of Orissa, Bihar, Uttar Pradesh, Madhya Pradesh and Rajasthan. Apart from the middle order scores in work participation in the states of Orissa and Madhya pradesh, all the states have lower order scores for all the considered variables, thereby, contributing to the low status of women in all these states.

# STATUS OF EVER-MARRIED WOMEN INDIA (TOTAL)



MAP NOT TO SCALE

#### **LEGEND**



ALL VALUES ARE BASED ON INDEX DEVELOPED BY PCA

#### 6.3 CONCLUSION

The matrilineal legacy of most communities provides a culturally congenial climate for improved status. Widespread education among women of all communities also helped to enhance their status. A higher level of educational attainment and adoption of more and more new roles in the economic sector by a greater number of women has contributed to their better status. Their employment status has liberated them financially and otherwise from their traditional dependency on the husband and subordination to men folk in general. The factors of better education and employment status also cumulatively contribute to achieve autonomy within the household unit and also in the society and they also contribute largely to generate awareness — which ultimately results in achieving a better status of women in the society. The societies where these factors are not so conducive have prompted their women folk to have lower status in their socio-economic and cultural environment. The spatial dimension of the status of women and the widespread variation as has been analysed in the above section has proven this fact.

## CHAPTER 7

#### CHAPTER - 7

#### FERTILITY OF EVER-MARRIED WOMEN

#### 7.1 INTRODUCTION

The study of human fertility occupies a central position in the study of population for a number of reasons. For the maintenance of the human society and for biological replacement also, human fertility is responsible. Any society replenishes itself through the process of human fertility. Thus, in population dynamics, fertility is a positive force, through which the population expands, counteracting the force of attrition caused by mortality. The process of replacement of a group through fertility is a complicated process.

In the words of Lewis and Thompson, "Fertility is generally used to indicate the actual reproductive performance of a woman or groups of women." Barnard Benjamin defines fertility by saying, "Fertility measures the rate of which a population adds to itself by births and is normally assessed by relating the number of births to the size of some section of population, such as the number of married couples to the numbers of women of child bearing age, i.e., an appropriate yardstick of potential fertility." He has also defined fertility by saying that, "The fundamental notion of fertility is an actual level of performance in a population, based on the number of live births that occur...fertility can be ascertained from statistics of births."

Fertility differentials analysis by important socio-economic, demographic and ethnocultural factors facilitate in highlighting the important determinants of fertility. In this study, the main objective is to analyse the status of women and its impact on their fertility behaviour. The aspect of status of women has been considered as one of the important determinants of fertility in many a study related to women studies and reproductive behaviour. This chapter presents a description of current and past fertility and also cumulative fertility measures. The fertility measures in this chapter are based on

the complete birth histories collected from ever-married women age 15 to 49 years. For this study, the two fertility measures that are considered for the analysis are the Total Fertility Rate (TFR) and Mean number of Children Ever Born (Mean CEB).

The Total Fertility Rate is the sum of the age-specific fertility rates of women in each five-year age group from 15 to 44 or 49. The TFR is a standardised rate whose values are particularly useful in interpreting the cumulative fertility implied by a given set of agespecific fertility rates. The TFR is a standardised measure because the age-specific fertility rate at each age is multiplied by a standard population, usually of 1000 persons. In other words, the TFR assumes a "rectangular" age distribution for the standard population with the same number of persons at each year of age, namely, 1000. In practice, it is usual to sum rates for five-years age groups and to assume that the agespecific rates for each single year are accurately summarised by the average rate for the five-year age group. As the TFR is generally expressed per woman, the product (after multiplying the sum of the age-specific fertility rates by 5) is divided by 1000. Actually, age-specific fertility rates change from year to year, and it is not likely that the agespecific rates for a specific calendar year would remain the same throughout the reproductive years of a woman. The TFR reflects what would happen to a hypothetical or "synthetic" cohort of women. The rate can only be interpreted to reflect completed family size when we assume that the age-specific fertility rates for women 20-24 years old now will still be the same when women 15 - 19 years become 20 - 24 years in five years' time, when we also make similar assumptions for the other age groups.

The TFR is only one type of standardised rate, but its use has been particularly widespread because it has a useful interpretation. The TFR summarises a hypothetical fertility history. It estimates the total number of live births 1000 women would have if they all lived through their entire reproductive period and were subject to a given set of age-specific fertility rates. In other words, the TFR reports the average number of live births among 1000 women exposed throughout their childbearing years to the schedule of age-specific fertility rates in effect, assuming no woman died during the childbearing years.

The Total Fertility Rate is a hypothetical rate indicating "the total number of children that would ever be born to a (hypothetical) group of women, if the group passed through its reproductive span of life with these birth rates in each year of age." The TFR assumes that the women in this hypothetical cohort or group would survive till they reach the end of the reproductive period. As the TFR is not affected by the age structure of the women under study, it is an effective summary rate for describing the frequency of childbearing in a year. It is also useful when comparisons between the reproductive performances of two groups of women are made, for it is standardised for age and is just one summary measure.

The number of children a woman has ever borne is a cohort measure of fertility. Because it reflects fertility in the past, it provides a somewhat different picture of fertility levels, trends and differentials than do period measures of fertility such as the Crude Birth Rate (CBR) and the Total Fertility Rate (TFR). Information on the number of children ever born is collected from ever-married or currently married women through census and/or fertility surveys. The present age of the number is also available from the same sources. By cross-classifying the age of the currently married woman and the number of children ever born to her, it is possible to compute the average number of children ever born per currently married woman. This measure is based on the actual reproductive performance of a group of women, and provides information on the average number of children born per married woman up to a certain age, or if the group has passed out of the reproductive age group, by the end of the child-bearing period. When the average number of children born per woman is computed for those who are beyond the reproductive ages, this measure is known as *completed fertility* or *completed family size*.

At this point, it is necessary to clarify that while the completed mean family size or Mean Children Ever Born (Mean CEB) is based on the actual reproductive experience of a group of women over a period of several years, the TFR is a hypothetical measure of completed family size and is based on the fertility-performance of a group of women during one year. Thus, the Mean number of Children Ever Born (Mean CEB) per woman

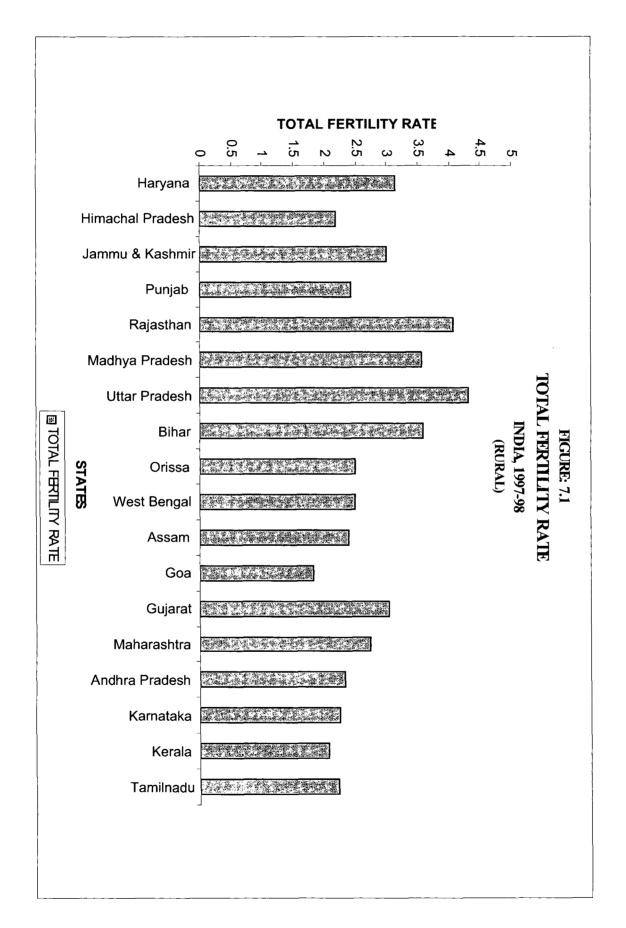
up to a certain age, or by the end of the reproductive period, is a cohort measure as against current measures based on reproductive performance in one year.

In this study, the Total Fertility Rate (TFR) has been analysed at rural, urban and total scales while the Mean number of Children Ever Born (Mean CEB) has been analysed in case of total scenario. Both the variables of fertility behaviour are considered as cumulative fertility wherein one, that is, the TFR is a hypothetical measure of completed family size, and the other, that is, the Mean CEB is a measure of completed family size based on the actual reproductive experience. Since the completed and cumulative fertility measure is a better representation of the actual total reproductive performance of women in their reproductive span of life, these two variables of fertility are taken into consideration to meet our objective of the analytical study and to relate them with the status of women to gauge the degree of impact that it casts on their reproductive behaviour.

### 7.2 SPATIAL DIMENSION OF FERTILITY OF EVER-MARRIED WOMEN

#### 7.2.1 RURAL SCENARIO

The pattern of fertility, in the rural areas, reveals a widespread variation over the states of India. The Total Fertility Rate (TFR) has been considered as a variable representing the aspect of fertility. As per the records, the national average of TFR, for the rural areas, is 3.07 children per woman. The state with the highest value of TFR of 3.41 is Uttar Pradesh and Goa records the lowest TFR of 1.83. The states that have records of TFR above the national average are Uttar Pradesh, Rajasthan, Bihar, Madhya Pradesh and Haryana, with scores around 4.31 and 3.13 children per woman. The states with below the national average scores are Gujarat, Jammu and Kashmir, Maharashtra, Orissa, West Bengal, Punjab, Assam, Andhra Pradesh, Karnataka, Tamil Nadu and Himachal Pradesh, which have scores around 3.03 and 2.18, along with states of Kerala and Goa with below the replacement level of TFR of 2.1 children per woman, ranging between 2.07 and 1.83 children per woman. The data for the state of Delhi is not being recorded. The coefficient



of variation of TFR in the rural scenario is 25.38, which shows the moderately high consistent nature of the data.

TABLE 7.1
TOTAL FERTILITY RATE OF EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(RURAL)

States	Total Fertility Rate
	1549 years
Delhi	NC
Haryana	3.13
Himachal Pradesh	2.18
Jammu & Kashmir	3
Punjab	2.42
Rajasthan	4.06
Madhya Pradesh	3.56
Uttar Pradesh	4.31
Bihar	3.59
Orissa	2.5
West Bengal	2.49
Assam	2.39
Goa	1.83
Gujarat	3.03
Maharashtra	2.74
Andhra Pradesh	2.32
Karnataka	2.25
Kerala	2.07
Tamil Nadu	2.23
All India	3.07

Source: NFHS-2, 1998-99.

### 7.2.2 URBAN SCENARIO

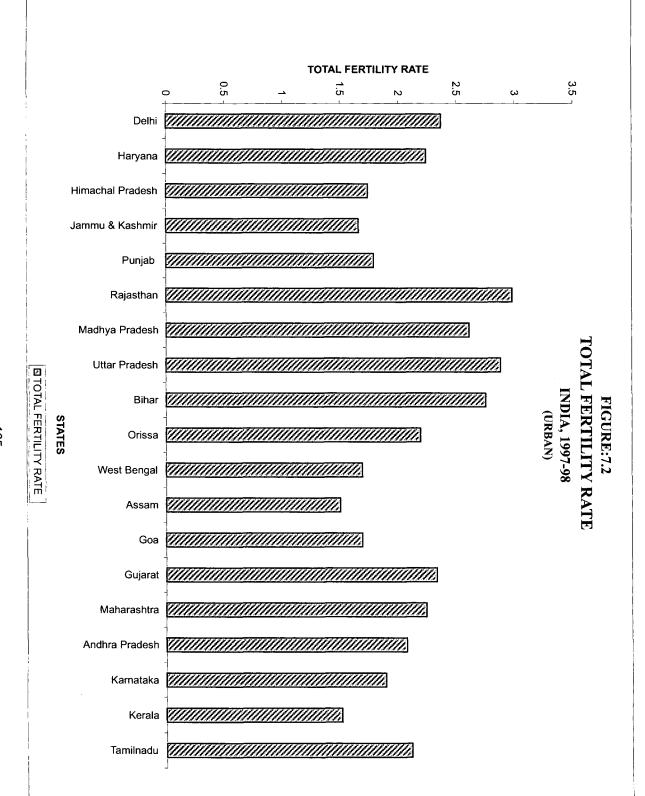
In case of the urban scenario, the national average of the TFR is 2.27 children per woman. The state of Rajasthan scores the highest TFR of 2.98 children per woman, while Assam scores the lowest of 1.5 children per woman, quite lower than the replacement level fertility, as represented by TFR of 2.1 children per woman. The states that score above the national average are Rajasthan, Uttar Pradesh, Bihar, Madhya Pradesh, Delhi and Gujarat, with records around 2.98 and 2.33 children per woman. States like Haryana,

Maharashtra, Orissa and Tamil Madu have their TFR below the national average, ranging between 2.24 and 2.11 children per woman. Along with these states, recording below the national level average, are the states that record below the replacement level fertility, of TFR of 2.1 children per woman, like Andhra Pradesh, Karnataka, Punjab, Himachal Pradesh, West Bengal, Goa, Jammu and Kashmir, Kerala and Assam, with scores ranging between 2.07 and 1.5 children per woman. The variable in the urban scenario is highly consistent in nature with coefficient of variation of 21.53.

TABLE 7.2
TOTAL FERTILITY RATE OF EVER-MARRIED WOMEN
OVER THE STATES OF INDIA
(URBAN)

States	Total Fertility Rate	
	1549 years	
Delhi	2.37	
Haryana	2.24	
Himachal Pradesh	1.74	
Jammu & Kashmir	1.66	
Punjab	1.79	
Rajasthan	2.98	
Madhya Pradesh	2.61	
Uttar Pradesh	2.88	
Bihar	2.75	
Orissa	2.19	
West Bengal	1.69	
Assam	1.5	
Goa	1.69	
Gujarat	2.33	
Maharashtra	2.24	
Andhra Pradesh	2.07	
Karnataka	1.89	
Kerala	1.51	
Tamil Nadu	2.11	
All India	2.27	

Source: NFHS-2, 1998-99.



