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District level baseline survey of family planning program in Uttar Pradesh: Jalaun

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Jalaun

District Level Baseline Survey of Family Planning Program in Uttar Pradesh

SIFPSA, Lucknow

The Population Council, India

MODE Research Pvt. Ltd., New Delhi

1995

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MODE

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PREFACE

The Baseline Surveys in some selected districts of Uttar Pradesh have been undertaken to generate important demographic and programme related data for strengthening the health and family planning efforts of the State Government. In each district, a Consultancy Organisation was engaged for handling the project in collaboration with the Population Council, India. MODE Research, New Delhi was the Consultancy Organisation for undertaking studies in the districts of Kanpur Nagar and Jalaun.

The demographic aspects of the survey included for the study covered individual and household level Schedules to provide information about the general socio-economic, demographic and environmental conditions, fertility history, preferences, choice of contraceptives and mortality conditions. It is hoped that the Baseline data of the district would provide a reliable data set to the researchers and the programme managers and officials.

I would like to take this opportunity to thank Smt. Pramila Shanker, Executive Director, SIFPSA, Lucknow for entrusting this important study to MODE and to the staff of the Population Council, India, Dr John Townsend, Dr M E Khan and Shri R B Gupta for providing valuable technical inputs from time to time.

Tilak Mukherji Director

Date : June 29, 1994

New Delhi

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CHAPTER I

BACKGROUND

1.1 Introduction

The Ministry of Health and Family Welfare (MOHFW) with financial support from United States Agency for International Development (USAID) have sponsored the "Innovations in Family Planning Services Project" (IFPS) under the executive control and management of the State Innovations in Family Planning Services Agency (SIFPSA), Lucknow.

The project activities envisage to achieve reduction in fertility through a multi programme approach, like increasing accessibility, improving quality and generating demand for family planning services.

The IFPS Project attempts to achieve its objectives by supporting service innovations in the public sector, the non-governmental sector and through social marketing of contraceptives. These intervention strategies are expected to increase significantly the couple protection rate of the state in general and of Jalaun in particular.

One of the pre-requisites and an important component of IFPS was to carry out a baseline survey in the selected districts of Uttar Pradesh. Accordingly a baseline survey was undertaken in 15 selected districts simultaneously. The BSUP is primarily a household survey with an overall target sample size of 37,000 ever married women in the age group 13-49 years.

The SIFPSA has designated the Population Council as the nodal organisation, responsible for providing coordination and technical guidance for the BSUP. The Population Council has collaborated with a number of Indian Consulting Organisations (COs) for survey implementation. Each CO has been responsible for carrying out the survey in one or more districts allocated to them. The baseline survey was initiated in 15 districts out of 63 districts of the state. This reports pertains to district **Jalaun**.

MODE Research Pvt. Ltd., with headquarters in Calcutta and branch offices in Delhi, Madras, Bombay, Bangalore, Hyderabad and a number of field offices all over the country was selected to be the CO for the BSUP in the districts of Jalaun and Kanpur Nagar.

The present report presents the results of the survey for **Jalaun**.

1.2 Background of Jalaun

As per 1991 Census (Table 1.1), the district has a population of 12.19 lakhs, with 22 percent urban and 78 percent rural population. The growth rate during 1981-91 was 23.4, which was lower than that observed for the state (25.2). The population density was 267 as against 473 for the state. The sex ratio as per 1991 was 829 as against 879 for the state.

The proportion of population below 14 years was 40.8 percent and that of above 65 years was 3.4 percent as per 1981 census. The dependency ratio for 1981 was 790 as against 840 for the state.

Table 1.1: Socio-economic and demographic profile of the district and state

	District	State
Population (1991)		
Total	1,219,377	139,112,287
Male	666,865	74,036,957
Female	552,512	65,075,330
Growth rate (1981-91)	23.40	25.16
Population density (1991)	267	473
% of State Population	0.88	NA
% Urban Population	22.08	19.84
Sex ratio (1991)	829	879
% of TOT population (1981)		
0-14 Population	40.8	41.7
65+ Population	3.4	4.0
Dependency ratio (1981)	790	840
Literacy level (1991)		
Total	50.72	40.89
Male	66.21	55.73
Female	31.60	25.30
Crude birth rate (SRS 1991)	NA	35.7
Contraceptive Prevalence Rate (1991-92)	40.14	34.54
Percent of total Population (1991)		
Scheduled caste	27.35	21.04
Scheduled tribe		0.22
Number of PHC/CHC (1991)	53	3929
Number of Sub centre (1991)	230	20154
Average rural population per sub centre (1991)	4131	5533

The level of literacy in the district was about 51 percent as against the state level of about 41 percent. The male literacy was 66.2 percent as against 31.6 percent for females. The corresponding figure for the state was slightly lower than that of the district.

The contraceptive prevalence rate during 1991-92 of the district was recorded at 40.14, while that of the state was 34.54.

The district has 27.35 percent scheduled castes. No scheduled tribe has been notified in the district. As regards the health facilities, there were 53 PHCs/CHCs in the district (1991). The number of sub centres in the same year stands at 230. The average rural population per sub centre was estimated as 4131.

1.3 OBJECTIVES OF THE SURVEY

The BSUP aims to gather district level information on fertility, infant and child mortality, family planning and maternal and child care practices. This information is intended to assist policy makers and programme administrators in planning strategies for improving their family welfare programmes.

In specific terms the project has been designated to fulfill the following objectives:

- Measurement of current levels of access to family planning services;
- Estimates of the quality of information; choice and follow-up provided to family planning users on specific methods and their appropriate uses;
- Estimates of knowledge and use of contraceptive methods as well as the level of unmet needs of contraception; and
- Measurement of the acceptability, utilisation and satisfaction with the methods and services provided.

CHAPTER II

THE SURVEY DESIGN

2.1 Survey Design

Questionnaires

Four types of questionnaires were used in the Jalaun BSUP; the Household Questionnaire, the Woman's Questionnaire, the Village Level Questionnaire and the CHC/PHC/SC Questionnaire. The overall content and format of the questionnaires was determined in a Questionnaire Design Workshop held at Lucknow in October, 1993. The Workshop was attended by representatives of all the Consulting Organisations, SIFPSA, the Population Council and USAID.

The Household Questionnaire was used to list all usual residents of each sample household plus visitors who slept in that household the night before the interview. Basic information was collected on the characteristics of each listed person relating to age, sex, marital status, relationship to the head of the household, education and occupation. In addition information was also collected on caste, religion, source of drinking water, source of fuel, possession of consumer durable, births and deaths records etc. This information was used to identify the eligible respondents for the Woman's Questionnaire.

The Woman's Questionnaire was used to collect information from all eligible ever married women in the age group 13-49, who were either usual residents or visitors who slept in the household the night before the household interview. The questionnaire covered the following aspects:

- Socio-economic characteristics of the couple
- Fertility and family size norms
- Utilisation of health services
- Immunization of children
- Knowledge and use of contraception

The village level questionnaire gathered information about the selected villages in terms of village type, population, availability of various amenities such as schools, health centres, medical shops etc. with a focus on the health personnel providing family planning services and advice. The questionnaire also included a number of questions on the stocking pattern of condoms, oral pills and the participation of community, NGOs, Anganwadi workers in this programme.

The CHC/PHC/SC questionnaire collected information on infrastructural facilities like availability of manpower, cold chain and family planning equipments and the supply of vaccines and contraceptives.

2.2 Training and Field Work

The questionnaires used for the BSUP in Jalaun district were bilingual, comprising questions in Hindi and English. For the questionnaire pretest, four females and two males were trained at Kanpur during the last week of September, 1993. The actual pretesting was carried out by these persons in Kanpur in a few villages nearby.

Training of field staff for the main survey was conducted between 29 October, 1993 and to November, 1993 at Kanpur. The training was closely monitored by senior staff of MODE and The Population Council. A total of 40 persons (32 females and 8 males) were given in-depth training for conducting field work. The training consisted of classes on field procedures, interview techniques on different sections of the questionnaire etc. It also included lectures on areas related to human reproduction, methods of contraception and MCH care. Practice interviews in the field were also undertaken. On completion of the training, candidates were categorized as supervisors, editors and investigators based on their performance.

The main field work for the BSUP in Jalaun district was carried out by four interviewing teams, each team consisting of one field supervisor, one field editor and four female interviewers. The main field work was carried out between 24 November, 1993 and 20 January, 1994. The monitoring and supervision of the data collection operations were carried out by the coordinator and senior staff of MODE for ensuring correct survey procedures and maintaining the quality of data. In addition, data from the field were simultaneously entered in micro computers, and field check tables were produced. These were fed back to the interviewing teams and the supervisors so that they could improve their performance, if needed.

2.3 Sample Design and Implementation

The sample design adopted for the BSUP is a two stage/three stage stratified systematic sample of households for rural/urban areas. The sample for Jalaun district was designed to provide statistical estimates for the selected parameters for the district as a whole and for the urban and rural areas separately. Further, weighting factors were developed for urban and rural areas separately.

The overall sample size for the district of Jalaun, in terms of number of households to be selected was set at 2500. After allowing for non-response at the household and individual levels (a maximum of 15 percent), it was estimated that this would yield approximately 2500 completed interviews of respondents to the woman's questionnaire (ever married women aged 13-49 years).

For obtaining an adequate sample size for urban and rural areas separately a sample size of atleast 500 households was decided for coverage as per the laid out guidelines of the Population Council. For the district Jalaun, a self-weighted sample design (sample size allocated according to urban/rural population proportion as per the 1991 census) is followed and 550 and 1950 households were selected from urban and rural areas, respectively.

In rural areas, the 1991 Census list of villages served as the sampling frame, and a two-stage stratified systematic sampling design was adopted with selection of villages in the first stage and households in the selected villages in the next stage. The following steps were followed before actual selection of the villages was done:

- All the villages were divided into three strata (based on 1991 population) each with an equal population size (i.e. after arranging the villages by descending order of their population size;
- 2 Villages with less than 50 persons were deleted from the sampling frame;

- Villages with population ranging between 51-150 were combined with the next adjoining village as per census listing to ensure the minimum required sample size of 25 households from each PSU/village;
- 4 78 PSUs/villages were selected and divided among the three strata;
- The required number of PSUs/villages were selected from each stratum separately through PPS sampling procedure.

For urban sampling, all the urban towns were classified into the following three strata:

Stratum I: Towns with population 1 lakh and above

Stratum II: Towns with population less than 1 lakh and 20,000 and above

Stratum III: Towns with less than 20,000 population

The sample was distributed into three strata with respect to the population proportion in each stratum. To give adequate representation for towns with over 1 lakh population, a sample of at least of 4 Census Enumeration Blocks (CEBs) (25 households per CEB) and from the other two stratum of towns, 2 CEBs (25 households per CEB) were drawn. Accordingly, the number of towns selected for each stratum was derived out. Again all the towns in each category were listed as per the census list, and then using PPS, the towns were selected. For the selected towns a list of Census Blocks was obtained from census authorities by the Consultancy Organisations, and using PPS sampling procedure the required number of census enumeration blocks in each town were derived.

The sample allocation in each of the three strata was based on proportional allocation (according to population size), it was likely that the exact sample for each town/each stratum of towns might not work out exactly. In such cases, it was followed that if the sample size was more than 100 but less than 150 in the case of first stratum of towns; only one town was selected. The number of CEBs included from that town, however might increase from 4 to 5 or 6, depending upon the multiple of 25 households falling in that category. Again, the rule of rounding (less than half and more than half of the sample size) was adopted for deciding the number of sample CEBs covered from that town.

In case sample households exceed 150 but remain less than 250 for this stratum of towns, two towns from this category were selected. A similar criterion was adopted for further increase in sample households for a particular stratum of towns. It was assumed that by rule of rounding, the total sample size would work out to be more or less equal to the required sample size in urban areas.

Similar procedures were followed in the case of stratum - II and stratum - III towns. In those cases for working out the number of towns to be selected, the sample size in each category was divided by 50 per town and once the number of towns to be covered was known, a similar procedure as in the case of stratum - I towns, was adopted to select the number of CEBs to be covered from each of the selected towns.

In some cases, it might be possible that from a particular type of town, because of the fewer number of towns available in that category, a much higher number of CEBs might have had

to be selected. In such cases, again for each CEB, the number of households to be selected were remain 25 only. In all 22 CEBs were selected from urban area.

Household Sampling

In both urban and rural areas, a sampling frame (by listing all the inhabited households and preparing maps - one showing location and boundaries of village and another showing the location of households/houses/structures - were prepared by a team of a lister and a mapper in advance. This list was utilised to select the households.

The selection of households was done by using a systematic random sampling procedure - without replacement, in advance. Once the household was listed and selected for the interview, there was no replacement for the locked houses, refusal and households not found.

In the case of large villages (with more than 500 households), using the natural distribution of the villages, divided the village into 3 to 5 clusters and selected two clusters strata at random of about 150 to 250 households each for houselisting and survey purposes. In such cases, from each cluster 13 and 12 households were selected for interviews by using systematic random sampling procedure, as described earlier.

Survey of Ever Married Women

From the selected households all the available ever married women in the age group 13-49 on a *de facto* basis were interviewed. At least three attempts were made to interview each selected woman. While the household questionnaire was preferably canvassed to the head of the household or a responsible adult, the ever married women schedule was addressed to each of the available eligible woman only. In case of the non-availability of a woman, the schedule remained unfilled and no attempt was made to fill in the schedule by requesting information from any other member of the household, including her husband.

WEIGHTING FACTOR

As mentioned earlier, since in some stages weighted sampling procedures were followed, the bias that arose due to weighting at the selection stage was adjusted in analysis stage by giving the reverse weighted factor in order to give an unbiased estimate.

The procedure adopted for the BSUP study is given below:

A Weighting Factor for Rural Areas

Where:

P = Total rural population (1991 census) of the district.

P_i = Population (1991 census) of the selected ith village/ith PSU.

a = Number of selected PSUs (villages) from the rural areas of the district.

H_i = Number of listed households in the ith PSU/village.

For segmented villages total number of households obtained from 1991 census have been projected for 2.5 years to get 1993 projected/listed households for that village/PSU.

h_i = Actual number of households surveyed from the ith selected village/PSU

Where:

E_i = Total number of eligible women existing in the surveyed households of the ith village/PSU

e_i = Number of actual eligible women surveyed in the ith village/PSU.

B. Weighting Factor for Urban Areas

$$\label{eq:hammer} \begin{aligned} & & P_i & & H_k \\ & \text{HH Factor} &= & ------ & x & ------ \\ & & a_i \ x \ b_j \ x \ q_{ijk} & & h_k \end{aligned}$$

Where:

P_i = Total urban population (1991 census) in the ith stratum

a_i = Number of selected towns in the ith stratum
 b_i = Number of selected CEBs in the jth town

 q_{ijk} = Population (1991 census) of kth CEB in the jth town of ith stratum.

 H_k = Number of listed households in the kth CEB of jth town

 h_k = Actual number of households surveyed from the kth CEB of jth town.

Where:

 E_k = Total number of eligible women existing in the surveyed households of the kth CEB/PSU of jth town of ith stratum

e_k = Number of actual eligible women surveyed in the kth CEB/PSU of the jth town of ith stratum.

Table 2.1 shows the response rates and the reasons for non-response. Of the 2500 households selected in Jalaun district, 2495 households were found to be occupied. Of these households, 97 percent households were interviewed and the remaining 3 percent could not be interviewed for various reasons. Among those households which could not be interviewed, 2.2 percent households were found not to be present at the time of the survey. Remaining households either did not have an adult respondent to answer the questionnaire or they refused to respond, households were vacant or it was a wrong address or other such reasons.

The total number of eligible women found in the above households was 3377 women, of which about 85.5 percent women were interviewed. In all, about 13 percent women could not be interviewed as they were not present at the time of the survey. Others (about 2%) could not be interviewed as they either refused to respond or provided incomplete answers.

Table 2.1: Sample results

	Rur	al .	Urba	an	Total		
	Number	Percent	Number	Percent	Number	Percent	
Households selected	1950	100.0	550	100.0	2500	100.0	
Households completed (C)	1897	97.3	528	96.0	2425	97.0	
Households with no competent respondent	10	0.5	2	0.4	12	0.5	
Households absent (HA)	40	2.1	15	2.7	55	2.2	
Households refused (R)	1	0.1	2	0.4	3	0.1	
Households vacant/no dwelling	1	0.1	3	0.5	4	0.2	
Others (O)	1	0.1	-	-	1	0.0	
Households occupied	1948	100.0	547	100.0	2495	100.0	
Households interviewed	1897	97.4	528	96.5	2425	97.2	
Households not interviewed	51	2.6	19	3.5	70	2.8	
Households response rate	NA	97.4	NA	96.5	NA	97.2	
Eligible women	2693	100.0	684	100.0	3377	100.0	
Women interviewed (EWC)	2284	84.8	605	88.5	2889	85.5	
Women not at home (EWNH)	367	13.6	72	10.5	439	13.0	
Women postponed (EWP)	11	0.4	1	0.1	12	0.4	
Women refused (EWR)	20	0.7	6	0.9	26	0.8	
Others (EWO)	11	0.4	-	-	11	0.3	
Individual response rate	NA	85.2	NA	88.5	NA	85.8	
Overall response rate	NA	83.0	NA	85.4	NA	83.4	

CHAPTER III

HOUSEHOLD AND RESPONDENT BACKGROUND CHARACTERISTICS

This chapter presents a profile of the demographic and socio-economic characteristics of the households and individual respondents in the BSUP.

3.1 Age-Sex Distribution of the Household Population

Table 3.1 gives the age-sex distribution of the *de jure* and visitors population in the household. The distribution of the usual residents shows that 41 percent belong to 0-14 years age group, while about 5 percent are above 65 years. The corresponding figures are similar for the visitors, i.e. about 41 percent in 0-14 years and 2 percent in 65+ age group.

Table 3.1: Household population of De jure and visitors by age and sex

Age	Rural				Urban		Total			
	Male	Female	Total	Male	Female	Total	Male	Female	Total	
De jure										
< 1 yrs	3.2	3.5	3.3	2.6	3.2	2.9	3.1	3.4	3.2	
1-4	12.3	12.0	12.2	13.2	11.7	12.5	12.5	12.0	12.3	
5-14	24.9	25.0	24.9	26.3	26.8	26.6	25.2	25.4	25.3	
15-19	9.4	8.1	8.8	8.4	8.9	8.6	9.2	8.3	8.8	
20-24	8.5	9.5	8.9	8.6	8.8	8.7	8.5	9.3	8.9	
25-29	7.9	8.5	8.2	8.2	8.9	8.5	8.0	8.6	8.3	
30-34	5.8	6.1	6.0	6.7	6.3	6.5	6.0	6.1	6.1	
35-39	5.2	5.0	5.1	6.5	4.5	5.6	5.5	4.9	5.2	
40-44	4.2	3.8	4.0	3.6	4.3	4.0	4.0	3.9	4.0	
45-49	3.4	4.6	4.0	3.2	3.6	3.4	3.4	4.4	3.8	
50-64	9.7	9.5	9.6	7.9	8.9	8.4	9.3	9.3	9.3	
65 +	5.5	4.4	5.0	4.8	4.0	4.4	5.4	4.3	4.9	
Total %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Total N	569957	484610	1054567	169446	155704	325150	739403	640315	1379718	
Sex Ratio*	NA	NA	850	NA	NA	919	NA	NA	866	
Visitor										
< 1 yrs	12.0	7.0	8.8	14.2	6.7	9.5	12.6	6.9	8.9	
1-4	24.5	15.3	18.6	18.0	15.0	16.1	22.8	15.2	18.0	
5-14	19.4	12.0	14.7	14.5	10.4	11.9	18.1	11.6	14.0	
15-19	7.8	18.8	14.9	13.5	16.2	15.2	9.3	18.1	15.0	
20-24	5.8	21.2	15.7	16.4	26.7	22.9	8.6	22.6	17.6	
25-29	8.2	10.6	9.7	7.7	9.9	9.1	8.1	10.4	9.6	
30-34	4.8	3.5	4.0	6.4	3.1	4.3	5.3	3.4	4.0	
35-39	3.4	1.6	2.3	1.9	2.9	2.6	3.0	2.0	2.3	
40-44	1.7	3.3	2.8	1.1	0.7	0.8	1.6	2.7	2.3	
45-49	1.8	2.5	2.3	1.2	6.0	4.3	1.7	3.4	2.8	
50-64	6.3	2.7	4.0	3.5	2.0	2.6	5.6	2.6	3.6	
65 +	4.1	1.4	2.4	1.4	0.4	0.8	3.4	1.2	2.0	
Total %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Total N	19441	4936	54377	6973	12148	19121	26414	47084	73498	
Sex Ratio*	NA	NA	1797	NA	NA	1742	NA	NA	1783	

^{*} Sex ratio: females per 1000 males

The distribution pattern of *de jure* males and females across each group is identical. This is also true in case of the place of residence (i.e. rural or urban). But, in case of visitors, the concentration of females is in the age group 20-24 (23 percent). This pattern is also true for both the urban and rural areas. In all, above half of the female visitors in both urban and rural areas are in the age group 15-29 only. Among the visitors, 27 percent constitute the children below 5 years of age. Both these concentrations may be probably because of the more proportion of married daughters and their younger children among visitors.

The sex ratio, number of females per 1000 males, for the district is estimated to have 866 for *de jure* population.