### 7.2.3 TOTAL SCENARIO

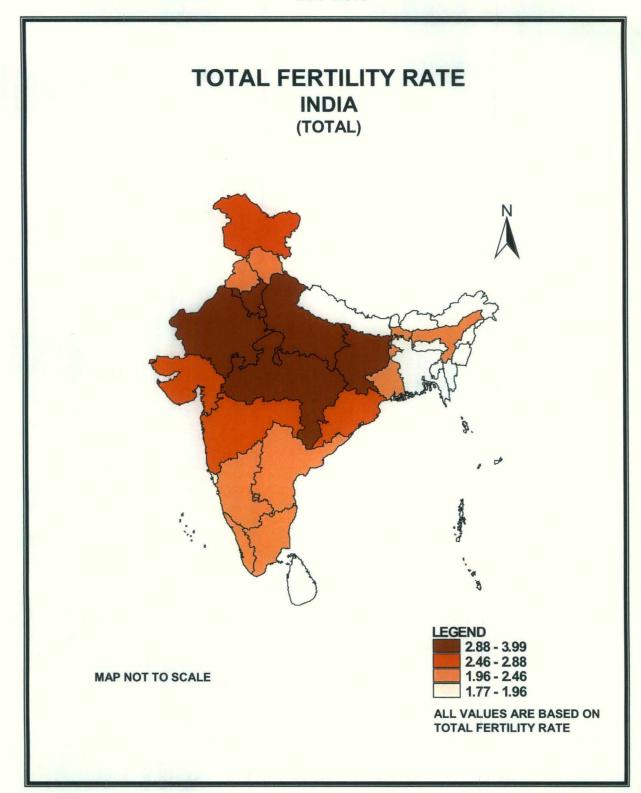
Regarding the total scenario, two variables are considered as representatives of the fertility aspect. These are, the cumulative fertility rates represented by TFR and Mean Children Ever Born (Mean CEB), which is also a summary measure of fertility. The national average of TFR, in case of total scenario, is 2.85 children per woman. The state of Uttar Pradesh scores the highest TFR of 3.99, while Goa scores the lowest record of 1.77 children per woman. The states that score above the national average are Uttar Pradesh, Rajasthan, Bihar, Madhya Pradesh, Haryana, and Delhi, with their records ranging between 3.99 and 2.85 children per woman. Most of the states, like Gujarat, Jammu and Kashmir, Maharashtra, Orissa, Assam, West Bengal, Andhra Pradesh, Punjab, Tamil Nadu, Himachal Pradesh and Karnataka have their records below the national average mark, ranging very closely among themselves between 2.72 and 2.13. Along with these states are Kerala and Goa, with TFR of 1.96 and 1.77 children per woman respectively, showing below replacement level fertility. The variable of TFR is moderately high in its consistency level with coefficient of variation of 23.63.

Regarding the variable of Mean CEB, the national average is 2.4 children per woman. The state with the highest record of 2.91 as the Mean CEB is Uttar Pradesh, while Goa again scores the lowest of 1.44 children per woman as the Mean CEB. The states that have higher scores of Mean CEB above the national average is Uttar Pradesh, Rajasthan, Madhya Pradesh, Bihar and Haryana, with their scores ranging around 2.91 and 2.41 children per woman. The states of Andhra Pradesh, Jammu and Kashmir, Gujarat, Maharashtra, West Bengal, Assam, Karnataka and Orissa, with records ranging between 2.34 and 2.12 children per woman, along with Delhi, Himachal Pradesh, Punjab, Tamil Nadu, Kerala and Goa, with records around 1.99 and 1.44 children per woman, club themselves in the below national average category. The coefficient of variation for this is 17.34, revealing the highly consistent nature of the variable.

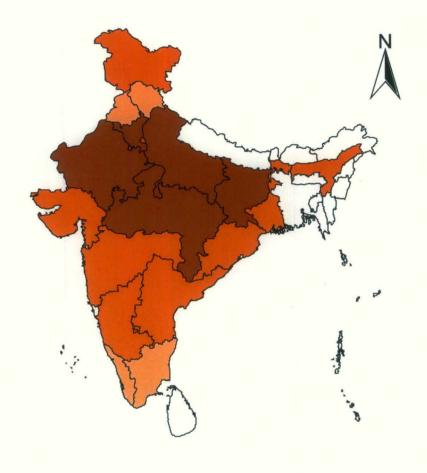
TABLE 7.3
TOTAL FERTILITY RATE AND MEAN NUMBER OF CHILDREN EVER BORN
(MEAN CEB) OF EVER-MARRIED WOMEN OVER THE STATES OF INDIA
(TOTAL)

States	Total Fertility Rate	Mean CEB
	1549 years	15-49 years
Delhi	2.85	1.99
Haryana	2.88	2.41
Himachal Pradesh	2.14	1.98
Jammu & Kashmir	2.71	2.27
Punjab	2.21	1.97
Rajasthan	3.78	2.84
Madhya Pradesh	3.31	2.76
Uttar Pradesh	3.99	2.91
Bihar	3.49	2.75
Orissa	2.46	2.12
West Bengal	2.29	2.21
Assam	2.31	2.18
Goa	1.77	1.44
Gujarat	2.72	2.23
Maharashtra	2.52	2.23
Andhra Pradesh	2.25	2.34
Karnataka	2.13	2.17
Kerala	1.96	1.67
Tamil Nadu	2.19	1.89
All India	2.85	2.4

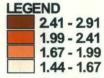
Source: NFHS-2, 1998-99.







MAP NOT TO SCALE



ALL VALUES ARE BASED ON MEAN NUMBER OF CHILDREN EVER BORN

### 7.3 CONCLUSION

Thus in a nutshell it can be summarised that the socio-economically backward BIMARU states of Bihar, Madhya Pradesh, Rajasthan and Uttar Pradesh score higher fertility rates. These states are joined closely by some of the northern states of Haryana, Delhi, Jammu and Kashmir and Punjab. Next in the range of medium of fertility rates are the western zonal states of Gujarat and Maharashtra, followed by the less developed eastern states of West Bengal, Orissa and Assam. Apart from the state of Andhra Pradesh, all the southern states of Kerala, Karnataka and Tamil Nadu have low fertility rates joined by the only northern hilly state of Himachal Pradesh. Thus it can be said that in the Indian scenario, the comparatively developed states have lower fertility rates in relation to the less developed and backward states.

# CHAPTER 8

### CHAPTER - 8

# STATUS OF WOMEN AND REPRODUCTIVE BEHAVIOUR: UNDERSTANDING THE LINKAGES

### 8.1 INTRODUCTION

The primary focus of this study is to understand the socio-cultural differences over the states of India and to make a general case for a systematic relationship between women's status and reproductive behaviour. The main purpose of this section is to establish the impact of the status of ever-married women on their actual fertility represented by the Mean CEB as well as their hypothetical fertility represented by the TFR; in both the circumstances the women's status is related to their cumulative fertility.

In the following section, each of the considered variables representing the various aspects of women like health status, educational status, work status, occupational status, autonomy, awareness and lastly the overall status of women, are related with the fertility variables of Mean Children Ever Born (Mean CEB) and Total Fertility Rate (TFR) and their complete analysis are described under separate sub-heads for a better understanding of the subject under discussion.

# 8.2 HEALTH STATUS OF EVER-MARRIED WOMEN AND FERTILITY BEHAVIOUR

The present study mainly tries to bring about a relationship between the health status of women and how it gets reflected on the incidence of fertility, that is to say, whether the prevalent health condition among the ever-married women of India has any direct effect on their reproductive behaviour and if it does get affected by it, then what is the degree of affectivity.

The analysis of the spatial dimension of status of health of ever-married women in India has revealed the fact that they mostly suffer from ailments caused due to malnutrition. The women are generally entitled to poor diet and improper and insufficient food intake. Until now in this era of progressiveness, we still found households where women are entitled to have their food at the end of the meal and are subjected to remain satisfied with the leftovers. These kind of improper dietary habits have got serious impact on their health. And again, they are the ones who have to get involved physically in all types of household chores required for the maintenance. The poor health conditions do not provide them with the strength to perform those works and they overwork in the process. They are also not entitled to proper health care facilities, which often worsen the situation.

One of the main objectives of our study is to evaluate the health condition of the evermarried women and to find out its impact on the fertility behaviour. Reproductive health
is an issue of great concern in recent times. It mainly deals with the aspects that concern
women's health condition, safe motherhood and child survival. The general condition of
health of women is directly related to the aspect of fertility. Many complications arise
when a woman with poor health bears a child. Apart from the incidence of infant and
maternal mortality, there is also the probability of the birth of an unhealthy child. These
problems are associated not only with women with poor health and suffering from
malnutrition, but also to the cases wherein the women are being forced to undergo
repetitive pregnancy for whatever reason – the guiding factors may be the milieu of
socio-economic norms and values.

In order to portray the relationship between status of health and fertility behaviour, the variables selected are:

Independent Variables

1) Mean BMI

Dependent Variables

1)-TFR

2) Mean CEB

The regression and correlation analysis has been carried out for the rural, urban and total dataset. For the rural and urban cases only the TFR has been considered as the dependent variable and for the total dataset both the TFR and Mean CEB have been taken into account.

The results show that while the Mean BMI has a moderate negative relationship with the fertility variables. In the rural scenario, it can be seen that the 'r' value for the correlation between Mean BMI and TFR is -0.407. For the urban areas, the respective 'r' value is -0.439. In the total dataset it has been observed that the 'r value for the correlation between Mean BMI and Mean CEB is -0.571 (significant at 0.05 level of significance) and with that with TFR is -0.335.

The aspect of the prevalence of anaemia among the ever-married women has not been correlated with fertility because the problem of anaemia is quite common during pregnancy and it has less impact on the incidence of fertility. This factor does not have any kind of influence in determining the fertility behaviour apart from the fact that it acts as a guiding factor regarding the health condition of the pregnant women and the incidence of safe motherhood.

Thus it can be analysed that the nutritional status of a woman is functionally more important as far as the incidence of fertility is concerned. The problem of malnutrition casts a negative impact on fertility wherein a woman becomes unable to bear a child thereby lowering the incidence of fertility.

# 8.3 STATUS OF EDUCATION OF EVER-MARRIED WOMEN AND FERTILITY BEHAVIOUR

Numerous studies carried out by various scholars in this field of research have revealed the fact that there occurs a very strong correlation between the two variables of women's education and fertility behaviour. One of the objectives of this study is to evaluate the

prevailing status of education among the ever-married women over the states of India and to capture whether there is any probable impact of this on their fertility behaviour. In order to portray the impact of education on the fertility behaviour, the various levels of education have been considered in this study to bring about the true picture – how the various levels of education impart their effect as a positive controller of the aspect of fertility.

To bring about the correlation factor the variables taken in this case are:

Independent Variables	 Dependent Variables
1) Primary level of education	1) TFR

- 2) Secondary level of education
- 3) Higher secondary and above level of education
- 4) Literacy rate

2) Mean CEB

The regression and correlation analysis has been carried out separately for the rural, urban and the total dataset. For the rural and urban cases only the TFR has been considered as the dependent variable and for the total dataset both the TFR and Mean CEB have been taken into account.

The results show that the factor of education has got strong negative correlation with the fertility variable. In the rural sector, the primary level of education shows a very strong negative correlation with TFR, where the value of 'r' is -0.806 (significant at 0.01 level of significance). With that of the secondary level of education, the 'r' value also shows a moderately strong negative correlation with TFR, where it scores -0.649 (significant at 0.01 level of significance). When the higher secondary and above level of education is being correlated with TFR, the 'r' value shows a moderate negative score of -0.576 (significant at 0.05 level of significance). The literacy rate and TFR also maintains a moderate negative correlation, with -0.509(significant at 0.05 level of significance) as the 'r' value.

While considering the urban cases, it has been observed that the primary level of education has a very weak impact on the fertility behaviour. The 'r' value of -0.130 shows a very weak negative nature of correlation between the two variables of primary level of education and TFR. In case of secondary and higher secondary and above levels of education, they both maintain moderate negative relationship, with the fertility variable, that is, the TFR with 'r' values of -0.488 (significant at 0.05 level of significance) and -0.474 (significant at 0.05 level of significance) respectively. The literacy rate and TFR has a moderately strong negative correlation, with 'r' value of -0.701 (significant at 0.01 level of significance).

The education variables pertaining to the total scenario have been effectively correlated with the fertility variables of Mean CEB and TFR. The primary level of education has got strong negative correlation with both the fertility variables. The respective 'r' values are -0.714 (significant at 0.01 level of significance) with Mean CEB and -0.783 (significant at 0.01 level of significance) with TFR. In case of the secondary level of education the respective 'r' values are -0.770 (significant at 0.01 level of significance) with Mean CEB and -0.623 (significant at 0.01 level of significance) with TFR, thereby, showing moderately strong negative correlation between the variables. However, for the variable of higher secondary and above level of education, the correlation factor is very weak and negative with the 'r' value of -0.248 with Mean CEB but it shows a very weak positive relation with TFR, with 'r' value of 0.015. The literacy rate has got strong negative correlation with both Mean CEB and TFR with 'r' values of -0.866 (significant at 0.01 level of significance) respectively.

Thus, the fact that can be highlighted is that women's education is one of the vital controlling factors of fertility. The general education — being represented in the form of literacy among the ever-married women — has a very strong impact on the incidence of fertility as has been portrayed by the analysis of the correlation factor. The levels of education completed by the ever-married women also has a significant effect on their fertility behaviour. And this becomes stronger in case of rural areas where primary level of education is most important and it has got significant impact on the fertility behaviour

of the ever-married women. However, the threshold level of education to cast any impact on the fertility behaviour is found out to be that of primary and secondary levels of education for both the cases of rural and urban scenario apart from the overall total scenario. This is because of the fact that it imparts its effect by bringing about the general awareness among the ever-married women about the reproductive behaviour and family planning issues – so that it can bear a direct effect on their fertility behaviour. The higher secondary and above level of education, which is more prominent in the urban areas, also plays an important role in controlling the incidence of fertility in the way that it postpones or delays the age of marriage and cohabitation and thereby casts an effect in an indirect way. Women who attend higher level of education generally tend to marry after completion of their education, and so their chances of entering into the reproductive behaviour becomes low till a very late age of their reproductive span – this in a way reduces the incidence of fertility. The results from the World Fertility Survey also suggest that the relationship between education, age at marriage and reproductive behaviour is much stronger at higher levels of education.