3.2 Household Composition

Table 3.2 shows the percent distribution of households by various characteristics of the household head (sex, age, marital status, religion and caste/tribe), as well as the number of usual household members and the relationship structure. Between 96 and 97 percent of household heads are male, regardless of the type of residence. The median age of household heads also hardly varies by residence (42-45 years). However, in urban areas household heads are slightly more concentrated in the middle age groups 30-44 and 45-59. As regards their marital status, about 86 percent are currently married while about 3 percent are never married. Others are either widowed, divorced or separated. Overall, 89 percent of household heads are Hindus, 11 percent are Muslims and the rest belong to other religions. In the urban areas Muslims constitute 29 percent of households. 38 percent of household heads are classified as belonging to backward castes while 26 percent were scheduled castes and two percent are members of scheduled tribes. The concentration of both of these groups is higher in rural areas than in urban areas.

The mean household size is slightly lower in urban areas (6.45 persons per household) than in rural areas (6.63 persons per household).

3.3 Educational Attainment

The educational level of household members is one of the most important indicators of development. Reproductive behaviour, the use of contraceptives, the health of children and proper hygienic practices are more often affected by the education of the household members.

Table 3.3 shows the usual residents and visitors in different age groups. Usual residents form the major bulk of the household population. The distribution shows that the female visitors (7 percent) are double than the male visitors (3 percent).

The visitors population is more in the age group 15-29 (around 8 percent) and for children under 1 year (13 percent) than other age groups. A further analysis by sex shows that visitors among females are more concentrated in the age group 15-29 (around 11 percent).

Table 3.2: Housing composition

Housing composition		Residence	
	Rural	Urban	Total
Sex of the household head			
Male	97.2	95.7	96.9
Female	2.8	4.3	3.1
Age of household head			
Less than 30	11.8	12.1	11.9
30 - 44	33.8	40.3	35.4
45 - 59	29.9	26.5	29.1
60 +	24.5	21.0	23.7
Median age	45.00	42.00	45.00
Marital status of household head			
Never married	2.8	2.7	2.8
Currently married	85.3	88.0	85.9
Widowed	11.5	8.9	10.8
Divorced	0.2	-	0.2
Separated	0.3	0.4	0.3
Religion			
Hindu	94.6	70.8	88.9
Muslim	5.1	29.1	10.9
Others	0.3	0.1	0.2
Caste			
Scheduled caste	28.8	17.7	26.1
Scheduled tribe	1.8	2.1	1.9
Backward caste	41.4	27.2	38.0
Higher caste	22.6	23.8	22.9
Other religious group	5.4	29.2	11.1
Number of usual members			
1	1.6	2.9	1.9
2	4.7	3.9	4.6
3	5.1	9.5	6.2
4	11.9	11.8	11.8
5	15.1	14.9	15.0
6	17.8	15.0	17.2
7	13.5	13.4	13.5
8	9.4	8.8	9.3
9 +	20.9	19.8	20.6
Mean	6.63	6.45	6.58
Total %	100.0	100.0	100.0
Number of households	159292	50454	209746

Table 3.3: Usual residents and visitors

Characteristics		Usual resident	Visitor	Total %	Total N *
Male Age					
< 1		87.2	12.8	100.0	25950
1 - 4		93.9	6.1	100.0	98512
5 - 14		97.5	2.5	100.0	191326
15 - 19		96.5	3.5	100.0	70237
20 - 24		96.5	3.5	100.0	65164
25 - 29		96.5	3.5	100.0	61196
30 - 34		97.0	3.0	100.0	46033
35 - 39		98.1	1.9	100.0	41491
40 - 44		98.6	1.4	100.0	30254
45 - 49		98.2	1.8	100.0	25228
50 - 59		97.6	2.4	100.0	45782
60 +		98.0	2.0	100.0	64645
Residence	Rural	96.7	3.3	100.0	589398
	Urban	96.0	4.0	100.0	176419
	Total	96.6	3.4	100.0	765817
Female Age		87.1	12.9	100.0	25141
< 1		91.4	8.6	100.0	83712
1 - 4		96.7	3.3	100.0	168284
5 - 14		86.2	13.8	100.0	61761
15 - 19		84.9	15.1	100.0	70197
20 - 24		91.9	8.1	100.0	60013
25 - 29		96.1	3.9	100.0	40833
30 - 34		97.2	2.8	100.0	32277
35 - 39		95.3	4.7	100.0	26291
40 - 44		94.5	5.5	100.0	29581
45 - 49		98.2	1.8	100.0	42366
50 - 59		97.9	2.1	100.0	46675
60 +		100.0	-	100.0	268
Residence	Rural	93.3	6.7	100.0	519547
	Urban	92.8	7.2	100.0	167852
	Total	93.2	6.8	100.0	687399
Total Age		87.1	12.9	100.0	51091
< 1		92.8	7.2	100.0	182224
1 - 4		97.1	2.9	100.0	359610
5 - 14		91.7	8.3	100.0	131999
15 - 19		90.5	9.5	100.0	135361
20 - 24		94.2	5.8	100.0	121209
25 - 29		96.6	3.4	100.0	86865
30 - 34		97.7	2.3	100.0	73768
35 - 39		97.1	2.9	100.0	56545
40 - 44		96.2	3.8	100.0	54810
45 - 49		97.9	2.1	100.0	88147
50 - 59		98.0	2.0	100.0	111320
60 +		100.0	-	100.0	268
Residence	Rural	95.1	4.9	100.0	1108904
	Urban	94.4	5.6	100.0	344271
	Total	94.9	5.1	100.0	1453175

Table 3.4: Education level of household population

Education level	Rural				Urban			Total		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	
Illiterate	24.7	60.4	41.1	17.8	43.8	30.3	23.1	56.4	38.6	
Upto class 4	22.7	17.0	20.1 8.4	26.2	20.7	23.6	23.5	17.9	20.9	
Primary	8.4	8.4	12.4	8.2	9.7	8.9	8.3	8.7	8.5	
Upto middle	15.8	8.4	9.3	14.7	11.9	13.4	15.6	9.3	12.7	
Upto high	14.7	3.0	7.7	14.4	6.2	10.5	14.6	3.8	9.6	
Above high school	12.9	1.7		18.5	7.3	13.1	14.2	3.1	9.0	
3			100.0							
Total %	100.0	100.0	892221	100.0	100.0	100.0	100.0	100.0	100.0	
Total N	481949	41027		141352	131627	272980	623301	541900	1165201	
			2.0							
Median no. of years	5.0	-		6.0	2.0	5.0	5.0	-	3.0	

Table 3.4 shows the extent of literacy and level of education of the *de jure* male and female household population aged six and above by place of residence. More than 56 percent of females and about 23 percent of males in that age range are illiterates.

The literacy level is about 70 percent in urban and 59 percent in the rural areas. Urban areas have a wide lead over rural areas in both literacy and the level of education achieved. Urban women are more than twice as likely to be literate than rural women (56 percent compared to 40 percent). The gap by residence is less pronounced for males (82 percent compared to 75 percent).

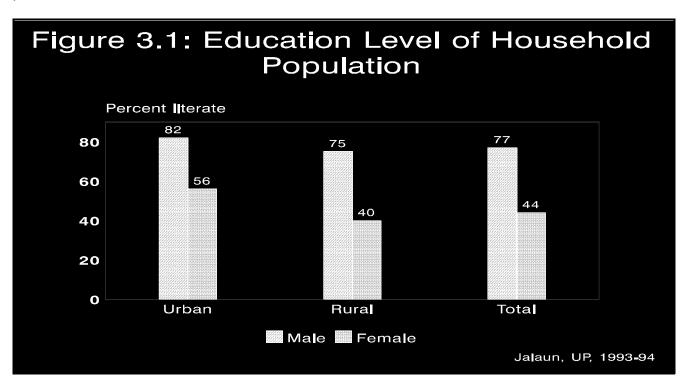


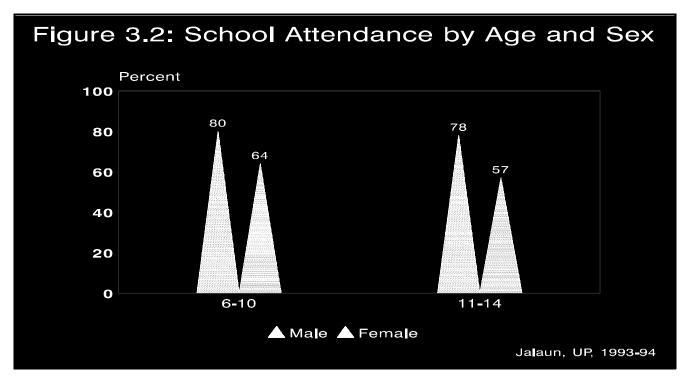
Table 3.5 gives the percentage of children attending school in the age group of 6-14 years. In all, about 71 percent of the children are school going. A fairly large proportion of males (79%) as compared to females (62%) are school going. In urban areas, 78 percent children are attending school as compared to about 69 percent in rural areas.

About 73 percent of the children in the age group 6-10 years are school going. A fairly large proportion of males (80%) as compared to females (64%) are attending school in this age group. In urban areas, 81 percent children are attending school as compared to about 70 percent in rural areas. In the age group of 11-14 years, 68 percent children are school going. This shows that about 5 percent drop out after the age of 10 years.

Table 3.5: Percentage of children attending school by age, sex and residence

Age	Rural				Urban	Total			
	Male	Female	Total	Male	Female	Total	Male	Female	Total
6 - 10	78.6	60.3	69.9	85.2	76.1	81.0	80.3	64.1	72.7
11 - 14	78.0	52.7	67.1	77.9	67.2	72.3	78.0	56.7	68.4
6 - 14	78.4	57.6	68.9	82.7	72.6	77.9	79.4	61.5	71.1

The percent drop out is more in the urban areas than in the rural areas. Moreover, the percentage drop out is much more among the females (both in rural and urban areas) than in males.



This indicates that in spite of the efforts by the government towards enhancing female literacy, still there exists a wide gap between enrollment level of males and females and drop outs.

3.4 Housing Characteristics

Table 3.6 provides information on housing characteristics by residence. A fairly large number of households in urban areas have electricity (67 percent) while, only 18 percent have electricity in rural areas.

The type of drinking water facilities are important determinants of the health status of household members, particularly of children. The seriousness of major childhood diseases such as diarrhoea can be reduced by proper hygienic practices.

Table 3.6 : Housing characteristics

Housing characteristics	Residence						
	Rural	Urban	Total				
% households with electricity	17.5	66.6	29.3				
Source of drinking water							
Piped	4.5	68.9	20.0				
Handpump	48.4	29.0	43.8				
Well water	46.7	2.1	36.0				
Other	0.3	-	0.2				
Type of house							
Hut	6.9	4.3	6.3				
Kutcha	50.8	26.3	44.9				
Mixed	27.1	20.5	25.5				
Pucca	15.2	48.9	23.3				
Agricultural land ownership							
Landless	19.4	60.7	29.3				
1-3 acres	39.9	17.8	34.6				
4-5 acres	13.1	6.7	11.5				
6 or more acres	27.7	14.8	24.6				
Consumer durable goods							
Radio	25.5	38.6	28.7				
Television	5.7	35.4	12.8				
Total %	100.0	100.0	100.0				
Number of households	159292	50454	209746				

The BSUP had questions on the source of drinking water the household uses. Regarding the source of drinking water, 20 percent of households have piped water, 44 percent get water from a handpump, and 36 percent from open wells. As in the case of electricity, there are large urban-rural differences in the source of drinking water. The proportion of households with piped drinking water is 69 percent in urban areas but only 5 percent in rural areas.