One significant result that needs special mention is that with higher education level, fertility has shown a positive relationship in case of the total scenario. Some of the studies in developed countries have predicted that inverse relation between education and fertility is not prevailing anymore. Kiser (1971) believes that the inverse relation between education and fertility could be a temporary one due to particular circumstances present during demographic transition, which may later disappear. Similarly, in a study Campbell (1965) has found a positive relation between education and fertility at higher levels of education and has observed that this convergence of fertility levels has come about because of a sharp rise in the fertility among the highly educated groups.

# 8.4 WORK PARTICIPATION AND OCCUPATIONAL STATUS AMONG EVER-MARRIED WOMEN AND FERTILITY BEHAVIOUR

This section is going to take up one of the objectives of the study – to highlight the fact that whether there exists any kind of relationship between the workforce participation of ever-married women and their fertility behaviour and if there is any relationship between the two factors, what is the degree of their effectiveness on one another. For the purpose of our analysis, the total workforce participation and the various categories of occupational status have been related with the variables, portraying the fertility behaviour of the ever-married women.

The variables considered for the analytical study are:

### Independent Variables

- 1) Total workforce participation
- 2) Professional
- 3) Sales worker
- 4) Service worker
- 5) Production worker
- 6) Agricultural worker
- 7) Other worker

### Dependent Variables

- 1) TFR
- 2) Mean CEB

The regression and correlation analysis has been carried out separately for the rural, urban and the total dataset. For the rural and urban cases only the TFR has been considered as the dependent variable and for the total dataset both the TFR and Mean CEB have been taken into account.

In the rural areas the total workforce participation has an inverse relationship with the fertility behaviour of ever-married women. That is, both the variables – total workforce participation and the TFR – are negatively related and the relationship is very weak, with 'r' value of – 0.022. Among the occupational categories, most of them cast moderate negative relationships with the TFR except that of the agricultural workers, which only

have a positive relationship with TFR. The professional category has 'r' value of -0.471 (significant at 0.05 level of significance). The 'r' value of sales worker is -0.424, that of service worker is -0.417, and that of production worker is -0.379 and for the other worker category it is -0.413. The correlation factor between the agricultural worker and TFR as represented by the 'r' value is 0.490 (significant at 0.05 level of significance), which depicts a moderate positive relationship between the two variables. This may be due to the cause of adding members to the family labour engaged in the agricultural works in order to fight out the poverty, which is quite common in the rural areas.

In the urban areas also the workforce participation of the ever-married women mainly have a weak negative relationship with the TFR and the 'r' value is -0.215. The professional category also has a weak negative relationship with TFR, wherein, the 'r' value is -0.277. For that of service worker, the correlation factor with the TFR represented by the 'r' value is -0.184, which is also showing a very weak negative relationship. The other worker category has a moderate negative correlation with the TFR, with 'r' value of -0.388. The sales worker, production worker and the agricultural worker category maintain moderate positive relationship with the fertility variable of TFR, wherein, the respective 'r' values are 0.294, 0.303 and 0.336.

The workforce participation and the occupational categories are being effectively correlated with the fertility variables of Mean CEB and TFR. Here, we can see that the total workforce participation has got a very weak positive relationship with the Mean CEB, with 'r' value of 0.059 and with that of TFR it has got a very weak negative correlation, wherein, the 'r' value is -0.065. The professional category has a moderate negative correlation with both the fertility variables of Mean CEB and TFR, wherein, with the Mean CEB the 'r' value is -0.502 (significant at 0.05 level of significance) and with that of TFR it is -0.371. The sales worker category also maintains a moderate negative relationship with both Mean CEB and TFR and the respective 'r' values are -0.392 and -0.365. In case of the service worker same condition prevails, with the respective 'r' values of -0.400 and -0.309. The production worker maintains a moderate negative relationship with Mean CEB with the 'r' value of -0.405 and a moderately

weak negative relationship with TFR, wherein, the 'r' value is – 0.282. The other worker category again holds a moderate negative relationship with both Mean CEB and TFR, wherein, the 'r' values are – 0.521 (significant at 0.05 level of significance) and – 0.456(significant at 0.05 level of significance). However, the agricultural worker category maintains moderate positive relation with both the fertility variables of Mean CEB and TFR, wherein, the 'r' values are 0.547 (significant at 0.05 level of significance) and 0.442 respectively.

Thus, it can be highlighted that the workforce participation along with the occupational categories generally maintains a weak to moderate negative correlation with the fertility variables of Mean CEB and the TFR in both the rural, urban and total scenario. However, in some cases, the relationship has turned out to be positive like for agricultural worker in all the sectors along with the sales worker and production worker in the urban sector. In case of the agricultural worker, the cause may be that the families who maintain their livelihood based on the agricultural work in their own fields mainly try to engage their own family members as agricultural labourers so that the total income from the agricultural output remains within the family – and that is why they mainly prefer to have large family sizes thereby increasing the fertility rates. Again in the urban areas, the sales and the production workers have positive relationship with the fertility rates. The urban areas have the influx of migration from the rural areas as they provide employment in the production sector. The rural migrants mainly come to the urban areas to fight poverty. They desire to have more hands at work in the family and opt for large family norms thereby increasing the population as well as the fertility rates. However, in the overall situation the variable of workforce participation has got negligible impact on the fertility factor compared to the other variables, which have their significant impact on the fertility variable. Available evidence is insufficient to determine whether women who enter the labour force bear fewer children than others or whether women with fewer children tend to have higher levels of labour force participation. However, it is implied from the statistical results that in a given social and cultural setting the fertility differentials are to a great extent caused by the occupational differences.

### 8.5 AUTONOMY OF EVER-MARRIED WOMEN AND FERTILITY BEHAVIOUR

The autonomy of women has often been given prior consideration among the controlling factors of fertility behaviour of women in numerous studies related to women and fertility. It has been proved that women who have higher degree of autonomy also have their voice in deciding about her reproductive behaviour and have controlled fertility. In order to gauge the condition prevailing over the states of India, all the variables considered as representatives of the autonomy of ever-married women are combined together and reduced to a single score of autonomy, expressed as a PCA factor score. This factor score of autonomy is then related with the fertility factor to measure the degree of interaction between the two variables and the kind of relationship they maintain.

Thus the variables considered for the analytical study are:

Independent Variables

Dependent Variables

1) Autonomy of women (factor score)

1) TFR

2) Mean CEB

The regression and correlation analysis has been carried out separately for the rural, urban and the total dataset. For the rural and urban cases only the TFR has been considered as the dependent variable and for the total dataset both the TFR and Mean CEB have been taken into account.

In the rural scenario, the factor of autonomy of ever-married women casts a negative impact on their fertility behaviour represented by the TFR. The 'r' value of -0.582 (significant at 0.05 level of significance), as a correlation factor, depicts a moderately strong negative relationship between the two variables.

In case of the urban scenario, the correlation factor shows the 'r' value of -0.494 (significant at 0.05 level of significance) between the two variables of autonomy of

women and the TFR. It thereby proves again, that even in case of urban background the autonomy has a moderate degree of negative relationship with that of fertility behaviour.

When the total scenario has been considered, it has been observed that with the Mean CEB, as a representing factor of fertility, the autonomy factor spells a more strong significant negative relationship than with that of TFR, which has got a moderately strong relationship with autonomy of women. The respective correlation factors represented by the 'r' values are -0.681 (significant at 0.01 level of significance) for Mean CEB and -0.563 (significant at 0.05 level of significance) for TFR.

Thus, it can be highlighted that autonomy of ever-married women has got an inverse relationship of significant nature with the fertility factor. The women residing in the urban areas have greater autonomy compared to their counterparts residing in the rural areas. Women with higher degree of autonomy in the society have their own voice in controlling their fertility behaviour; and are not forced in their reproductive behaviour by the external factors than their counterparts. The later, have low autonomy and quite often, have to undergo the pressure of the external forces in deciding about their reproductive behaviour with lesser voice to prove their own wish or resistance. Autonomy of woman infers increased freedom to realize her wants even in the face of opposition from other household members. Autonomous women are given the respect and authority that they need to make decisions on matters as vital as childbearing. This increases the chances that other household members will themselves be influenced by her views on suitable family size. And if she is educated and economically important to the household as well, she is also likely to have a stronger bargaining position in the family; so that intrahousehold differentials in decision-making authority are narrowed in her favour.

# 8.6 AWARENESS OF EVER-MARRIED WOMEN, THEIR EDUCATION LEVEL AND FERTILITY BEHAVIOUR

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The level of educational attainment plays an important role in generating awareness, as educated population is capable of relating themselves to the various mass media sources

that aim at disseminating messages to the society for its welfare. Earlier, scholars have made their eminent research works based on this aspect, which have also revealed the relevance of education in awareness generation. Literacy and education increase the awareness and willingness — to understand the basic problems affecting the individual and the family — in a rational way. In order to gauge the importance of education in generating awareness among the ever-married women, over the states of India through the exposure to mass media and family planning messages; the relevant variables of education are related to the variables representing the awareness factor.

Thus the variables considered for the analytical study are:

Independent Variable

Dependent Variable

1) Education (factor score)

1) Awareness of women (factor score)

In the rural scenario, the combined effect of education casts a positive impact on the aspect of awareness generation among the ever-married women. The 'r' value representing the correlation factor is 0.797 (significant at 0.01 level of significance), which depicts a very strong positive relationship between the two variables. The fact is quite true, that educational attainment helps in effective awareness generation, the absence of which often makes the purpose of dissemination of messages through the various mass media sources insignificant and ineffective.

The urban scenario also brings up the positive relationship between the two variables of educational attainment and awareness generation. The correlation factor, represented by the 'r' value of 0.548 (significant at 0.05 level of significance), is quite suggestive of a moderately strong positive relationship between the two variables.

In case of the total scenario, the correlation factor as represented by the 'r' value of 0.674 (significant at 0.01 level of significance) depicts a strong positive relationship between the factors of educational attainment and awareness generation through mass media and family planning messages.

Thus we can see, that education does play a significant role in the exposure of evermarried women to mass media and dissemination of family planning messages through the various mass media sources, be it print media or electronic media.

In the next section, the factor of awareness of ever-married women is also being related to the aspect of fertility. This is because of the fact that when women are exposed to the mass media and family planning messages they become more aware of the factor population problem, both at macro level and micro level, and thereby, this may impart a positive impact on their fertility behaviour, that is to say, they may go for controlled reproductive behaviour. To gauge the impact of the combined effect of exposure to mass media and family planning messages through the various sources to generate awareness of ever-married women on the fertility behaviour, the PCA factor score of awareness have been related with the fertility variables of Mean CEB and TFR.

Thus the variables considered for the analytical study are:

Independent Variables
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- 1) Awareness of women (factor score)
- 2) Exposure to mass media
- 3) Exposure to family planning messages

## Dependent Variables

- 1) Mean CEB
- 2) TFR

The regression and correlation analysis has been carried out separately for the rural, urban and the total dataset. For the rural and urban cases only the TFR has been considered as the dependent variable and for the total dataset both the TFR and Mean CEB have been taken into account.

In case of the rural scenario, the correlation factor shows an 'r' value of -0.845 (significant at 0.01 level of significance), which depicts a very strong negative relationship between the two variables of awareness of women and TFR. When the two variables, of exposure to mass media and exposure to family planning messages, are considered separately, and then related to the fertility variable of TFR, the 'r' values came out to be -0.809 (significant at 0.01 level of significance) and -0.843 (significant

at 0.01 level of significance) respectively, both depicting very strong negative relationship between the two related variables.

In the urban scenario, the awareness factor imparts a moderately strong negative impact on the fertility factor of TFR, as is being revealed by the correlation factor with 'r' value of -0.607 (significant at 0.01 level of significance). In considering the variables of awareness separately, the exposure to mass media shows a strong negative relationship with TFR with 'r' value of -0.715 (significant at 0.01 level of significance), while exposure to family planning messages imparts a moderate negative impact on TFR, as represented by the 'r' value of -0.513 (significant at 0.05 level of significance).

In case of the total scenario, the awareness variable is related with the two fertility variables of Mean CEB and TFR separately. The results show that the awareness variable has a very strong negative relationship with Mean CEB, with 'r' value of -0.833 (significant at 0.01 level of significance) and a strong negative relationship with TFR, with 'r' value of -0.745 (significant at 0.01 level of significance). In this case also, the two variables of awareness, namely, exposure to mass media and exposure to family planning messages, are separately being related with the fertility variables of Mean CEB and TFR. The exposure to mass media has a strong negative relationship with both the fertility variables of Mean CEB and TFR and the respective 'r' values are -0.792 (significant at 0.01 level of significance) and -0.724 (significant at 0.01 level of significance). The exposure to family planning messages also shows similar degree of strong negative relationship with the fertility variables of Mean CEB and TFR and the correlation factors represented by the 'r' values are -0.800 (significant at 0.01 level of significance) and -0.753 (significant at 0.01 level of significance) respectively.

Thus it can be summarised that awareness of ever-married is yet another important controlling factor of fertility and it imparts strong negative impact on the reproductive behaviour. The educational attainment also helps in enhancing the interest of the ever-married women to the exposure to mass media and family planning messages that effectively make them more aware of the situation and so that they can involve in their

reproductive behaviour in the like manner. As they become more aware of the perilous circumstances that may evoke due to population problems, they go for controlled reproductive behaviour, which in the long run directly reduce the fertility rate.

### 8.7 STATUS OF EVER-MARRIED WOMEN AND FERTILITY BEHAVIOUR

In this section, the relationship between status of women along with all its intervening variables and the fertility behaviour of the ever-married women is going to be highlighted. In order to relate all the intervening variables — like, education, work participation status, occupational status, health status, autonomy and awareness — with the fertility factor, firstly, the individual variables are reduced to single factor scores with the application of Principal Component Analysis (PCA). Then each individual set of factor scores representing each group of the variables, namely, health, education, work participation, occupation, autonomy and awareness, are correlated with the fertility variable represented by the TFR and Mean CEB by applying the methods of correlation and multivariate linear regression to obtain the strength of association between the considered variables. In the last section, all the status variables are combined together to obtain the factor score representing the overall status of women with the help of PCA and then that factor score is related to the fertility variables of TFR and Mean CEB to measure the degree of association between these concerned variables.