Regarding type of housing construction, 45 percent of houses are kutcha (made from mud, thatch, or other low-quality materials), 26 percent are semi-pucca (partly low quality and partly high-quality materials) and 23 percent are pucca (high quality materials throughout, including roof, walls, and floor). There are large urban-rural differences. More than half of the houses in rural areas are classified as kutcha whereas almost an equal proportion of houses in urban areas are pucca.

On the question of ownership of land, 29 percent are landless, about 35 percent are having 1-3 acres of land, 12 percent have 4-5 acres and 25 percent have more than 6 acres. In all, about 29 percent have radio and about 13 percent are having television sets.

3.5 Respondent's Background Characteristics

Whereas the previous tables considered characteristics of households, based on results from the BSUP Household Questionnaire, this section examines selected background

characteristics of primary respondents (ever-married women aged 13-49), based on the BSUP Women's Questionnaire.

Table 3.7 shows several important background characteristics of respondents. In the age distribution of ever-married women, the percentage in each age group increases up to 20-24 reflecting the increase in the proportion married in successive age groups. The percentages decline after the age 20-24, by which time most women have already married, reflecting the normal pyramidal shape of the age distribution. This age pattern is rather similar in the various residence categories, although the percentages in the younger age groups are smaller in urban areas, reflecting the somewhat later age at marriage in urban areas.

A further analysis on marital status shows that 96 percent of the ever-married women are currently married.

In all 61 percent of the respondents are illiterate and about one-third having studied upto the middle standard. Contrary to this, the husbands of the respondents are more literate. About two third of them have either studied upto the middle standard, or upto high school level and even above that.

A large majority (96 percent) of the respondents are not working. Only about 3 percent are employed by some one else and is a partner in earning for the family. The figures being almost similar in rural as well as in urban areas of Jalaun. The distribution of respondents by religion and caste/tribe shows that 90 percent of the respondents are Hindus and 10 percent Muslims. About 40 percent belong to the backward caste, 24 percent scheduled castes and 2 percent scheduled tribes. Higher caste Hindus constitute 24 percent of the respondents.

Exposure to mass media is expected to increase knowledge about various family welfare related issues. It is thus, imperative to assess the level of exposure to mass media.

Table 3.8 gives the access to mass media of the women in Jalaun district. The total exposure to any media is 39 percent. With respect to the age-wise exposure, women in the age group of 20-24 years seem most exposed (44%) followed by women of 25-29 years (43.5%). Women below 20 years (36%) and above 30 years (35%) are less exposed.

There is a vast difference in exposure between rural and urban areas. The exposure among the urban women is about twice that of her rural counterparts.

Education level has been seen to have a direct association with the level of exposure. It is lowest among the illiterate women (25%) and highest among those who have attained education above high school level (85%).

As regards religion, Hindu women are less exposed (38%) than their Muslim counterparts (44.5%). Among the caste divisions, exposure is highest among the higher caste women (45%) and least among scheduled caste women (30%).

Table 3.7: Background characteristics of the respondents

Background characteristics	Re	esidence		Total numbe	er of women
	Rural	Urban	Total	Weighted N *	Unweighted N
Age					
13 - 14	0.5	-	0.4	1136	12
15 - 19	11.8	8.7	11.0	32392	316
20 - 24	22.2	22.9	22.4	65539	637
25 - 29	20.4	22.4	20.9	61159	600
30 - 34	14.3	15.5	14.6	42763	426
35 - 39	11.8	10.1	11.4	33510	338
40 - 44	8.9	11.2	9.4	27600	273
45 - 49	10.1	8.9	9.8	28741	284
Marital status					
Marital status	0/ 5	04.7	0/ 1	201/20	2700
Currently married	96.5	94.7	96.1	281638	2780
Previously married**	3.5	5.3	3.9	11529	109
Education					
Illiterate	65.8	46.5	61.4	179996	1751
Upto class 4	6.3	11.6	7.5	22049	213
Primary	11.2	12.6	11.5	33790	329
Upto middle	10.4	12.5	10.9	32008	327
Upto high	3.6	6.1	4.2	12176	123
Above high school	2.6	10.7	4.5	13147	146
Religion					
Hindu	94.8	71.6	89.5	262345	2600
Muslim	4.9	28.1	10.2	29955	280
Others	7.7	0.1	0.0	61	1
Officia	0.3	0.1	0.3	806	8
Caste					
Scheduled caste					
Scheduled tribe	26.0	17.3	24.0	70463	696
Backward caste	1.7	2.7	1.9	5702	49
Higher caste Hindu	42.4	29.7	39.5	115886	1138
Other religious groups	24.6	21.9	24.0	70294	717
Strict rengious groups	5.2	28.4	10.5	30821	289
Work status					
Not working	96.5	94.2	96.0	281450	2784
Working in family farm/business	0.6	0.1	0.5	1428	15
Employed by someone else	2.2	4.3	2.7	7925	69
Self-employed	0.1	0.5	0.2	649	7
Others	0.2	0.6	0.3	830	5
Husband's education***					
	14 0	12.0	1 🗆 1	44122	124
Illiterate	16.0	12.0	15.1	44133	436
Upto class 4	9.1	10.0	9.3	27188	265
Primary	8.0	8.4	8.1	23850	236
Upto middle	16.0	14.4	15.6	45869	439
Upto high	21.5	20.3	21.3	62354	606
Above high school	25.9	29.8	26.8	78457	800
Not available	3.5	5.3	3.9	11529	109
Total %	100.0	100.0	100.0	-	-
Number of ever married women	226050	67116	-	293166	2889
* In 00's				0.00	2007

 ^{*} In 00's
 ** Previously married includes widowed, divorced and separated women
 *** Husband's education for previously married women is not available

Table 3.8: Access to mass media

Background Characteristics	Reads or listens to newspaper			W	atches telev	rision	Lis	tens to the	radio		cinema or t		expose	Number of
	Never	Less often	Frequen t	Never	Less often	Frequent	Never	Less often	Frequent	Never	Less often	Frequen t	d to any media	women
Age														
13 - 19	93.0	6.5	0.5	85.5	4.6	10.0	73.8	10.7	15.5	92.0	8.0	-	63.8	33529
20 - 24	90.0	8.8	1.2	79.2	8.1	12.6	68.8	15.4	15.8	86.3	13.3	0.4	56.2	65539
25 - 29	88.4	8.4	3.2	78.6	9.2	12.3	71.6	15.8	12.6	87.2	12.4	0.5	56.5	61159
30 +	90.0	7.1	2.8	81.6	8.3	10.1	77.7	12.4	9.9	95.0	4.5	0.5	65.0	132614
Residence														
Rural	93.3	5.8	1.0	88.4	6.0	5.6	75.3	12.6	12.1	93.5	6.1	0.4	67.9	226050
Urban	79.4	14.1	6.5	55.2	14.9	29.8	69.7	16.7	13.6	82.9	16.5	0.6	38.0	67116
Education														
Illiterate	97.4	2.2	0.4	91.5	5.5	3.0	82.1	9.6	7.2	95.8	4.0	0.1	75.3	179996
Upto class 4	93.8	5.5	0.7	71.9	11.6	16.5	71.1	17.2	11.7	88.2	11.4	0.4	49.5	22049
Primary	86.2	11.0	2.8	73.7	11.0	15.3	62.9	19.3	17.7	90.6	9.2	0.2	47.7	33790
Upto middle	80.2	16.4	3.5	69.4	10.3	20.3	58.9	20.5	20.6	86.8	12.3	0.9	36.5	32008
Upto high	61.0	34.7	4.3	45.8	20.3	34.0	46.8	24.2	29.0	72.2	26.6	1.2	22.1	12176
Above high school	44.1	32.2	23.8	29.1	11.4	59.5	43.8	19.5	36.8	59.3	37.4	3.4	15.1	13147
Religion														
Hindu	90.1	7.6	2.3	81.9	7.5	10.7	73.4	13.8	12.9	91.6	8.0	0.5	61.6	262345
Muslim	89.7	8.1	2.2	72.0	13.2	14.8	79.1	12.0	8.9	86.8	13.2	-	55.5	29955
Others	90.7	9.3	-	75.7	-	24.3	90.7	9.3	-	100.0	-	-	75.7	866
Caste														
Scheduled caste	95.6	4.0	0.4	90.1	5.8	4.2	78.8	9.7	11.6	93.8	5.9	0.3	69.9	70463
Scheduled tribe	87.9	12.1	-	82.0	13.5	4.5	75.0	21.4	3.5	89.5	8.6	1.9	66.4	5702
Backward caste	93.9	5.1	1.0	85.3	6.3	8.4	76.8	12.4	10.8	93.2	6.5	0.3	66.7	115886
Higher caste Hindu	78.4	15.2	6.4	68.0	10.6	21.4	62.2	19.5	18.3	86.6	12.5	0.8	44.5	70294
Other reli. groups	89.7	8.1	2.1	72.1	12.9	15.0	79.4	11.9	8.7	87.1	12.9	-	56.0	30821
Total %	90.0	7.7	2.3	80.8	8.0	11.1	74.0	13.6	12.4	91.0	8.5	0.4	61.0	293166

CHAPTER IV

NUPTIALITY

This chapter presents the findings of the marriage pattern from the BSUP study. Marriage is of special interest to the population researchers because of its implications in the growth of the population. It is also of a high concern, as it invites a number of pregnancy related risks.

4.1 Current Marital Status of Women

Table 4.1 shows the current marital status of women by residences and age. It is evident from the table that marriage is virtually universal in Jalaun and the marriages in rural areas take place at relatively young ages. At 15-19 years, nearly 64 percent of women are married. The proportion of ever married at the age of 15-19 years is much lower in urban areas (40%) than in the rural areas (64%).

Table 4.1: Current marital status

Age				Total %	Total N			
		Never Married	Currently married	Widowed	Divorced	Separated		
Rural	13-14	92.3	7.7	-	-	-	100.0	16263
	15-19	35.9	63.9	0.2	-	-	100.0	46007
	20-24	2.9	96.3	0.3	-	0.5	100.0	53205
	25-29	1.0	98.0	1.1	-	-	100.0	45023
	30-34	0.2	95.9	3.3	0.3	0.3	100.0	30704
	35-39	0.3	96.1	2.2	-	1.3	100.0	24922
	40-44	-	92.1	7.1	-	0.9	100.0	19469
	45-49	-	87.9	12.	-	-	100.0	23173
	Total	13.0	84.1	2.5	0.0	0.3	100.0	258767
Urban	13-14	100.	-	-	-	-	100.0	6342
	15-19	59.7	38.6	-	0.8	1.0	100.0	15754
	20-24	8.9	87.9	1.2	0.3	1.6	100.0	16992
	25-29	0.7	98.7	-	-	0.6	100.0	14990
	30-34	0.5	95.4	1.7	0.8	1.5	100.0	10128
	35-39	-	95.8	3.5	-	0.7	100.0	7355
	40-44	-	80.4	19.	-	-	100.0	6822
	45-49	-	93.8	6.2	-	-	100.0	6408
	Total	20.5	75.5	75.	0.3	0.8	100.0	84792
Total	13-14	94.5	5.5	-	-	-	100.0	22606
	15-19	41.9	57.4	0.1	0.2	0.2	100.0	61761
	20-24	4.4	94.3	0.5	0.1	0.8	100.0	70197
	25-29	0.9	98.2	0.8	-	0.1	100.0	60013
	30-34	0.3	95.8	2.9	0.5	0.6	100.0	40833
	35-39	0.3	96.1	2.5	-	1.2	100.0	32277
	40-44	-	89.0	10.	-	0.6	100.0	26291
	45-49	-	89.2	10.	-	-	100.0	29581
	Total	14.9	82.0	2.6	0.1	0.5	100.0	343559

Table 4.2 shows the singulate mean age at marriage for males and females from selected sources. As per the available data, in 1961 the difference has been reflected as 4.37, while in 1971 the difference was 4.52. The corresponding figure for BSUP has been put to 5.82. The mean age for males and females from BSUP is calculated as 22.95 and 17.13, respectively.

Table 4.2: Singulate mean age at marriage

Source (district level)	Singular		
	Male	Female	Difference
1961 Census	17.94	13.57	4.37
1971 Census *	18.88	14.36	4.52
1992-93 BSUP	22.95	17.13	5.82

^{*} Data on district wise age at marriage using census data is available from PRC Lucknow publication by J.N. Srivastava.

Table 4.3 gives the knowledge of the respondents about the minimum legal age at marriage. In all 18 percent have had the correct knowledge regarding age at marriage of males. Interestingly almost twice have had the correct knowledge of age at marriage of females (32%).

Table 4.3: Knowledge of minimum legal age at marriage

Background	Percentage who correc	tly know legal minimum ag	e at marriage
characteristics	For males it is 21 years	For females it is 18 years	Number of women *
Age			
13 - 19	15.5	25.9	33529
20 - 29	21.1	35.3	126699
30 - 39	15.9	32.2	76273
40 - 49	12.8	28.4	56341
Residence			
Rural	15.0	27.9	226050
Urban	25.6	46.0	67116
Education			
Illiterate	8.6	18.7	179996
Upto class 4	19.2	34.9	22049
Primary	21.7	48.3	33790
Upto middle	32.0	52.2	32008
Upto high	41.4	67.0	12176
Above high school	67.9	86.8	13147
Religion			
Hindu	17.8	31.9	262345
Muslim	14.3	33.0	29955
Others	46.1	55.8	866
Caste			
Scheduled caste	10.5	24.0	70463
Scheduled tribe	17.2	25.4	5702
Backward caste	14.0	25.4	115886
Higher caste Hindu	31.3	50.9	70294
Other religious groups	15.0	33.5	30821
Total	17.5	32.1	293166

* In 00's

In the Indian setting, the age at which a woman starts living with her husband marks the beginning of her exposure to the risk of pregnancy. The information in Table 4.4 allows an assessment of the age at which women initiate sexual intercourse and the trend in this indicator across age cohorts.

This is more so in case of rural areas. Here, 15 percent know the correct age at marriage of males, while about 28 percent know about the age at marriage of females. Same is true in case of urban areas (26% for males and 46% for females).

The level of knowledge has been shown to increase with the increase in the level of education and caste.

Table 4.4: Age at which respondent started living with husband

Current age	Percen	tage who s	tarted living	with husbar	nd by exact a	ge	Mean age when
	13-14	15-16	17-18	19-20	21-22	23-25	started living with husband
Rural							
13-14	93.3	NA	NA	NA	NA	NA	13.3
15-19	33.1	44.8	14.2	-	NA	NA	14.8
20-24	20.3	34.3	23.5	9.4	1.1	0.4	15.5
25-29	25.7	37.0	18.6	6.2	1.5	0.2	15.3
30-34	28.6	42.3	8.8	4.9	1.8	1.0	14.9
35-39	24.7	43.7	12.9	3.6	0.7	0.3	14.8
40-44	34.1	34.4	11.4	1.0	1.5	-	14.4
45-49	31.3	42.8	9.6	2.6	0.4	1.3	14.8
20-49	26.2	38.5	15.7	5.5	1.2	0.5	15.1
25-49	28.1	39.9	13.0	4.2	1.2	0.6	14.9
Urban							
13-19	30.5	36.7	24.9	1.5	NA	NA	15.0
20-24	21.7	28.8	21.2	14.0	2.2	1.3	15.8
25-29	14.9	45.7	16.4	9.9	7.1	2.7	16.4
30-34	15.3	42.5	21.6	9.3	2.8	1.2	16.0
35-39	34.1	35.5	19.1	4.1	-	1.3	15.1
40-44	38.4	30.2	7.7	3.3	1.2	0.9	14.5
45-49	35.5	41.6	14.2	1.8	1.6	0.9	15.3
20-49	23.6	37.3	17.5	8.5	3.1	1.5	15.7
25-49	24.3	40.2	16.2	6.7	3.4	1.6	15.7
Total							
13-14	93.3	NA	NA	NA	NA	NA	13.3
15-19	32.6	43.3	16.1	0.3	NA	NA	14.8
20-24	20.6	33.0	23.0	10.5	1.4	0.6	15.6
25-29	23.1	39.1	18.0	7.1	2.9	0.8	15.5
30-34	25.3	42.4	11.9	6.0	2.0	1.1	15.2
35-39	26.6	42.0	14.2	3.7	0.5	0.5	14.9
40-44	35.3	33.2	10.4	1.6	1.4	0.3	14.4
45-49	32.2	42.5	10.5	2.4	0.7	1.2	14.9
20-49	25.6	38.2	16.1	6.2	1.7	0.8	15.2
25-49	27.2	39.9	13.8	4.8	1.7	0.8	15.1

Table 4.4 gives the age of the respondents at which she started living with her husband. The table shows that a majority of the respondents in both rural (80%) and urban (78%) areas in the age group of 20-49 years started living with their husband between 13-18 years. Further analysis shows that in all, the mean age at which the women started living with their husband is between 13.3 to 15.6 years for all age groups of women. This indicates a fairly early age at marriage and hence an elongated reproductive life span for the women of Jalaun district.

Table 4.5 shows the median age at which the women started living with their husband by some selected background. In both rural and urban areas the median age at which the respondents started living with their husband is 15 years across all the age groups (15-19 yrs, 20-24 yrs, 25-29 yrs, 30-34 yrs, 35-39 yrs and 40-49 yrs).

Table 4.5: Median age at which respondent started living with husband by selected background characteristics

Background characteristics				Current	age			
	15-19*	20-24*	25-29	30-34	35-39	40-49	20-49	25-49
Residence								_
Rural	15.00	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Urban	15.00	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Education								
Illiterate	15.00	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Upto class 4	15.00	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Primary	15.00	16.00	15.00	15.00	15.00	15.00	16.00	15.00
Upto middle	15.00	16.00	16.00	15.00	15.00	16.00	16.00	15.00
Upto high	15.00	17.00	17.00	15.00	16.00	15.00	17.00	16.00
Above high school	17.00	18.00	18.00	18.00	17.00	16.00	18.00	18.00
	15.00	16.00	15.00	15.00	15.00	15.00	16.00	15.00
Religion	14.00	15.00	15.00	15.00	15.00	14.00	15.00	15.00
Hindu	17.00	-	18.00	-	16.00	21.00	17.00	18.00
Muslim Others								
Cinera	15.00	15.00	15.00	14.00	15.00	14.00	15.00	15.00
Caste	15.00	14.00	15.00	15.00	-	14.00	14.00	15.00
Scheduled caste	15.00	16.00	15.00	15.00	15.00	15.00	16.00	15.00
Scheduled tribe	16.00	16.00	16.00	15.00	15.00	15.00	16.00	15.00
Backward caste								
Higher caste Hindu	15.00	15.00	15.00	15.00	15.00	15.00	15.00	15.00
Total								

^{*} Omitted when less than 50 percent of the women have married for the first time by age 20.

CHAPTER V

FERTILITY

One of the major objectives of BSUP is to estimate the fertility level. This chapter is devoted to the level of current fertility, differentials in fertility by background characteristics. Further, the chapter is focussed on the trends in fertility which permit examination of age-specific fertility in different time periods in retrospective.

The chapter also gives the cumulative fertility-children ever born. The cumulative fertility tables are derived from a sequence of questions on the number of boys and girls living and not living in the household and on children who may have died. The tables included in this chapter show the mean number of children ever born by current age and age at marriage.

5.1 Current Fertility Levels and Trends

Table 5.1 gives the current fertility levels of the women of Jalaun district. As can be seen from the table, the age specific fertility rates show an increased trend with an increase in the age of the women. The figures then decline, after 24 years till the woman attends menopause.

Table 5.1: Current fertility

Age	Ru	ıral	Url	ban	Total	
	ASFR	ASMFR	ASFR	ASMFR	ASFR	ASMFR
13-14	0.006	0.095	-	-	0.004	0.095
15-19	0.222	0.369	0.161	0.500	0.206	0.390
20-24	0.336	0.347	0.312	0.351	0.330	0.347
25-29	0.217	0.219	0.193	0.195	0.211	0.213
30-34	0.128	0.128	0.157	0.158	0.135	0.135
35-39	0.068	0.069	0.056	0.056	0.066	0.066
40-44	0.018	0.018	0.013	0.013	0.016	0.016
45-49	0.008	0.008	0.004	0.004	0.007	0.008
TFR 15-44	4.944	5.746	4.459	6.357	4.823	5.839
TFR 15-49	4.986	5.788	4.481	6.378	4.861	5.876
GFR	190.9 186.8		6.8	189.8		
BSUP CBR based on household birth record (<i>De jure</i>)	40	0.0	40).5	40).1

Note: Rates from BSUP are for the period 1 - 24 months before the interview except for the CBR from the household birth record which is based on the period 1 - 24 months before the interview. Rates for the age group 45 - 49 might be slightly biased due to truncation.

TFR: Total Fertility Rate for ages 15 - 44 and 15 - 49, expressed per woman.

GFR: General Fertility Rate (births/number of women 15 - 49), expressed per 1000 women.

CBR: Crude Birth Rate, expressed per 1000 population.

The ASFR among the women of 15-44 years in Jalaun has been computed at 4.823. The corresponding figure in the age group of 15-49 years is 4.861. The ASMFR in the same age group has been found to be 5.839 and 5.876 (in 15-44 years and 15-49 years). The rural-urban differential has been found to be marginal.