Thus the variables considered for the analytical study are:

### Independent Variable

- 1) Health Status of Women (factor score)
- 2) Educational Status of Women (factor score)
- 3) Work Status of Women (factor score)
- 4) Occupational Status of Women (factor score)
- 5) Autonomy of Women (factor score)
- 6) Awareness of Women (factor score)
- 7) Status of Women (factor score)

### Dependent Variable

- 1) Mean CEB
- 2) TFR

The regression and correlation analysis has been carried out separately for the rural, urban and the total dataset. For the rural and urban cases, only the TFR has been considered as the dependent variable and for the total dataset both the TFR and Mean CEB have been taken into account.

In case of the rural scenario, the health status of women maintains a positive relationship of moderate scale with the TFR with 'r' value, representing the correlation coefficient, of 0.317. For that of the educational status, the relationship with TFR is a much stronger negative one, with 'r' value of -0.748 (significant at 0.01 level of significance). The work status of women casts a weak negative relationship with the fertility variable, with 'r' value of -0.167, while the occupational status of women has a moderately strong negative relationship with the fertility variable with 'r' value of -0.520 (significant at 0.05 level of significance). In case of the autonomy of women the 'r' value of -0.582 (significant at 0.05 level of significance) depicts a moderately strong negative relationship with the TFR. The awareness of women maintains a very strong negative relationship with TFR, as is being represented by the correlation coefficient, with 'r' value of -0.845 (significant at 0.01 level of significance). Finally the status of women maintains moderately strong negative relationship with the fertility variable of TFR, with 'r' value of -0.619 (significant at 0.01 level of significance).

Considering the urban scenario, it has been found out that the health status of women maintains a moderate positive relationship with the TFR, with 'r' value of 0.353. For the variable of educational status of women, the relationship is that of a strong negative one, with correlation coefficient represented by the 'r' value of -0.652 (significant at 0.01 level of significance). In case of both the variables of work status and occupational status, the relationship with the TFR is of negative character on a moderately weak to moderate scale, with respective 'r' values of -0.242 and -0.379. As has already been explained in the earlier sections, the autonomy of women casts a moderate negative relationship with the TFR with 'r' value of -0.494 (significant at 0.05 level of significance), while with 'r' value of -0.607 (significant at 0.01 level of significance). In case of the urban

scenario, the status of women maintains a moderate negative relationship with TFR with 'r' value of -0.486 (significant at 0.05 level of significance), very unlike to that of the rural scenario, where it is of comparatively stronger nature.

In the total scenario, both the fertility variables of TFR and Mean CEB are being considered. While relating the fertility variables with the health status of women, it has been found out that they maintain a moderately strong and moderate positive relationship, with 'r' values of 0.538 (significant at 0.05 level of significance), in case of Mean CEB and 0.313, in case of TFR. For the educational status of women, the relationship with both the fertility variables of Mean CEB and TFR are of negative nature of stronger order, with the respective 'r' values of -0.821 (significant at 0.01 level of significance) and - 0.711(significant at 0.01 level of significance). The work status of women generally maintains a very weak negative relationship with the Mean CEB, as well as with TFR, with 'r' values of -0.075 and -0.183 respectively. However, the occupational status have a more moderate negative relationship with both the fertility variables of Mean CEB and TFR with 'r' values of -0.541 (significant at 0.05 level of significance) and - 0.438 respectively. In case of the autonomy of women, the relationship is of moderately strong of negative nature with both the variables of Mean CEB and TFR, with respective 'r' values of -0.681 (significant at 0.01 level of significance) and -0.563(significant at 0.05 level of significance). But for the awareness variable, the relationship are of very strong negative nature, with 'r' values of -0.833 (significant at 0.01 level of significance), in case of Mean CEB and -0.745 (significant at 0.01 level of significance), in case of the TFR. The status of women in the total scenario casts a strong negative relationship with Mean CEB, with 'r' value of - 0.773 (significant at 0.01 level of significance) and a moderately strong negative relationship with TFR, with 'r' value of -0.619 (significant at 0.01 level of significance).

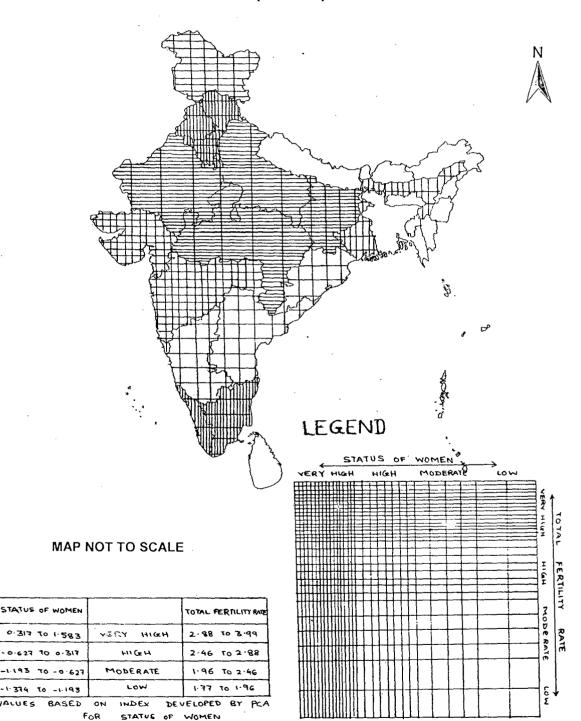
### 8.8 CONCLUSION

Thus in a nutshell, it can be highlighted that apart from the health status of women, which maintains a moderate positive relationship, all the other variables, namely, educational status, work status, occupational status, autonomy, awareness and the overall status of women cast a negative relationship with the fertility variables of Mean CEB and TFR. The strength of association, however, varies with the nature of the variables and mainly shows weak association with work status, moderate degree of association with the occupational status and autonomy, moderately strong with awareness and overall status of women and a very strong association with the educational status of women. The status level of women is negatively related with fertility behaviour. Hence, we can conclusively confirm the hypothesis that an increase in the status of women clearly depresses fertility behaviour irrespective of all other factors.

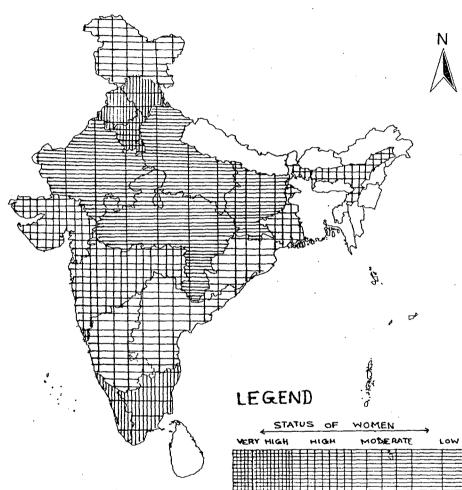
In this section, the states are being ranked according to the status of women and their respective reproductive performance represented by the fertility variable of Total Fertility Rate (TFR) and Mean Children Ever Born (Mean CEB). For this purpose only, the total scenario has been considered. They are then scaled on the basis of their overall performance as high, moderately high, moderate, moderately low and low, and are being represented by cartographic mapping to get a visual representation.

# REGIONAL DIMENSION OF STATUS OF WOMEN AND TOTAL FERTILITY RATE INDIA

(TOTAL)



# REGIONAL DIMENSION OF STATUS OF WOMEN AND MEAN NUMBER OF CHILDREN EVER BORN INDIA (TOTAL)



## MAP NOT TO SCALE

STATUS OF WOMEN		MEAN CEB
8821 OF FIE.0	VERY HIGH	2.41 70 2.91
FIE-0 07 FS0-0-	ніфн	1-99 10 2-41
- 1.193 To - 0.627	MODERATE	1.67 to 1.99
-1.374 70 -1.193	LOW	1.44 70 1.67

VERY HIGH HIGH MODERATE LOW

# CHAPTER 9

#### CHAPTER - 9

## SUMMARY OF FINDINGS AND CONCLUSION

### 9.1 SUMMARY OF FINDINGS

The present study is an attempt in the direction of analytical research on the aspect of the status of ever-married women and its related variables and their associative impact on the reproductive behaviour of ever-married women based on the NFHS – 2 (1998-99) data taking under consideration all the states of India except the north-eastern states apart from the state of Assam. The main thrust of the present work is (i) to analyse the spatial dimension of the associated variables of the status of women, namely, health status, educational status, work participation, occupational status, autonomy and awareness of ever-married women, and the overall status of women along with the fertility variables and (ii) to evaluate and to analyse the nature of relationship between the status of women and its related variables and the fertility behaviour of women, highlighting their associative impact on each other. Following is the summary of the findings of the present study.

- 1) The analysis of the spatial dimension of status of health of ever-married women in India has revealed the fact that they mostly suffer from ailments caused due to malnutrition. The women are generally entitled to poor diet and improper as well as insufficient food intake. The nutritional status of a woman is functionally more important as far as the incidence of fertility is concerned. The problem of malnutrition casts a negative impact on fertility wherein a woman becomes unable to bear a child, thereby lowering the incidence of fertility.
- 2) Women's education is one of the vital controlling factors of fertility. The general education being represented in the form of literacy among the ever-married women has a very strong impact in the incidence of fertility as has been portrayed by the analysis of

the correlation factor. The levels of education completed by the ever-married women also have got a significant effect on their fertility behaviour. And this becomes stronger in case of rural areas where primary level of education is most important and it has got significant impact on the fertility behaviour of the ever-married women. However, the threshold level of education that can cast any impact on the fertility behaviour is found out to be that of primary and secondary levels of education for both the rural and urban areas apart from the overall total scenario. This is because of the fact that it imparts its effect by bringing about the general awareness among the ever-married women about the reproductive behaviour and family planning issues – so that it can bear a direct effect on their fertility behaviour. The higher secondary and above level of education, which is more prominent in the urban areas, also plays an important role in controlling the incidence of fertility in the way that it postpones or delays the age of marriage and cohabitation and thereby casts an effect in an indirect way. Women who attend higher level of education generally tend to marry after completion of their education and so the chances of entering into the reproductive behaviour becomes low till a very late age of their reproductive span – this in a way reduces the incidence of fertility.

One significant result that needs special mention is that with higher education level, fertility has shown a positive relationship in case of the total scenario. This happens, as has been proved in some research studies, at higher levels of education and it is very temporary in phase due to particular circumstances present during demographic transition, which may later disappear.

3) The workforce participation along with the occupational categories generally maintains a weak to moderate negative correlation with the fertility variables of Mean CEB and the TFR in both the rural, urban and total scenario. However, in some cases, the relationship has turned out to be positive like for agricultural workers in all the sectors along with the sales workers and production workers in the urban sector. In case of the agricultural worker, the cause may be that the families who maintain their livelihood based on the agricultural works in their own fields mainly try to engage their own family members as the agricultural labourers so that the total income from the agricultural output

remains within the family – and that is why they mainly prefer to have large family sizes thereby increasing the fertility rates. Again in the urban areas the sales and the production workers have positive relationship with the fertility rates. The urban areas have the influx of migration from the rural areas as they provide employment in the production sector. The rural migrants mainly come to the urban areas to fight out the poverty situation. And in the process, in order to add more bread earners to the family they often opt for large family norms thereby increasing the population as well as the fertility rates. However, in the overall situation the variable of workforce participation has got negligible impact on the fertility factor compared to the other variables, which have their significant impact on the fertility variable. Available evidence is insufficient to determine whether women who enter the labour force bear fewer children than others or whether women with fewer children tend to have higher levels of labour force participation. However, it is implied from the statistical results that in a given social and cultural setting the fertility differentials are to a great extent caused by the occupational differences.

4) Autonomy of ever-married women has got an inverse relationship of significant nature with the fertility factor. The women residing in the urban areas have greater autonomy compared to their counterparts residing in the rural areas. Women with higher degree of autonomy in the society have their own voice in controlling their fertility behaviour and are not pressurised into their reproductive behaviour by any external factors. However, women with lower degree of autonomy quite often undergo the pressure of the external forces in deciding about their reproductive behaviour. Raising their voices to resist or make their wish known proves inconsequential. Autonomy of woman infers increased freedom to realise her wants even in the face of opposition from other household members. Autonomous women are given the respect and authority that they need to make decisions on vital matters as childbearing. This increases the chances that other household members become influenced by her views on suitable family size. And if she is educated and economically important to the household as well, she is also likely to have a stronger bargaining position in the family so that intra-household differentials in decision-making authority are narrowed in her favour.

- 5) The level of educational attainment plays an important role in generating awareness, as educated population is capable of relating themselves to the various mass media sources that aim at disseminating messages to the society for its welfare. Literacy and education increase the awareness and willingness to understand the basic problems affecting the individual and the family in a rational way. The statistical results correlating the educational factor with that of awareness factor proves that education does play a significant positive role in the exposure of ever-married women to mass media and dissemination of family planning messages through the various mass media sources, be it print media or electronic media.
- 6) Awareness of ever-married women is yet another important controlling factor of fertility and it imparts strong negative impact on the reproductive behaviour. The educational attainment also helps in enhancing the interest of the ever-married women towards mass media and family planning messages. This effectively makes them more aware of the situation and they become involved in their reproductive behaviour in the like manner. As they become more aware of the perilous circumstances that may evoke due to population problems, they go for controlled reproductive behaviour, which in the long run directly reduces the fertility rate.
- 7) The status level of women is negatively related with fertility behaviour. Apart from the health status of women, which maintains a moderate positive relationship, all the other variables, namely, educational status, work status, occupational status, autonomy, awareness and the overall status of women cast a negative relationship with the fertility variables of Mean CEB and TFR. The strength of association, however, varies with the nature of the variables and mainly shows weak association with work status, moderate degree of association with the occupational status and autonomy, moderately strong with awareness and overall status of women and a very strong association with the educational status of women.