The CBR based on the household birth has been found to be 40.1. In the rural areas the CBR is 40 and 40.5 in the urban areas.

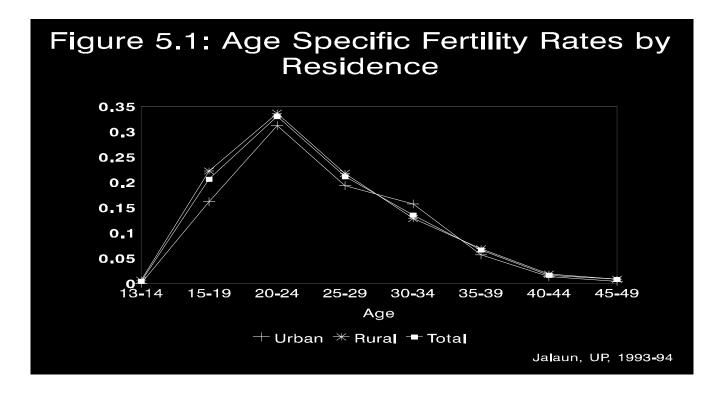


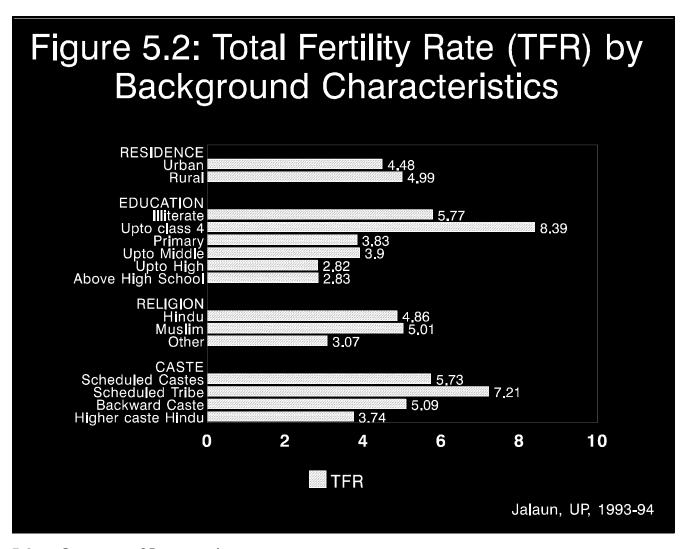
Table 5.2 gives the fertility by the background characteristics of the women (15-49 years). The table shows mean number of children ever born to women aged 40-49 years and the total fertility rate for women under 15-49 age group. As can be seen from the table, the mean number of children ever born varies from 6.48 in rural to 5.97 in the urban areas. With respect to the educational levels, it declines with the increase in the level of education.

Table 5.2: Fertility by background characteristics

Background characteristics	Total fertility rate*	Mean number of children ever born to women aged 40-49 years
Residence		
Rural	4.986	6.48
Urban	4.481	5.97
Education		
Illiterate	5.771	6.66
Upto class 4	8.386	5.64
Primary	3.826	5.95
Upto middle	3.902	4.83
Upto high	2.823	4.57
Above high school	2.831	4.43
Religion		
Hindu	4.858	6.34
Muslim	5.011	6.55
Others	3.073	4.00
Caste		
Scheduled caste	5.732	6.57
Scheduled tribe	7.206	6.08
Backward caste	5.092	6.66
Higher caste Hindu	3.741	5.70
Other religious group	4.991	6.52
Total	4.861	6.36

^{*} Rate for women aged 15-49 years

As regards the religion, both Hindus and Muslims share identical figures, i.e. 6.34 and 6.55, respectively. Among the various caste groups, it varies from 5.7 among the higher caste groups to 6.66 among the backward castes.



5.2 Outcome of Pregnancies

Table 5.3 shows the outcome of all pregnancies ever married women have had during last two years by age of mother and place of residence at the time of the survey.

The table shows that of all the pregnancies, about 83 percent are live birth. Among the wasted pregnancies, about one percent each are spontaneous abortions and stillbirth, while less than one percent are induced abortions. Another 15 percent are currently pregnant. This trend is similar across the rural and urban areas.

Table 5.3: Outcome of pregnancy

Current		Outcome of p	regnanc _.	у		Total	
Age	Spontaneous abortion	Induced abortion	Still birth	Live birth Cu	rrently Pregnant	%	pregnancies ('00s)
Rural							_
13-19	0.6	0.7	2.5	76.3	19.8	100.0	14970
20-24	0.2	-	0.5	84.6	14.8	100.0	43223
25-29	0.6	-	1.4	83.1	14.8	100.0	32236
30-49	2.4	1.2	0.4	86.7	9.3	100.0	24984
Total	0.9	0.4	1.0	83.5	14.3	100.0	115413
Urban							
13-19	3.8	-	-	72.3	23.9	100.0	3143
20-24	-	-	-	77.3	22.7	100.0	12666
25-29	3.0	1.9	0.9	81.8	12.4	100.0	10349
30-49	1.2	8.0	4.1	85.6	8.3	100.0	9466
Total	1.5	0.7	1.3	80.4	16.0	100.0	35623
Total							
13-19	1.2	0.5	2.1	75.6	20.5	100.0	18113
20-24	0.2	-	0.4	82.9	16.6	100.0	55889
25-29	1.2	0.5	1.3	82.8	14.2	100.0	42584
30-49	2.1	1.1	1.4	86.4	9.0	100.0	34451
Total	1.0	0.4	1.1	82.8	14.7	100.0	151036

5.3 Children Ever Born and Living

The number of children ever born is presented in Table 5.4 both for ever married and currently married women by place of residence and age of the mothers.

Table 5.4: Number of live births and living children by age of mother

Number of live births and			A	ge of the	mother	-			Total %	Total
living children	13-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49		Number
Rural										
Number of live births										
0	4.6	57.6	24.3	3.9	3.8	2.4	1.6	1.3	100.0	24487
1	-	30.6	52.9	10.4	3.0	1.0	1.0	1.0	100.0	29638
2	-	8.4	45.6	30.5	7.1	4.5	2.3	1.6	100.0	32823
3	-	0.5	25.9	38.4	17.9	7.5	6.0	3.7	100.0	35402
4	-	0.9	10.8	33.5	23.3	16.2	10.1	5.1	100.0	28674
5	-	0.5	4.8	21.4	24.8	25.6	8.7	14.2	100.0	22860
6	-	-	0.6	12.3	25.6	26.6	17.7	17.2	100.0	16669
7	-	0.7	-	10.0	23.3	16.8	20.3	28.8	100.0	13519
8	-	-	-	4.3	11.6	21.9	30.6	31.5	100.0	8925
9	-	-	-	1.8	10.2	21.5	27.8	38.7	100.0	5328
10 or more	-	-	1.2	1.2	6.3	17.9	22.3	51.1	100.0	7725
Mean	-	0.66	1.84	3.33	4.51	5.33	6.05	6.87	3.67	-
SD	-	0.91	1.24	1.57	2.04	2.31	2.90	2.72	2.74	

Number of live births and			A	ge of the	mothe	-			Total %	Total
living children	13-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49		Number
Urban										
Number of live births										
0	-	45.8	31.9	7.9	2.1	2.3	7.4	-	100.0	8096
1	-	17.7	59.3	19.5	8.0	1.4	-	1.4	100.0	6896
2	-	6.3	37.9	33.2	10.1	5.0	4.0	3.5	100.0	12627
3	-	1.1	22.3	44.3	20.2	7.2	3.6	1.4	100.0	9017
4	-	-	16.0	30.3	21.3	13.8	10.9	7.7	100.0	8532
5	-	-	1.7	20.9	36.7	11.9	23.4	5.4	100.0	8070
6	-	-	8.0	6.5	27.5	18.1	31.3	8.6	100.0	4784
7	-	-	-	1.5	24.5	22.1	14.4	37.5	100.0	4036
8	-	-	-	8.6	-	36.0	9.2	46.2	100.0	2448
9	-	-	-	-	-	-	29.8	70.2	100.0	789
10 or more	-	-	-	-	-	24.9	41.3	33.8	100.0	1820
Mean	_	0.53	1.83	2.96	4.32	5.33	5.38	6.73	3.54	_
SD	-	0.79	1.37	1.50	1.59	2.50	2.81	2.57	2.60	-
Number of living children										
0	-	45.1	30.3	9.6	2.8	1.9	8.1	_	100.0	9565
1	-	11.7	48.2	20.7	4.7	3.1	4.4	7.2	100.0	10026
2	-	1.9	41.0	36.1	10.1	5.5	4.7	0.9	100.0	12712
3	_	0.9	14.2	35.9	23.6	9.8	9.6	6.0	100.0	10328
4	-	-	9.2	23.9	25.7	15.3	16.4	9.5	100.0	10361
5	-	-	-	16.8	29.7	9.4	19.2	24.9	100.0	7529
6	_	_	-	_	26.6	29.2	18.5	25.6	100.0	3995
7	-	-	-	_	_	32.2	32.0	35.8	100.0	1233
8	_	_	-	_	_	78.9	21.1	_	100.0	563
9	_	_	-	_	_	34.2	45.8	20.0	100.0	348
10 or more	-	-	-	-	-	34.8	34.8	30.4	100.0	458
Mean	_	0.33	1.53	2.57	3.70	4.51	4.01	4.57	2.84	_
SD	_	0.64	1.09	1.31	1.44	2.19	2.41	1.93	2.07	-

Number of live births and			Ag	ge of the	mothe	-			Total %	Total
living children	13-14	15-19	20-24	25-29	30-34	35-39	40-44	45-49		Number
Number of living children										
0	2.9	51.9	28.4	5.5	3.6	2.8	3.0	1.0	100.0	38845
1	-	22.1	48.5	16.3	3.3	3.4	2.3	4.2	100.0	45498
2	-	3.0	38.0	33.2	9.8	7.1	4.7	4.2	100.0	57912
3	-	0.5	14.2	32.8	21.5	12.8	9.2	9.0	100.0	55832
4	-	0.2	5.4	22.1	26.2	17.9	15.5	12.8	100.0	44682
5	-	-	0.3	13.0	25.0	19.4	19.8	22.5	100.0	26926
6	-	0.7	-	3.2	21.5	27.0	21.9	25.7	100.0	13903
7	-	-	-	3.4	9.0	27.7	21.5	38.4	100.0	6186
8	-	-	-	-	11.7	32.7	29.9	25.7	100.0	1902
9	-	-	-	-	-	22.4	16.9	60.7	100.0	533
10 or more	-	-	-	-	-	29.9	44.0	26.1	100.0	533
Mean	-	0.47	1.52	2.65	3.58	3.95	4.10	4.30	2.73	-
SD	<u> </u>	0.73	1.03	1.23	1.45	1.82	2.05	1.91	1.91	-

The table shows that in urban areas, the mean number of live births is 3.54 as against 3.67 in the rural areas. With respect to age of the mother, the mean number of live birth increases from 0.53 (15-19 years) to 6.73 (45-49 years) in the urban areas. Correspondingly, in the rural areas, it ranges from 0.66 (15-19 years) to 6.87 (45-49 years).

With respect to the mean number of living children, it is 2.84 in the urban areas, as against 2.69 in the rural areas. The age wise distribution shows an increase in the mean number of living children with the increase in the age of the mothers. In urban areas, it ranges from 0.33 (15-19 years) to 4.57 (45-49 years), while in rural areas it is between 0.5 (15-19 years) to 4.23 (45-49 years).

Differentials in the mean number of children ever born and children still living by background characteristics are shown in Table 5.5.

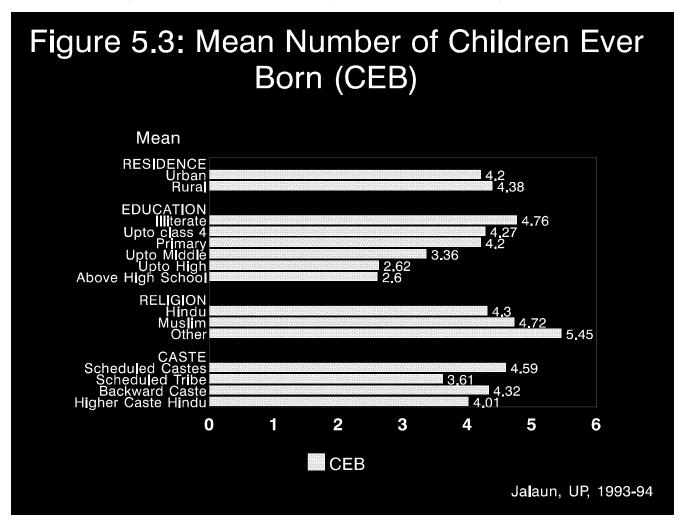
The table shows that in all there are 4.34 children ever born and of which 3.33 are living. This figure in the rural area is 4.38 (ever born) and 3.30 (living) and 4.2 (ever born) and 3.44 (living) in the urban areas.

Table 5.5: Mean number of children ever born and living by background characteristics

Background characteristics	Child	ren ever born		Chi	ildren living	
Currently married	Male	Female	Total	Male	Female	Total
Age						
13-19	0.78	0.73	1.51	0.57	0.57	1.14
20-24	1.29	1.20	2.49	1.08	1.02	2.10
25-29	1.89	1.74	3.63	1.65	1.38	3.03
30-39	2.67	2.47	5.14	2.11	1.92	4.03
40-49	3.50	3.14	6.64	2.45	2.05	4.50
Residence						
Rural	2.32	2.06	4.38	1.79	1.51	3.30
Urban	2.11	2.09	4.20	1.75	1.69	3.44
Education						
Illiterate	2.51	2.25	4.76	1.90	1.60	3.50
Upto class 4	2.23	2.04	4.27	1.74	1.66	3.40
Primary	2.09	2.11	4.20	1.74	1.67	3.41
Upto middle	1.85	1.51	3.36	1.59	1.31	2.90
Upto high	1.29	1.33	2.62	1.23	1.25	2.48
Above high school	1.31	1.29	2.60	1.23	1.17	2.40
Religion						
Hindu	2.25	2.05	4.30	1.74	1.52	3.26
Muslim	2.49	2.23	4.72	2.10	1.84	3.94
Others	3.12	2.33	5.45	2.02	1.73	3.75
Caste						
Scheduled caste	2.37	2.22	4.59	1.73	1.53	3.26
Scheduled tribe	1.85	1.76	3.61	1.63	1.47	3.10
Backward caste	2.29	2.03	4.32	1.76	1.51	3.27
Higher caste Hindu	2.08	1.93	4.01	1.74	1.51	3.25
Others	2.50	2.23	4.73	2.10	1.84	3.94
Total	2.27	2.07	4.34	1.78	1.55	3.33

Note: The means are standardized on the age distribution of all currently married women of NFHS age structure for the state (take the NFHS age structure from the preliminary report of NFHS)

The number of ever born children decreases with the increase in the level of education of the mothers. The number of ever born children is slightly higher in Muslims (4.72) than their Hindu counterparts (4.30). Further, the number of ever born children is lowest among the higher caste (4.01) and highest for scheduled caste (4.59) (the figure for scheduled tribe can't be considered as a good estimate because of very few number of unweighted cases).



CHAPTER VI

FAMILY PLANNING

Information about knowledge of family planning and the use of contraceptive methods is of practical use to policy makers and programme administrators for formulating policies and strategies. This chapter begins with an appraisal of the knowledge of contraceptive methods and sources of supply of modern contraceptive methods before moving on to a consideration of current and past practice of family planning. Special attention is focussed on nonuse, reasons for discontinuation, and intention to use family planning in the future. The chapter continues with information on exposure to media coverage on family planning and concludes with an analysis of attitudes toward birth control.

6.1 Knowledge of Family Planning Methods and Sources

Each respondent was asked about the various ways or methods that a couple can use to delay or avoid a pregnancy. Which ways or methods have you heard about? The respondent was first asked to name all the methods she knew or had heard of, without any prompting. Then, the interviewer read out the name and a short description of each method not mentioned and asked if she knew the method. Thus the woman's knowledge of contraception was measured at three levels: (a) methods the woman thinks of on her own (she can identify them spontaneously without probing), (b) methods she knows of when asked specifically about them (she recognizes the method after probing), and (c) methods which she has not heard of.

Seven modern methods - the pill, IUD, injection, jelly, condoms, female sterilisation and male sterilisation - were included, as well as two traditional methods, periodic abstinence (or the rhythm method) and withdrawal. Any other methods mentioned by the respondent, such as herbs and breast feeding, were also recorded.

For each modern method known to the respondent, either spontaneously or after probing, she was asked if she knew where a person could go to get the method. If she reported knowing about the rhythm method, she was asked if she knew where a person could obtain advice on how to use the method.

Table 6.1 presents the extent of knowledge separately as assessed by spontaneous responses (without any probe) and probed responses.

The knowledge of family planning is very high in Jalaun, with 91 and 80 percent of the respondents in the urban and rural areas, respectively, reporting knowledge of at least one modern method of family planning.

Knowledge about female sterilisation was most widespread. This was true for rural as well as urban areas. In comparison, the three officially sponsored spacing methods were much less familiar to respondents. The most well known among the spacing methods were condoms (42% in rural and 59% in urban areas) and pills (31% in rural and 51% in urban areas). Spacing method is more popular among the urban women (73%) than their rural counterparts (55%).

On probing, the level of knowledge went up drastically. This time, all those interviewed could recognise "vasectomy" in both rural and urban areas. This was followed by 98 percent in urban areas and 95 percent in rural areas for tubectomy, condom (91% and 83% in urban and

rural, respectively), pills (84% and 73% in urban and rural areas, respectively), loop (85% and 68% in urban and rural areas, respectively).

The overall knowledge level in urban areas went up from 91 percent to about 99 percent. In rural areas, it went up from 80 percent to 96 percent. Further analysis on the level of knowledge of how to use the method shows that for any modern method, 94 percent in urban and 89 percent in rural areas knew how to use them.

In urban areas, 81 percent know how to use a condom (70% in rural areas), while about 80 percent know about tubectomy (79% in rural areas). Rest of the methods were also quite popular as far as the knowledge of use is concerned.

On the knowledge of the source of the methods, 97 percent urban respondents and 93 percent of rural respondents are aware of the source for atleast one modern method. About 95 percent of the urban respondents, are also aware of the place where tubectomy can be done. Correspondingly, in rural areas, 90 percent women knew about it. Among the other modern methods, source for getting condom was reported by large majority of the respondents (77% in urban and 70% in rural areas). Knowledge about the source of other methods varies from about 40 to over 70 percent in both rural and urban areas.

The table further analyses the ever usership of a method. It shows that 37 percent in rural and 45 percent in urban areas have had used atleast one modern method of F.P. Tubectomy was reported by a large number of women in rural areas (22%), while use of condom was highest in the urban areas (26%).

There appears a vast difference between the usership pattern in rural and urban areas, as far as modern spacing methods are concerned. The usership was almost double in urban areas (32%) than in the rural areas (18%). Thus, efforts to popularise the spacing methods should be specifically geared up in the rural areas.

For injectable, the total awareness level (spontaneous + aided) prima facie seems unusually high, given our common knowledge of this method and its prevalence in India. A closer look reveals the spontaneous awareness to be only at the level of around 19%. The ever use figure is negligible. These two would be true reflections of the obtaining ground reality.

A possible explanation could be that the respondents found the description (in the questionnaire) of injection (as a FP method) plausible, and given their association of injection (TT) with pregnancy, might have "erroneously" responded yes, mainly because of confusion. The exact description in the questionnaire is : "Women can be given injection by doctor or nurse. This would prevent conception for a few months".

Hence, the actual level of awareness of injectable is likely to be markedly of a lower order.

Table 6.1: Knowledge of family planning methods (Perc										
Method	Sponta- neous	Sponta- neous + Probing	Knows how to use correctly	Knows how to use correctly & to some extent	Knows a source	Percentage ever used the method				
Rural										
Vasectomy	22.0	79.5	29.5	42.0	65.4	1.3				
Tubectomy	60.9	95.0	78.7	86.5	89.8	22.0				
Loop/CUT	27.4	68.4	45.2	52.7	57.1	3.3				
Pills	31.0	72.9	34.7	50.5	58.5	3.4				
Condom	41.6	82.9	70.3	75.8	70.3	14.9				
Foam Tab/Jelly	0.9	6.6	3.6	4.5	4.4	0.2				
Injection	19.3	61.2	29.1	41.4	39.0	0.3				
Withdrawal	7.5	49.1	45.7	47.6	0.0	15.4				
Rhythm/Safe period	14.8	69.9	64.4	68.2	0.0	29.1				
Knows at least one modern method	80.2	96.3	89.4	92.9	92.7	37.2				
At least one modern spacing method	55.1	90.0	77.6	84.3	81.1	17.8				
Mean of modern methods known	2.032	4.665	2.912	3.535	3.845	0.453				
Mean of modern spacing methods known	1.202	2.921	1.829	2.250	2.294	0.221				
Urban										
Vasectomy	23.4	89.3	16.6	38.6	77.7	0.7				
Tubectomy	67.7	97.9	79.7	90.2	94.8	17.8				
Loop/CUT	46.0	84.5	58.9	69.1	76.3	8.6				
Pills	50.8	84.3	30.7	52.7	67.1	5.5				
Condom	58.9	90.6	81.3	85.1	76.5	26.2				
Foam Tab/Jelly	1.1	13.5	6.7	9.1	9.5	0.2				
Injection	17.9	71.9	20.6	39.8	42.6	0.2				
Withdrawal	5.3	49.2	45.7	47.5	0.0	11.7				
Rhythm/Safe period	16.4	83.4	67.2	76.7	0.0	28.5				
Knows at least one modern method	91.1	98.8	93.7	96.7	97.0	44.6				
At least one modern spacing method	73.0	95.2	86.7	91.8	88.7	32.2				
Mean of modern methods known	2.658	5.320	2.945	3.846	4.444	0.592				
Mean of modern spacing methods known	1.747	3.448	1.981	2.558	2.719	0.407				

Table 6.2 gives the knowledge of methods and source by the background characteristics of the women. The table shows that the level of knowledge of atleast one method was fairly uniform in all the age groups of women. However, the knowledge is slightly less in the youngest cohort, i.e. 13-19 years. This was also true for those women who have knowledge of atleast one spacing method.