Hence, we can conclusively confirm the hypothesis that an increase in the status of women clearly depresses fertility behaviour irrespective of all other factors.

#### 9.2 CONCLUSION: POLICY IMPLICATIONS

The tentative conclusions and hypotheses based on the analysis of the available information on most of the interconnected dimensions of status of women and reproductive behaviour are indicative of several deep rooted issues and problems which need immediate attention of population experts, policy formulators and implementers, governmental and non-governmental community development organisations, women's groups, etc. to bring about requisite changes and necessary remedial measures for the upliftment of the position of women in the society. Based on the findings of this study, the following action plan could be initiated on priority basis.

Raising the status of women is a major developmental strategy, which may be feasible and less expensive than the economic models of development, proposed for improving the quality of life of the population in general. The experience of the developing countries has confirmed that social development, particularly the emancipation of women has multiplying beneficial effects on the different dimensions of development. It has also been observed that emancipation of women leads to rapid social development at a lower cost. Further, it enhances the quality of life in general and leads to a rapid reduction in all forms of human wastage (such as mortality), early and quick acceptance of family planning, rapid decline in fertility and overall improvement in the life of the population as a whole.

Although economic development may increase the share of women in modern occupations, the evidence shows that, for a growing proportion of women in the informal sector in the developing world, economic development, does not guarantee per se an increase in women's status.

With the changing socio-cultural and economic scenario, there is a need to outgrow the established social biases against women and the roles and works assigned to them. There needs much to be done in bringing the status of woman at par, and in uprooting the stereotyped biases, prejudices and attitudes of society. There is a need of consciousness

raising both in men and women, and the discrimination bias can be shattered only if we bring a change in our social customs which make the birth of a female child unwelcome, since, she is considered a financial and social burden.

The tradition bound patriarchal society has greatly damaged the psyche of women folk, causing severe inferiority complex and has incapacitated them for any major decision-making and has enhanced their dependence on their husbands and other relatives for the purpose. Social attitudes need to be transformed dramatically. There is a need for psychological handling of women as well as men through counseling, group discussions and sensitization for building a momentum for a movement which can ensure the rightful place for women in the society. NGOs can play their much-needed rightful role in advocacy and civic education for actualising the process of women's empowerment to a concrete reality.

Understanding of the power relations between men and women is essential if women's capability to participate in decisions affecting reproduction is to be enhanced. The pathways of influence from women's increased autonomy to their fertility and childcare behaviour may be both indirect and direct. Empowering experiences that change women's perceptions of self-worth and wellbeing affect women's dependence on men and their ability to make decisions. Important impacts may also emerge through the formation in different social locations of new relationships that enhance self-esteem and self-efficacy, through access to independent information and peer support, and through physical mobility. Such relationships foster women's ability to weigh their own wellbeing relative to family size preferences, the health needs of their children, birth control preferences, and employment alternatives. Since empowerment is a dynamic process, the effects on reproductive behaviour are continuous, responding to external forces and life cycle events as they unfold.

Approaches that treat women's education and employment as instruments to reduce fertility are inadequate. What is needed are strategies for women's empowerment that lead to their increased autonomy and decision-making power, providing them with an alternative power base that is independent of the domination of men.

The empowerment strategies require new institutional arrangements directed to the needs of specific populations. While formal education may assist women to behave in more modern ways with regard to new technology, the social barriers to educating girls are still quite strong in many situations. A more informal and contextually relevant type of education could focus better on women's practical and strategic needs, and empower them to bring about social changes affecting their wellbeing. The most effective strategies are likely to be those that support women to organise peer groups and mobilise community resources and public services, including women's health services. Such approaches enable women to overcome resignation to the legitimacy of the established order and contribute to the perpetuation of imbalances of power between women and men. These can be altered through conscious social policy and programmes that treat women as subjects who can and ought to shape their own destinies. Adoption of such strategies would move population policies far beyond their past treatment of women as instruments. If women are to implement their reproductive preferences, then it is essential that their empowerment occur not only within their personal spheres, but also in the broader spheres of the community and the state.

Another important policy implication can be sustained investment in women's education, specifically for ensuring universal primary-school enrolment and, more importantly, attendance – a minimum of six or seven years – for girls. The advantages of educating women beyond five or six years are manifold – education alone can effectively actualise and enhance women's autonomy and their social and economic self-reliance, awareness generation, attitudinal change, and eventually empowerment of women, along with other positive effects like improvement of child survival and family health, and also leads to lower fertility, higher age at marriage, lower family-size desires, and fewer chances of unwanted fertility. The initiation of compulsory education for children and more specifically of girls should be made not only through statutory regulations but also through punitive actions on parents who are not imparting education to their children.

From a policy standpoint, the close association between female education and well being, including enhanced autonomy, improved family health and child survival, greater reproductive choices, and lower fertility, are strong enough to warrant sustained government investment in female education. Education should not be stereotyped; rather the government should give more emphasis on quality education by raising the quality of education based on participatory techniques and non-formal methodologies and enlarge the extent of female schooling in order to reduce fertility levels. Qualitative education should definitely be focusing on functional education to facilitate their eventual absorption for gainful employment. These programmes should aim at providing basic functional literacy rather than academic education that will be able to change the attitudes.

Although sparse, the evidence suggests that the socio-cultural context plays an important role in the relationships between education and various aspects of women's autonomy that impinge on reproductive behaviour. Female schooling needs to be pushed even more vigorously to cross the threshold beyond which the net effects on female autonomy are all positive, and, by extension, those on fertility are all positive. In the more egalitarian or developed society, even modest amounts of schooling are sufficient to trigger changes in women's autonomy, in ways that then influence their reproductive behaviour. In the more gender stratified society improvements in autonomy do not occur until relatively high levels of education have been attained. These findings underscore the need for universal primary school enrolment and attendance, at a minimum, in order to enhance women's autonomy and expand their reproductive choices and change reproductive behaviour.

Increased consumerism is an important mediator in the empirical link between schooling and fertility; after all, such consumerism can be more easily fostered through direct interventions from the mass media, for example, and is already being fostered by the rapid globalisation of the economy and the culture, as is existing in the Indian scenario.

For the improvement of the health status of women, awareness generation about the various health related issues should be made by imparting knowledge about the

availability of health facilities and how to avail those facilities. Besides this, there should also be effective and good health care delivery system along with improvement in health infrastructure through government intervention and financial investment.

Currently in most of South Asia, the family planning programme is little more than the pushing of contraceptive technology, using monetary incentives and a variety of blandishments through the mass media. It could potentially, however, form part of a wider approach, linked to the meeting of basic needs, literacy, secondary schooling, and skill formation. Health and family planning workers could develop skills in organising and building confidence in the communities in which they work, for example, through a stress on informed consent. Dr. Ashish Bose has commented that this would need much more freedom to address non-health and family planning issues first, or in combination with issues like income generation or violence against women. Unfortunately, there is little sign that population planners are willing to alter the structures of social provision to make this kind of approach a reality.

Thus it can be highlighted, that there is an urgent need for undertaking the strategies for empowerment of women, not only at national but also at international forums. Along with this, strategies regarding their overall physical well-being and their reproductive health rights must be addressed through loud and clear messages consistently and if the need be, with suitable legislative provisions that could form the part of national agenda.

APPENDIX

# APPENDIX NO. 2.1 HEALTH (RURAL)

#### A) REGRESSION

#### 1. Variables Entered: Mean BMI & TFR

Model Summary

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.407	.166	.114	Mean BMI	298	-1.785	.093

Coefficients

a Predictors: (Constant), Mean BMI

a Dependent Variable: TFR

#### 2. Variables Entered: Anaemia & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.268	.072	.014	Anaemia	1.654E-02	1.114	.282

a Predictors: (Constant), Anaemia

a Dependent Variable: TFR

# **B) CORRELATIONS**

#### 1. Correlations

		Mean BMI	TFR
Mean BMI	Pearson Correlation	1.000	407
TFR	Pearson Correlation	407	1.000

### 2. Correlations

		Anaemia	TFR
Anaemia	Pearson Correlation	1.000	.268
TFR	Pearson Correlation	.268	1.000

# APPENDIX NO. 2.2 HEALTH (URBAN)

#### A) REGRESSION

#### 1. Variables Entered: Mean BMI & TFR

**Model Summary** 

Coefficients

	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
[	.439	.192	.145	Mean BMI	185	-2.013	.060

a Predictors: (Constant), Mean BMI

a Dependent Variable: TFR

#### 2. Variables Entered: Anaemia & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
142	.020	037	Anaemia	6.173E-03	.593	.561

a Predictors: (Constant), Anaemia a Dependent Variable: TFR

#### **B) CORRELATIONS**

#### 1. Correlations

		Mean BMI	TFR
Mean BMI	Pearson Correlation	1.000	439
TFR	Pearson Correlation	439	1.000

#### 2. Correlations

		Anaemia	TFR
Anaemia	Pearson Correlation	1.000	.142
TFR	Pearson Correlation	.142	1.000

# APPENDIX NO. 2.3 HEALTH (TOTAL)

# A) REGRESSION

#### 1. Variables Entered: Mean BMI & Mean CEB'

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.571	.327	.287	Mean BMI	187	-2.871	.011

a Predictors: (Constant), Mean BMI a Dependent Variable: Mean CEB

#### 2. Variables Entered: Mean BMI & TFR

Model Summary

Coefficients

	R	R Square	Adjusted R Square		Unstandardized Coefficients B	. t	Sig.	
-	.335	.112	.060	Mean BMI	176	-1.464	.161	

a Predictors: (Constant), mean BMI

a Dependent Variable: TFR

#### 3. Variables Entered: Anaemia & Mean CEB

Model Summary

Coefficients

model odil	milal y		Occinicion			
D	R Square	Adjusted R		Unstandardized		Sia.
ĸ	K Square	Square	_	Coefficients B		Sig.
.454	.206	.159	Anaemia	1.552E-02	2.101	.051

a Predictors: (Constant), Anaemia a Dependent Variable: Mean CEB

#### 4. Variables Entered: Anaemia & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.277	.077	.023	Anaemia	1.524E-02	1.190	.250

a Predictors: (Constant), Anaemia

a Dependent Variable: TFR

# **B) CORRELATIONS**

#### 1. Correlations

		Mean BMI	Mean CEB	
Mean BMI	Pearson Correlation	1.000	571*	
Mean CEB	Pearson Correlation	571*	1.000	

1. Correlation is significant at the 0.05 level (2-tailed).

#### 2. Correlations

		Mean BMI	TFR
Mean BMI	Pearson Correlation	1.000	335
TFR	Pearson Correlation	335	1.000

#### 3.Correlations

		Anaemia Mean	
Anaemia	Pearson Correlation	1.000	.454
Mean CEB	Pearson Correlation	.454	1.000

#### 4. Correlations

		Anaemia	TFR
Anaemia	Pearson Correlation	1.000	.277
TFR	Pearson Correlation	.277	1.000

# **APPENDIX NO. 3.1.1 EDUCATION (RURAL)**

# A) REGRESSION

1. Variables Entered: Primary education & TFR

#### Model Summary

#### Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.806	.650	.628	Primary Education	-7.581E-02	-5.450	.000

a Predictors: (Constant), Pri Edu

a Dependent Variable: TFR

#### 2. Variables Entered: Secondary education & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.649	.421	.385	Sec Edu	122	-3.413	.004

a Predictors: (Constant), Sec Edu a Dependent Variable: TFR

# 3. Variables Entered: Higher secondary and above education & TFR

Model Summary

Coefficients

	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
1	.576	.332	.290	Hs&> Edu	-4.576E-02	-2.820	.012

a Predictors: (Constant), Hs&> Edu

a Dependent Variable: TFR

#### 4. Variables Entered: Literacy & TFR

**Model Summary** 

Coefficients

	:R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
Ì	.509	.259	.212	Rural literates	-1.976E-02	-2.363	.031

a Predictors: (Constant), Rural literates

a Dependent Variable: TFR

# **B) CORRELATIONS**

#### 1. Correlations

		Pri Edu	Sec Edu	Hs&> Edu	TFR
Pri Edu	Pearson Correlation	1.000	.653	.621	806**
Sec Edu	Pearson Correlation	.653	1.000	.788	649**
Hs&> Edu	Pearson Correlation	.621	.788	1.000	576*
TFR	Pearson Correlation	806**	649**	576*	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

		Rural literates	TFR
Rural literates	Pearson Correlation	1.000	509*
TFR	Pearson Correlation	509*	1.000

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

# **APPENDIX NO. 3.1.2 EDUCATION (URBAN)**

#### A) REGRESSION

#### 1. Variables Entered: Primary education & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.130	.017	041	Pri Edu	-1.072E-02	541	.596

a Predictors: (Constant), Pri Edu

a Dependent Variable: TFR

# 2. Variables Entered: Secondary education & TFR

Model Summary

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.488	.238	.193	Sec Edu	-5.874E-02	-2.303	.034

a Predictors: (Constant), Sec Edu

a Dependent Variable: TFR

#### 3. Variables Entered: Higher secondary and above education & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.474	.224	.179	Hs&> Edu	-2.090E-02	-2.217	.041

a Predictors: (Constant), Hs&> Edu

a Dependent Variable: TFR

#### 4. Variables Entered: Literacy & TFR

Model Summary

Coefficients

	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
1	.701	.492	.462	Urban literates	-2.100E-02	-4.055	.001

a Predictors: (Constant), Urban literates

a Dependent Variable: TFR

### **B) CORRELATIONS**

		Pri Edu	Sec Edu	Hs&> Edu	TFR
Pri Edu	Pearson Correlation	1.000	.256	375	130
Sec Edu Pearson Correlati		.256	1.000	.078	488*
Hs&> edu	Pearson Correlation	375	.078	1.000	474*
TFR	Pearson Correlation	130	488*	474*	1.000

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

#### 2. Correlations

		Urban literates	TFR
Urban literates	Pearson Correlation	1.000	701**
TFR	Pearson Correlation	701**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

# **APPENDIX NO. 3.1.3** EDUCATION (TOTAL)

#### A) REGRESSION

### 1. Variables Entered: Primary education & Mean CEB

Model Summary

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
714	.509	.481	Pri Edu	-4.176E-02	-4.201	.001

a Predictors: (Constant), Pri Edu a Dependent Variable: Mean CEB

#### 2. Variables Entered: Secondary education & Mean CEB

**Model Summary** 

Coefficients

	R	R Square	Adjusted R Square		Unstandardized Coefficients B	ŧ	Sig.
1	.770	.593	.569	Sec Edu	-8.386E-02	-4.975	.000

a Predictors: (Constant), Sec Edu a Dependent Variable: Mean CEB

#### 3. Variables Entered: Higher secondary and above education & Mean CEB

Model Summary

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.248	.062	.007	Hs&> Edu	-8.032E-03	-1.057	.305

a Predictors: (Constant), Hs&> Edu a Dependent Variable: Mean CEB

#### 4. Variables Entered: Primary education & TFR

**Model Summary** 

Coefficients

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R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.	
.783	.613	.591	Pri Edu	-7.364E-02	-5.193	.000	l

a Predictors: (Constant), Pri Edu

a Dependent Variable: TFR

#### 5. Variables Entered: Secondary education & TFR

**Model Summary** 

Coefficients

	Model Sun	iiiiai y		COCINCIC	IIIO			
	P	R Square	Adjusted R		Unstandardized	+	Sig.	
1		11 Oquale	Square		Coefficients B	,	Olg.	
	.623	.388	.352	Sec Edu	109	-3.284	.004	l

a Predictors: (Constant), Sec Edu

a Dependent Variable: TFR

#### 6. Variables Entered: Higher secondary and above education & TFR

Model Summary Coefficients

R	R R Square			Unstandardized Coefficients B	t	Sig.
.015	.000	059	Hs&> Edu	7.881E-04	.063	.951

a Predictors: (Constant), Hs&> Edu

a Dependent Variable: TFR

#### 7. Variables Entered: Literacy & Mean CEB

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.866	.751	.736	Total literates	-1.930E-02	-7.157	.000

a Predictors: (Constant), Total literates

a Dependent Variable: Mean CEB

# 8. Variables Entered: Literacy & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.703	.494	.464	Total literates	-2.516E-02	-4.072	.001

a Predictors: (Constant), Total literates

a Dependent Variable: TFR

# B) CORRELATIONS

#### 1.Correlations

		Pri Edu	Sec Edu	Hs&> Edu	Mean CEB
Pri Edu	Pearson Correlation	1.000	.631	.024	714**
Sec Edu	Pearson Correlation	.631	1.000	.305	770**
Hs&> Edu	Pearson Correlation	.024	.305	1.000	248
Mean CEB	Pearson Correlation	714**	770**	248	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

#### 2. Correlations

		Pri Edu	Sec Edu	Hs&> Edu	TFR
Pri Edu	Pearson Correlation	1.000	.631	.024	783**
Sec Edu	Pearson Correlation	.631	1.000	.305	623**
Hs&> Edu	Pearson Correlation	.024	.305	1.000	.015
TFR	Pearson Correlation	783**	623**	.015	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

		Total literates	Mean CEB
Total literates	Pearson Correlation	1.000	866**
Mean CEB	Pearson Correlation	866**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

#### 4. Correlations

		Total literates	TFR
Total literates	Pearson Correlation	1.000	703**
TFR	Pearson Correlation	703**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

# **APPENDIX NO. 3.2.1** OCCUPATION (RURAL)

### A) REGRESSION

1. Variables Entered: Work Status & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.022	.000	062	Work total	-7.214E-04	089	.931

a Predictors: (Constant), Work total

#### 2. Variables Entered: Occupation Professional & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.471	.222	.173	Occupation professional	-8.069E-02	-2.136	.049

a Predictors: (Constant), Occupation professional

### 3. Variables Entered: Occupation Sales worker & TFR

Model Summary Coefficients

,	mouci ouii	mary		Cocincicito			
	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
ĺ	.424	.180	.129	Occupation sales worker	161	-1.874	.079

a Predictors: (Constant), Occupation sales worker

#### 4. Variables Entered: Occupation Service worker & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.417	.174	.122	Occupation service worker	321	-1.834	.085

a Predictors: (Constant), Occupation service worker

a Dependent Variable: TFR

a Dependent Variable: TFR

a Dependent Variable: TFR

a Dependent Variable: TFR

#### 5. Variables Entered: Occupation Production worker & TFR

Model Summary

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.379	.144	.090	Occupation production worker	-3.848E-02	-1.640	.120

a Predictors: (Constant), Occupation production worker

a Dependent Variable: TFR

#### 6. Variables Entered: Occupation Agricultural worker & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.490	.240	.193	Occupation agricultural worker	1.858E-02	2.248	.039

a Predictors: (Constant), Occupation agricultural worker

a Dependent Variable: TFR

#### 7. Variables Entered: Occupation Other worker & TFR

Model Summary

Coefficients

	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
-	.413	.171	.119	Occupation others	-3.612E-02	-1.815	.088

a Predictors: (Constant), Occupation others

a Dependent Variable: TFR

#### **B) CORRELATIONS**

	Work total	TFR
Work total Pearson Correlation	1.000	022
TFR Pearson Correlation	022	1.000

#### 2. Correlations

			0	(O = = =	0	0	r	
		Occupation professional	coloc	service worker	production worker	Occupation agricultural worker		TFF
Occupation professional	Pearson Correlation	1.000	.225	.544	.326	801	.789	471
Occupation sales worker	Pearson Correlation	.225	1.000	.156	.055	468	.535	42
Occupation service worker	Pearson Correlation	.544	.156	1.000	.490	649	.613	41
Occupation production worker	Pearson Correlation	.326	.055	.490	1.000	708	.447	37!
Occupation agricultural worker	Pearson Correlation	801	468	649	708	1.000	926	.490
Occupation others	Pearson Correlation	.789	.535	.613	.447	- 926	1.000	41
TFR	Pearson Correlation	471*	424	417	379	.490*	413	1.00

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

# **APPENDIX NO. 3.2.2** OCCUPATION (URBAN)

# A) REGRESSION

#### 1. Variables Entered: Work Status & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.215	.046	010	Work total	-1.210E-02	910	.376

a Predictors: (Constant), Work total

#### 2. Variables Entered: Occupation Professional & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.277	.077	.022	Occupation professional	-1.181E-02	-1.187	.251

a Predictors: (Constant), Occupation professional

# 3. Variables Entered: Occupation Sales worker & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.294	.086	.033	Occupation sales worker	4.152E-02	1.267	.222

a Predictors: (Constant), Occupation sales worker a Dependent Variable: TFR

a Dependent Variable: TFR

a Dependent Variable: TFR

#### 4. Variables Entered: Occupation Service worker & TFR

Model Summary

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.184	.034	023	Occupation service worker	-3.812E-02	772	.451

a Predictors: (Constant), Occupation service worker

a Dependent Variable: TFR

#### 5. Variables Entered: Occupation Production worker & TFR

Model Summary

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.303	.092	.038	Occupation production worker	1.607E-02	1.310	.208

a Predictors: (Constant), Occupation production worker

a Dependent Variable: TFR

#### 6. Variables Entered: Occupation Agricultural worker & TFR

**Model Summary** 

Coefficients 1

1	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	· Sig.
	.336	.113	.061	Occupation agricultural worker	1.873E-02	1.470	.160

a Predictors: (Constant), Occupation agricultural worker

a Dependent Variable: TFR

#### 7. Variables Entered: Occupation Other worker & TFR

**Model Summary** 

Coefficients

1	R RS	R Square	Adjusted R		Unstandardized	t	Sig.
		K Square	Square		Coefficients B		
	.388	.151	.101	Occupation others	-2.061E-02	-1.738	.100

a Predictors: (Constant), Occupation others

a Dependent Variable: TFR

#### **B) CORRELATIONS**

		Work total	TFR
Work total	Pearson Correlation	1.000	215
TFR	Pearson Correlation	215	1.000

2. Correlations

		Occupation professional	Occupation sales worker	Occupation service worker	Occupation production worker	Occupation agricultural worker	Occupation others	TFR
Occupation professional	Pearson Correlation	1.000	392	.153	347	751	088	277
Occupation sales worker	Pearson Correlation	392	1.000	.148	389	.135	.344	.294
Occupation service worker	Pearson Correlation	.153	.148	1.000	512	248	.280	184
Occupation production worker	Pearson Correlation	347	389	512	1.000	.479	748	.303
Occupation agricultural worker	Pearson Correlation	751	.135	- 248	.479	1.000	402	.336
Occupation others	Pearson Correlation	088	.344	.280	748	402	1.000	388
TFR	Pearson Correlation	277	.294	184	.303	.336	388	1.000

# **APPENDIX NO. 3.2.3 OCCUPATION (TOTAL)**

# A) REGRESSION

1. Variables Entered: Work Status & Mean CEB

Model Summary

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.059	.003	055	Work total	1.393E-03	.243	.811

a Predictors: (Constant), Work total a Dependent Variable: Mean CEB

#### 2. Variables Entered: Work Status & TFR

Model Summary

Coefficients

Woder Odminiary		- Occinicionis						
-	D	R Square	Adjusted R		Unstandardized	+	Sig.	
	, , ,	IX Square	Square		Coefficients B			
	.065	.004	054	Work total	-2.484E-03	270	.791	

a Predictors: (Constant), Work total

#### 3. Variables Entered: Occupation Professional & Mean CEB

Model Summary		(	Coefficients				
	R`	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
	.502	.252	.208	Occupation professional	-2.347E-02	-2.395	.028

a Predictors: (Constant), Occupation professional

a Dependent Variable: Mean CEB

a Dependent Variable: TFR

#### 4. Variables Entered: Occupation Sales worker & Mean CEB

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.392	.154	.104	Occupation sales worker	-3.579E-02	-1.759	.096

a Predictors: (Constant), Occupation sales worker

a Dependent Variable: Mean CEB

#### 5. Variables Entered: Occupation Service worker & Mean CEB

Model Summary

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.400	.160	.110	Occupation service worker	-5.915E-02	-1.798	.090

a Predictors: (Constant), Occupation service worker

a Dependent Variable: Mean CEB

#### 6. Variables Entered: Occupation Production worker & Mean CEB

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.405	.164	115	Occupation production worker	-3.019E-02	-1.826	.085

a Predictors: (Constant), Occupation production worker

a Dependent Variable: Mean CEB

#### 7. Variables Entered: Occupation Agricultural worker & Mean CEB

**Model Summary** 

Coefficients

	mouci ouii	,,,,,,,		0001110101110			
ſ	P	R R Square	Adjusted R		Unstandardized	+	Sig.
		11 Oquale	Square		Coefficients B		Oig.
	.547	.299	.258	Occupation agricultural worker	7.436E-03	2.695	.015

a Predictors: (Constant), Occupation agricultural worker

a Dependent Variable: Mean CEB

#### 8. Variables Entered: Occupation Other worker & Mean CEB

**Model Summary** 

Coefficients

R	R Square	Adjusted R		Unstandardized		Cia
		Square		Coefficients B	ι	Sig.
.521	.271	.229	Occupation others	-1.632E-02	-2.516	.022

a Predictors: (Constant), Occupation others

a Dependent Variable: Mean CEB

#### 9. Variables Entered: Occupation Professional & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
371	.138	.087	Occupation professional	-2.788E-02	-1.649	.117

a Predictors: (Constant), Occupation professional

a Dependent Variable: TFR

#### 10. Variables Entered: Occupation Sales worker & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.365	.133	.082	Occupation sales worker	-5.347E-02	-1.616	.125

a Predictors: (Constant), Occupation sales worker

a Dependent Variable: TFR

### 11. Variables Entered: Occupation Service worker & TFR

Model Summary

Coefficients

-	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
	.309	.096	.042	Occupation service worker	-7.354E-02	-1.341	.198

a Predictors: (Constant), Occupation service worker

a Dependent Variable: TFR

#### 12. Variables Entered: Occupation Production worker & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.282	.080	.025	Occupation production worker	-3.379E-02	-1.212	.242

a Predictors: (Constant), Occupation production worker

a Dependent Variable: TFR

#### 13. Variables Entered: Occupation Agricultural worker & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square	; 	Unstandardiz ed Coefficients B	t	Sig.
.442	.196	.148	Occupation agricultural worker	9.660E-03	2.033	.058

a Predictors: (Constant), Occupation agricultural worker

a Dependent Variable: TFR

# 14. Variables Entered: Occupation Other worker & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square	-	Unstandardized Coefficients B	t	Sig.
.456	.208	.162	Occupation others	-2.298E-02	-2.115	.049

a Predictors: (Constant), Occupation others a Dependent Variable: TFR

# **B) CORRELATIONS**

#### 1. Correlations

		Work total	Mean CEB
	Pearson Correlation		.059
Mean CEB	Pearson Correlation	.059	1.000

#### 2. Correlations

		Work total	TFR
Work total	Pearson Correlation	1.000	065
TFR	Pearson Correlation	065	1.000

#### 3. Correlations

				•				
		Occupation professional	Occupation sales worker	Occupation service worker	Occupation production worker	Occupation agricultural worker	Occupation others	Mear CEB
Occupation professional	Pearson Correlation	1.000	.440	.700	.678	880	.709	502
Occupation sales worker	Pearson Correlation	.440	1.000	.741	.077	777	.887	392
Occupation service worker	Pearson Correlation	.700	.741	1.000	.406	865	.816	400
Occupation production worker	Pearson Correlation	.678	.077	.406	1.000	569	.327	405
Occupation agricultural worker	Pearson Correlation	880	777	865	569	1.000	944	.547
Occupation others	Pearson Correlation	.709	.887	.816	.327	944	1.000	521
Mean CEB	Pearson Correlation	502*	392	400	405	.547*	521*	1.00

\* Correlation is significant at the 0.05 level (2-tailed).

#### 4. Correlations

4. Correlation								
		Occupation professional	Occupation sales worker	Occupation service worker	on	Occupati on agricultur al worker	Occupation others	TFR
Occupation professional	Pearson Correlation	1.000	.440	700	.678	880	.709	371
Occupation sales worker	Pearson Correlation	.440	1.000	.741	.077	777	.887	365
Occupation service worker	Pearson Correlation	.700	.741	1.000	.406	865	.816	- 309
Occupation production worker	Pearson Correlation	.678	.077	.406	1.000	569	.327	282
Occupation agricultural worker	Pearson Correlation	880	777	865	569	1.000	944	.442
Occupation others	Pearson Correlation	.709	.887	.816	.327	944	1.000	456*
TFR	Pearson Correlation	371	365	309	282	.442	456*	1.000

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

# **APPENDIX NO. 4.1 AUTONOMY (RURAL)**

# A) REGRESSION

# 1. Variables Entered: Autonomy & TFR

Model Summary

Coefficients

	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
Ì	.582	.339	.297	PCA Autonomy	402	-2.862	.011

a Predictors: (Constant), PCA Autonomy a Dependent Variable: TFR

# **B) CORRELATIONS**

		PCA Autonomy	TFR
PCA Autonomy	Pearson Correlation	1.000	582*
TFR	Pearson Correlation	582*	1.000
<u></u>		<del></del>	

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

# APPENDIX NO. 4.2 AUTONOMY (URBAN)

#### A) REGRESSION

1. Variables Entered: Autonomy & TFR

Model Summary Coefficients

	R F	R Square	Adjusted R		Unstandardized	t	Sig.
		11090010	Square		Coefficients B		
	.494	.244	.200	PCA Autonomy	225	-2.345	.031

a Predictors: (Constant), PCA Autonomy

### **B) CORRELATIONS**

#### 1.Correlations

	· · · · · · · · · · · · · · · · · · ·	PCA Autonomy	TFR
PCA Autonomy	Pearson Correlation	1.000	494*
TFR	Pearson Correlation	494*	1.000

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

# **APPENDIX NO. 4.3 AUTONOMY (TOTAL)**

#### A) REGRESSION

1. Variables Entered: Autonomy & Mean CEB

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.681	.463	.432	PCA Autonomy	263	-3.830	.001

a Predictors: (Constant), PCA Autonomy

#### 2. Variables Entered: Autonomy & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.563	.317	.277	PCA Autonomy	350	-2.812	.012

a Predictors: (Constant), PCA Autonomy

# **B) CORRELATIONS**

		PCA Autonomy	TFR	Mean CEB
PCA Autonomy	Pearson Correlation	1.000	563*	681**
TFR	Pearson Correlation	563*	1.000	.900
Mean CEB	Pearson Correlation	681**	.900	1.000

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

a Dependent Variable: TFR

a Dependent Variable: Mean CEB

a Dependent Variable: TFR

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

# APPENDIX NO. 5.1.1 EDUCATION AND AWARENESS (RURAL)

# A) REGRESSION

#### 1. Variables Entered: Education and Awareness

Model Summary

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.797	.635	.613	PCA Edu	.797	5.433	.000

Coefficients

a Predictors: (Constant), PCA Edu a Dependent Variable: PCA Awareness

# **B) CORRELATIONS**

#### 1. Correlations

		PCA Edu	PCA Awareness
PCA Edu	Pearson Correlation	1.000	.797**
PCA Awareness	Pearson Correlation	.797**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

# APPENDIX NO. 5.1.2 EDUCATION AND AWARENESS (URBAN)

#### A) REGRESSION

#### 1. Variables Entered: Education and Awareness

Model Summary

	model oun	ma. y		Occincient				
	В	R Square	Adjusted R		Unstandardized	+	Sig.	
1	1	11 Square	Square		Coefficients B		oig.	
1	.548	.301	.259	PCA Edu	.548	2.703	.015	

Coefficients

a Predictors: (Constant), PCA Edu a Dependent Variable: PCA Awareness

#### **B) CORRELATIONS**

Correlations			
		PCA Edu	PCA Awareness
PCA Edu	Pearson Correlation	1.000	.548*
PCA Awareness	Pearson Correlation	.548*	1.000

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

# APPENDIX NO. 5.1.3 EDUCATION AND AWARENESS (TOTAL)

# A) REGRESSION

#### 1. Variables Entered: Education and Awareness

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.674	.454	.422	PCA Edu	.674	3.759	.002

a Predictors: (Constant), PCA Edu a Dependent Variable: PCA Awareness

# **B) CORRELATIONS**

#### 1. Correlations

		PCA Edu	PCA Awareness
PCA Edu	Pearson Correlation	1.000	.674**
PCA Awareness	Pearson Correlation	.674**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

# **APPENDIX NO. 5.2.1 AWARENESS (RURAL)**

# A) REGRESSION

#### 1. Variables Entered: Exposure to mass media & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.809	.655	.633	Exp mm	-2.924E-02	-5.508	.000

a Predictors: (Constant), Exp mm a Dependent Variable: TFR

#### 2. Variables Entered: Exposure to Family Planning Messages & TFR

Model Summary

Coefficients

model our	y		0001110101110				
В	R Square	Adjusted R		Unstandardized	•	Sia	
, ,	IX Square	Square		Coefficients B	, ,	Sig.	,
.843	.711	.693	Exp fp msg	-3.220E-02	-6.279	.000	

a Predictors: (Constant), Exp fp msg

a Dependent Variable: TFR

#### 3. Variables Entered: Total Awareness & TFR

Model Summary Coefficients

P	R Squ	Adjusted R		Unstandardized		Sig
"	i N Squ	Square		Coefficients B	t	Sig.
.84	5 .714	.696	PCA Awareness	589	-6.319	.000

a Predictors: (Constant), PCA Awareness

a Dependent Variable: TFR

#### **B) CORRELATIONS**

#### 1. Correlations

		Exp mm	Exp fp msg	TFR
Exp mm	Pearson Correlation	1.000	.913	809**
Exp fp msg	Pearson Correlation	.913	1.000	843**
TFR	Pearson Correlation	809**	843**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

#### 2. Correlations

		PCA Awareness	TFR
PCA Awareness	Pearson Correlation	1.000	845**
TFR	Pearson Correlation	845**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

# **APPENDIX NO. 5.2.2 AWARENESS (URBAN)**

#### A) REGRESSION

#### 1. Variables Entered: Exposure to mass media & TFR

Model Summary

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.715	.511	.483	Exp mm	-3.890E-02	-4.218	.001

a Predictors: (Constant), Exp mm

# 2. Variables Entered: Exposure to Family Planning Messages & TFR

Model Summary Coefficients

	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
Ì	.513	.264	.220	Exp fp msg	-2.906E-02	-2.466	.025

a Predictors: (Constant), Exp fp msg

# 3. Variables Entered: Total Awareness & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.607	.368	.331	PCA Awareness	277	-3.148	.006

a Predictors: (Constant), PCA Awareness

a Dependent Variable: TFR

a Dependent Variable: TFR

a Dependent Variable: TFR

# **B) CORRELATIONS**

#### 1. Correlations

		Exp mm	Exp fp msg	TFR
Exp mm	Pearson Correlation	1.000	.796	715**
Exp fp msg	Pearson Correlation	.796	1.000	513*
TFR	Pearson Correlation	715**	513*	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

#### 2. Correlations

		PCA Awareness	TFR
PCA Awareness	Pearson Correlation	1.000	607**
TFR	Pearson Correlation	607**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

# **APPENDIX NO. 5.2.3 AWARENESS (TOTAL)**

### A) REGRESSION

1. Variables Entered: Exposure to mass media & Mean CEB

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.792	.627	.605	Exp mm	-1.625E-02	-5.341	.000

a Predictors: (Constant), Exp mm a Dependent Variable: Mean CEB

#### 2. Variables Entered: Exposure to Family Planning Messages & Mean CEB

Coefficients **Model Summary** 

					′			
	D	R Square	Adjusted R		Unstandardized	+	Sig.	ĺ
ł	•	1 Square	Square		Coefficients B		oig.	ĺ
i	.800	.641	.620	Exp fp msg	-1.821E-02	-5.506	.000	

a Predictors: (Constant), Exp fp msg a Dependent Variable: Mean CEB

#### 3. Variables Entered: Exposure to mass media & TFR

Model Sun	nmary		Coefficie	nts		
R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.724	.525	.497	Exp mm	-2.389E-02	-4.331	.000

a Predictors: (Constant), Exp mm

a Dependent Variable: TFR

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

#### 4. Variables Entered: Exposure to Family Planning Messages & TFR

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.753	.568	.542	Exp fp msg	-2.754E-02	-4.725	.000

a Predictors: (Constant), Exp fp msg

a Dependent Variable: TFR

#### 5. Variables Entered: Total Awareness & Mean CEB

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.833	.693	.675	PCA Awareness	322	-6.196	.000

a Predictors: (Constant), PCA Awareness

a Dependent Variable: Mean CEB

#### 6. Variables Entered: Total Awareness & TFR

**Model Summary** 

Coefficients

-	R	R Square	Adjusted R		Unstandardized	. +	Sig.
-	1	ix oquaic	Square		Coefficients B		Uig.
	.745	.555	.529	PCA Awareness	463	-4.604	.000

a Predictors: (Constant), PCA Awareness

a Dependent Variable: TFR

# **B) CORRELATIONS**

#### 1. Correlations

T. COTTOIGHTON	<u> </u>			
		Exp mm	Exp fp msg	Mean CEB
Exp mm	Pearson Correlation	1.000	.918	792**
Exp fp msg	Pearson Correlation	.918	1.000	800**
Mean CEB	Pearson Correlation	792**	800**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

#### 2. Correlations

		Exp mm	Exp fp msg	TFR
Exp mm	Pearson Correlation	1.000	.918	724**
Exp fp msg	Pearson Correlation	.918	1.000	753**
TFR	Pearson Correlation	724**	753**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

		PCA awareness	TFR	Mean CEB
PCA awareness	Pearson Correlation	1.000	745**	833**
TFR	Pearson Correlation	745**	1.000	.900
Mean CEB	Pearson Correlation	833**	.900	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

# **APPENDIX NO. 6.1** STATUS OF WOMEN (RURAL)

#### A) REGRESSION

#### 1. Variables Entered: Status of Women & TFR

Coefficients **Model Summary** 

	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
ſ	.619	.383	.345	PCA Status of women	438	-3.153	.006

a Predictors: (Constant), PCA Status of women

a Dependent Variable: TFR

# **B) CORRELATIONS**

#### 1. Correlations

		PCA Education	PCA Work Status	PCA Occupation	PCA Health	PCA Autonomy	PCA Awareness	PCA Status	TFR
PCA Education	Pearson Correlation	1.000	220	.704	699	.643	.797	.816	748*
PCA Work Status	Pearson Correlation	220	1.000	547	.462	370	- 045	539	167
PCA Occupation	Pearson Correlation	.704	547	1.000	593	.580	.516	.836	520*
PCA Health	Pearson Correlation	699	.462	593	1.000	568	684	751	.317
PCA Autonomy	Pearson Correlation	643	370	.580	568	1.000	.677	.908	582*
PCA Awareness	Pearson Correlation	.797	045	.516	684	.677	1.000	.732	845*
PCA Status	Pearson Correlation	.816	539	.836	751	.908	.732	1.000	619*
TFR	Pearson Correlation	748**	167	520*	.317	582*	845**	619**	1.000

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

# **APPENDIX NO. 6.2 STATUS OF WOMEN (URBAN)**

### A) REGRESSION

1. Variables Entered: Status of Women & TFR

Model Summary Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.486	.236	.191	PCA Status of women	221	-2.290	.035

a Predictors: (Constant), PCA Status of women a Dependent Variable: TFR

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

#### **B) CORRELATIONS**

#### 1.Correlations

		PCA	PCA Work	PCA	PCA	PCA	PCA	PCA	TFF
		Education	Status	Occupation	Health	Autonomy	Awareness	Status	
PCA	Pearson	1.000	.228	.421	420	.516	.548	.567	652
Education	Correlation	1.000	.220	.421	420	.516	.546	.567	002
PCA Work	Pearson	220	1 000	003	204	ACE	407	270	24
Status	Correlation	.228	1.000	.093	384	.465	.497	.379	24
PCA	Pearson	.421	.093	1.000	142	.585	.524	.682	37
Occupation	Correlation	.421	.093	1.000	142	.565	.524	.002	37
DCA Hoolth	Pearson	420	384	- 142	1.000	494	726	557	.35
PCA Health	Correlation	420	304	142	1.000	434	720	557	.35.
PCA	Pearson	.516	.465	.585	494	1.000	.814	.965	49
Autonomy	Correlation	.516	.405	.565	494	1.000	.014	.905	49
PCA	Pearson	.548	.497	.524	726	.814	1.000	.876	607
Awareness	Correlation	.540	.437	.524	720	.014	1.000	.070	007
PCA Status	Pearson	.567	.379	.682	557	.965	.876	1.000	480
PCA Status	Correlation	.567	.379	.002	557	.303	.070	1.000	40
TFR	Pearson	652**	242	379	.353	494*	607**	486*	1.00
IFK	Correlation	032	242	379	.555	494	007	400	1.00

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

# **APPENDIX NO. 6.3 STATUS OF WOMEN (TOTAL)**

#### A) REGRESSION

#### 1. Variables Entered: Status of Women & Mean CEB

**Model Summary** 

Coefficients

R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
.773	.598	.574	PCA Status of women	299	-5.025	.000

a Predictors: (Constant), PCA Status of women a Dependent Variable: Mean CEB

#### 2. Variables Entered: Status of Women & TFR

**Model Summary** 

Coefficients

	R	R Square	Adjusted R Square		Unstandardized Coefficients B	t	Sig.
	.619	.383	.346	PCA Status of women	384	-3.246	.005

a Predictors: (Constant), PCA Status of women

<sup>\*\*</sup> Correlation is significant at the 0.01 level (2-tailed).

a Dependent Variable: TFR

# **B) CORRELATIONS**

#### 1. Correlations

. Concludions									
		PCA Education	PCA Work- Status	PCA Occupation	PCA Health	PCA Autonomy	PCA Awareness	PCA Status	Mean CEB
PCA Education	Pearson Correlation	1.000	.009	.573	532	.533	.674	.703	821**
PCA Work Status	Pearson Correlation	.009	1.000	028	.308	394	.014	358	075
PCA Occupation	Pearson Correlation	.573	028	1.000	234	.372	.401	.675	541*
PCA Health	Pearson Correlation	532	.308	234	1.000	598	764	665	.538*
PCA Autonomy	Pearson Correlation	.533	394	.372	598	1.000	.688	.920	681**
PCA Awareness	Pearson Correlation	.674	.014	.401	764	.688	1.000	.753	833**
PCA Status	Pearson Correlation	.703	358	.675	665	.920	.753	1.000	773**
Mean CEB	Pearson Correlation	821**	075	541*	.538*	681**	833**	773**	1.000

2. Correlatio	)(15								
		PCA Education	PCA Work Status	PCA Occupation	PCA Health	PCA Autonomy	PCA Awareness	PCA Status	TFR
PCA Education	Pearson Correlation	1.000	.009	.573	532	.533	.674	.703	711**
PCA Work Status	Pearson Correlation	.009	1.000	028	.308	394	.014	358	183
PCA Occupation	Pearson Correlation	.573	028	1.000	234	.372	.401	.675	438
PCA Health	Pearson Correlation	532	.308	234	1.000	598	764	665	.313
PCA Autonomy	Pearson Correlation	.533	394	.372	598	1.000	.688	.920	563*
PCA Awareness	Pearson Correlation	.674	.014	.401	764	.688	1.000	.753	745**
PCA Status	Pearson Correlation	.703	358	.675	665	.920	.753	1.000	619**
TFR	Pearson Correlation	711**	183	438	.313	563*	745**	619**	1.000

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

\*\* Correlation is significant at the 0.01 level (2-tailed).

<sup>\*</sup> Correlation is significant at the 0.05 level (2-tailed).

\*\* Correlation is significant at the 0.01 level (2-tailed).

# **APPENDIX NO. 8.1**

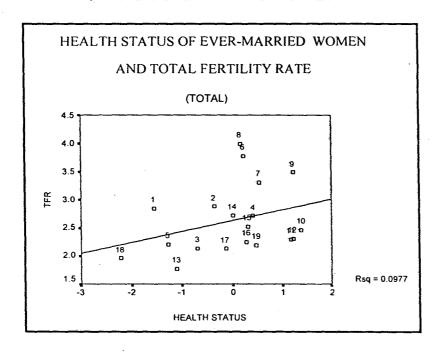
# PRINCIPAL COMPONENT ANALYSIS – FACTOR SCORES (TOTAL)

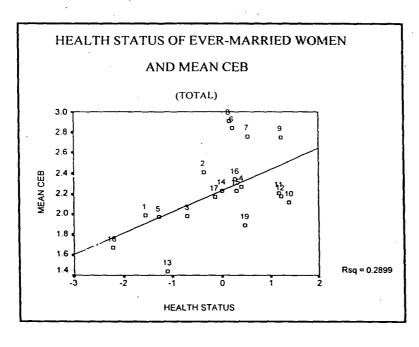
	PCA (Factor Score)										
States	Health Status	Educational Status	Work Status	Occupational Status	Autonomy	Awareness	Status				
Delhi	-1.551	0.480	-0.759	1.356	0.661	1.498	1.213				
Haryana	-0.368	-0.437	-1.742	0.169	1.052	-0.006	0.835				
Himachal Pradesh	-0.703	1.132	-1.516	-0.466	1.889	0.936	1.25				
Jammu & Kashmir	0.404	-1.019	0.092	-0.845	-0.552	-0.468	-0.83				
Punjab	-1.279	-0.148	-1.830	1.068	1.420	0.531	1.583				
Rajasthan	0.223	-0.946	0.111	-1.083	-1.231	-1.610	-1.37				
Madhya Pradesh	0.532	-0.686	0.747	-1.075	-1.339	-0.884	-1.36				
Uttar Pradesh	0.156	-1.148	-0.845	-0.865	-1.263	-1.138	-1.19				
Bihar	1.214	-1.716	-0.230	-0.784	-0.691	-1.555	-1.02				
Orissa	1.388	-0.192	0.343	-0.236	-0.863	-0.700	-0.84				
West Bengal	1.170	0.507	0.367	1.506	-0.772	-0.682	-0.14				
Assam	1.212	0.575	-0.709	-0.214	-0.244	-0.651	-0.24				
Goa	-1.110	1.241	1.116	0.404	1.102	1.432	1.004				
Gujarat	0.012	-0.041	0.633	-0.798	1.020	-0.166	0.317				
Maharashtra	0.306	0.673	1.237	1.773	-0.497	-0.085	0.198				
Andhra Pradesh	0.281	-0.839	1.242	-0.870	-0.425	0.378	-0.75				
Karnataka	-0.139	-0.527	1.017	-0.886	-0.447	1.201	-0.63				
Kerala	-2.220	2.332	-0.199	0.286	0.263	1.373	0.829				
Tamil Nadu	0.471	0.755	0.922	1.560	0.913	0.596	1.143				

#### **APPENDIX NO. 8.2**

# SCATTER DIAGRAMS REPRESENTING THE DIFFERENT VARIABLES OF STATUS OF WOMEN AND THEIR CORRELATION WITH THE FERTILITY FACTORS

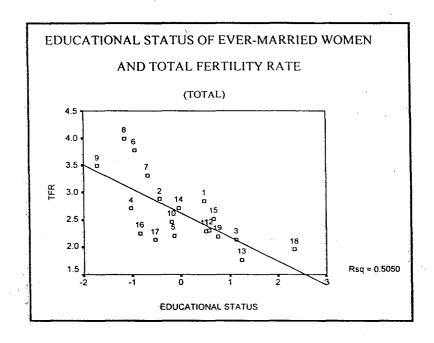
# HEALTH STATUS OF EVER-MARRIED WOMEN AND FERTILITY VARIABLES

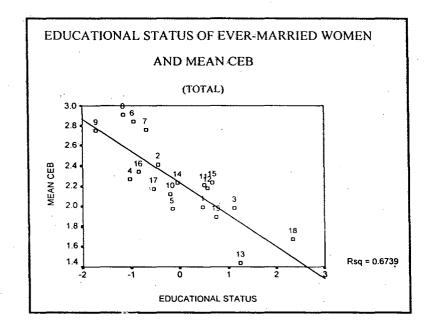




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# **EDUCATIONAL STATUS OF EVER-MARRIED** WOMEN AND FERTILITY VARIABLES

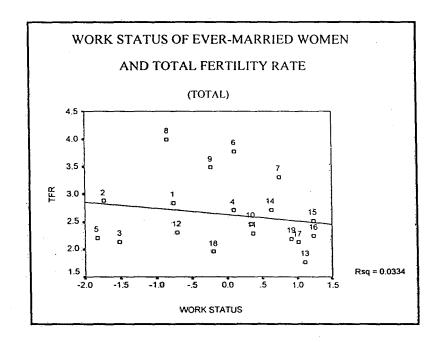


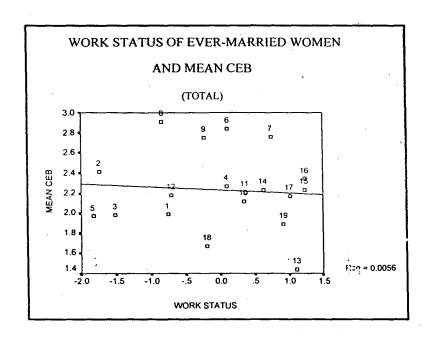


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# WORK STATUS OF EVER-MARRIED WOMEN AND FERTILITY VARIABLES

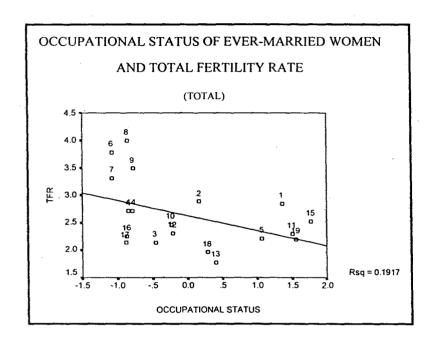


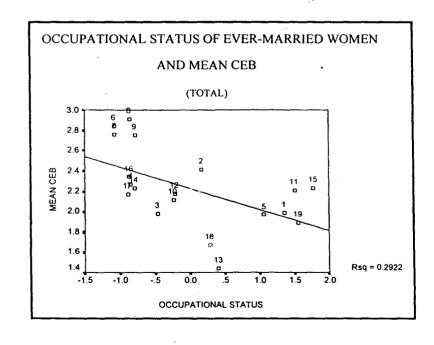


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## OCCUPATIONAL STATUS OF EVER-MARRIED WOMEN AND FERTILITY VARIABLES





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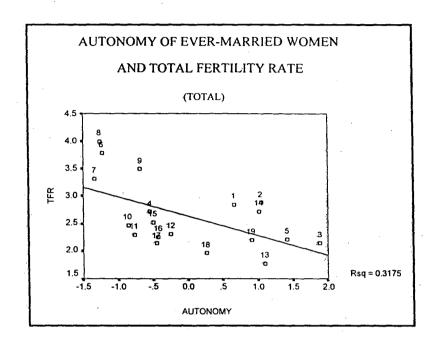
18.Kerala 19.Tamil Nadu

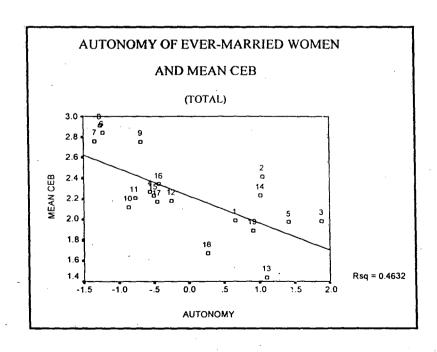
Pradesh

17.Karnataka

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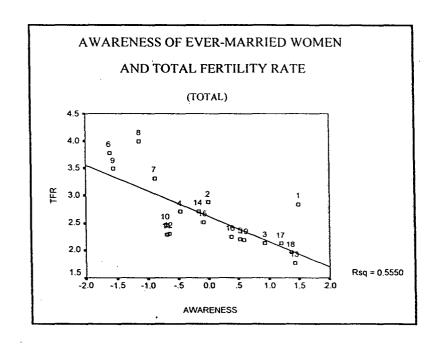
# AUTONOMY OF EVER-MARRIED WOMEN AND FERTILITY VARIABLES

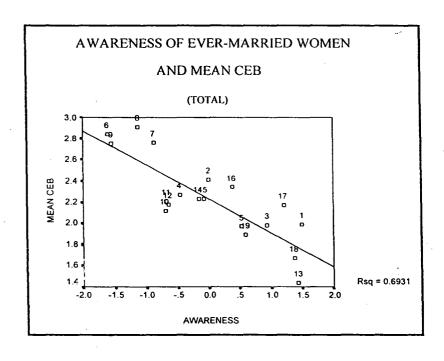




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# AWARENESS OF EVER-MARRIED WOMEN AND FERTILITY VARIABLES

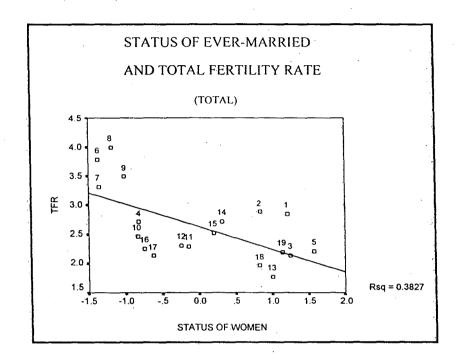


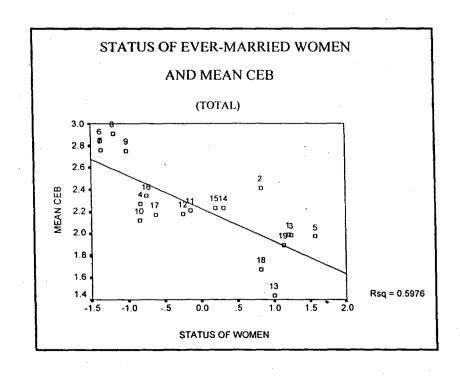


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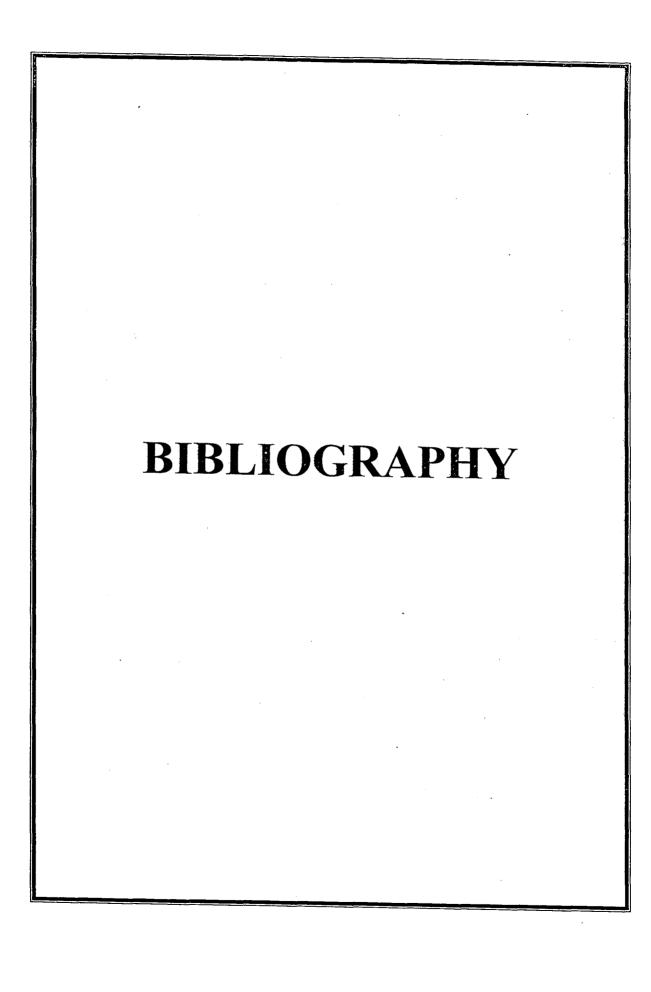
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