Level of education seems to have nothing much to do with the level of knowledge (for atleast one modern method or atleast one spacing method). As can be seen from the table, the level of knowledge does not provide with any clear association. This is probably because the exposure to Family Planning messages is universal, irrespective of caste, creed, religion, education or other such background of the respondents. This is reflected as we compare the level of knowledge between various religious and caste groups.

The table further shows the mean number of modern methods reported by respondents. Among the women of different age groups, 4-5 methods have been mentioned. In rural areas, the mean is 4.7, while it is 5.3 in the urban areas. The mean number of methods reported vis-a-vis the education level of the women does not vary drastically. The mean ranges from 4.5 to 6.

Religion, it appears, has practically no association with the number of methods known. In both the Hindus and Muslims, the mean number of methods known is around 5.

Table 6.2: Knowledge of methods and source by background characteristics

Background characterist		Knows at least one modern method	one modern	Average number of modern methods known	Average number of sources for of modern method	Number women
Age	13-19	91.3	84.7	4.08	4.40	33309
_	20-24	97.3	93.5	4.87	5.53	64802
	25-29	97.8	94.0	5.10	5.59	60536
	30-49	97.8	90.3	4.84	5.20	122991
Residence	Rural	96.3	90.0	4.67	5.03	218087
	Urban	98.8	95.2	5.32	6.07	63551
Education						
Illiterate		95.8	87.8	4.48	4.42	172534
Upto class 4	ļ	99.0	95.5	5.09	5.74	20903
Primary		98.8	95.0	5.13	6.14	32367
Upto middle	9	97.8	96.3	5.33	6.37	31343
Upto high		100.0	100.0	5.71	7.47	11791
Above high	school	99.2	99.2	5.98	8.88	12700
Religion	Hindu	97.1	91.7	4.82	5.29	252435
_	Muslim	95.0	86.4	4.76	5.01	28336
	Others	100.0	100.0	5.22	6.19	866
Caste						
Scheduled of	caste	95.9	90.2	4.55	4.50	67714
Scheduled t	ribe	100.0	96.2	4.77	4.62	5502
Backward ca	aste	96.9	91.0	4.71	5.03	111917
Higher caste	e Hindu	98.3	93.9	5.28	6.56	67303
Other religion		95.1	86.7	4.77	5.03	29202
Total		96.9	91.2	4.81	5.26	281638

On the basis of the respondents, caste, it ranges from 4.5 to 5.3 among various caste groups

Similarly, on the knowledge of the source for modern methods, there seems to be a little variation with respect to the age of the woman, her educational status, religion and caste. However, there is a slight variation in knowledge between the rural and urban respondents (5 and 6, respectively). There is a steady increase in the level of knowledge with increase in the level of education. As regards religion, it ranges from 5 among Muslims to 6.19 among the other religious groups. The corresponding figure for Hindus is 5.29.

6.2 Contraceptive Use

Ever Use of Family Planning Methods

All respondents who knew at least one method of family planning were asked whether they have ever used any of the methods they knew. The use of contraception was further probed by asking whether they "ever used anything or tried in any way to delay or avoid getting pregnant". Table 6.3 presents the pattern of ever use by age and residence.

Table 6.3 Ever use of contraception

Method	Any method	Any modern method	Male steriliz- ation	Female Cu steriliz- ation	u-T/IUD		Condom or Nirodh	Jelly lı	njection s	Tradi-Wi tional method	thdrawal	Periodic absti- nence	Other Tradi- tional	Number of women
Rural														
13-19	30.2	15.1	-	1.0	1.4	1.7	12.8	0.4	0.3	22.6	10.8	15.2	-	27610
20-24	46.0	24.9	-	4.2	3.0	3.8	18.4	-	0.3	32.1	13.8	27.1	-	50007
25-29	58.2	38.3	-	19.1	4.9	5.9	18.2	0.5	0.4	36.2	18.4	32.6	0.2	45513
30-39	69.6	50.6	1.3	38.2	3.8	2.9	15.2	-	0.4	39.2	18.3	34.7	0.5	56721
40-44	71.8	52.4	3.6	45.6	2.8	2.0	7.9	-	-	38.3	13.6	32.4	-	18305
45-49	62.9	44.4	6.7	34.1	1.4	1.5	7.1	0.6	0.5	31.8	12.6	26.2	1.1	19931
Total	56.4	37.2	1.3	22.0	3.3	3.4	14.9	0.2	0.3	34.1	15.4	29.1	0.3	218087
Urban														
13-19	35.9	21.4	-	-	5.5	2.4	18.4	-	-	18.3	9.8	11.5	-	5699
20-24	44.2	28.5	-	1.5	4.4	2.7	25.4	0.5	-	35.0	5.8	33.4	-	14795
25-29	62.9	50.1	-	13.3	15.8	4.6	33.4	-	-	36.0	15.6	30.1	-	15023
30-39	73.1	53.9	0.7	28.8	8.0	10.4	26.6	0.5	0.6	38.2	13.0	33.9	-	16482
40-44	73.8	62.2		46.7	3.0	7.1	21.4	-	-	33.0	15.6	22.5	-	5870
45-49	63.1	50.5	5.3	28.4	10.9	2.1	21.1	-	-	24.0	10.6	18.6	1.7	5682
Total	59.8	44.6	0.7	17.8	8.6	5.5	26.2	0.2	0.2	33.4	11.7	28.5	0.2	63551
Total														
13-19	31.2	16.2	-	0.9	2.1	1.8	13.8	0.3	0.3	21.9	10.6	14.6	-	33309
20-24	45.6	25.7	-	3.6	3.3	3.6	20.0	0.1	0.2	32.8	12.0	28.6	-	64802
25-29	59.4	41.2	-	17.7	7.6	5.6	22.0	0.4	0.3	36.2	17.7	32.0	0.2	60536
30-39	70.4	51.3	1.2	36.1	4.8	4.6	17.8	0.1	0.5	39.0	17.1	34.5	0.4	73203
40-44	72.3	54.7	2.7	45.9	2.8	3.2	11.2	-	-	37.0	14.1	30.0	-	24175
45-49	63.0	45.7	6.4	32.9	3.5	1.6	10.2	0.5	0.4	30.1	12.1	24.5	1.3	25613
Total	57.2	38.9	1.1	21.0	4.5	3.8	17.5	0.2	0.3	33.9	14.6	28.9	0.3	281638

In all, about 39 percent reported that they have ever used atleast one of the modern methods. The usership is 37 percent in rural and 45 percent in the urban areas.

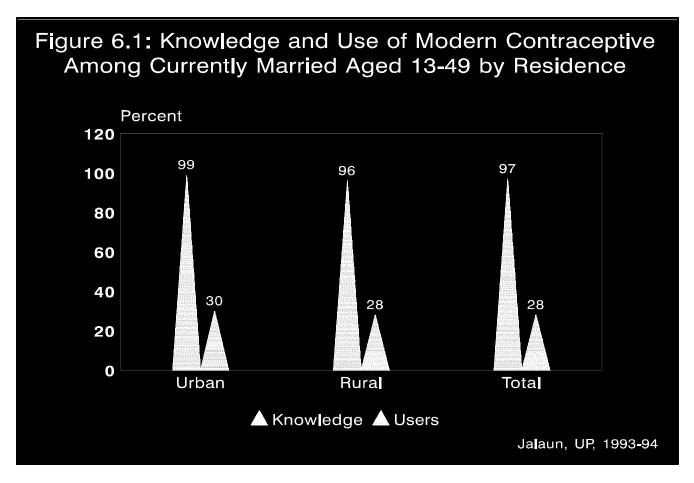
Among all the modern methods, female sterilization is highest (21%), followed by condoms (18%), IUD (5%), pills (4%) and male sterilization (1%).

The usership increases with the increase in the age of the respondent. However, a large proportion of the younger couples, below 30 years, have used condom. Female sterilization is higher among older women (above 30 years). IUD and Oral Pills have been more popular among the women in the age group of 20-44 years. Among the traditional methods, periodic abstinence has been used by about one-third women (29%), both in rural and urban areas. Withdrawal is more popular in the rural areas (15%) than in the urban areas (12%).

Current Use of FP Methods

Table 6.4 gives the current use of contraceptives. The table shows that 40 percent women belonging to 13-49 years age group are currently using any method of F.P. (modern or traditional). Of these, 28 percent are currently using atleast one modern method while 12 percent are using atleast one traditional method. Of the modern methods, about 21 percent have undergone tubectomy followed by condom (5 percent), male sterilization and IUD (1 percent each) and oral pills (less than one percent).

Among the traditional methods, periodic abstinence accounted for 7 percent and withdrawal (3 percent). The rural-urban distribution shows that 39 percent in rural areas and 43 percent in urban areas were currently using atleast one modern method.



Remaining 11 percent in rural areas and 13 percent in urban areas were using atleast one traditional method. As usual female sterilization is highest both among rural and urban areas.

Table 6.5 presents the current usership by their background characteristics. The table shows direct association between the level of education and the usership pattern. That is, with the increase in educational level, there is an increase in usership.

As far as the various religious groups are concerned the Hindus are ahead (41 percent) of their Muslim counterparts (32 percent). Others accounted for 55 percent. As expected about half of the women from higher castes are using atleast one method followed by backwards castes, scheduled tribes and other caste groups. Again, female sterilization has been found to be most popular (about one third) among women having educational level upto middle school, while IUD and pills are most popular among women with higher education.

Table 6.4: Current use of contraceptives

Age	Any method	Any modern method			Cu-T/ IUD	Pill	Condom or Nirodh	Jelly	Any traditional method	Withd- rawal	Periodic abstinence i	Other methods	Not using any method	Number of women
Rural														
13-19	17.1	6.6	-	1.0	0.3	0.7	4.5	-	10.6	5.0	5.2	0.3	82.9	27610
20-24	22.9	11.0	-	4.2	0.7	8.0	5.3	-	11.9	3.6	6.9	1.5	77.1	50007
25-29	39.4	26.0	-	19.1	1.6	0.4	4.9	-	13.3	4.1	7.7	1.5	60.6	45513
30-39	55.5	43.2	0.9	37.9	8.0	0.5	3.2	-	12.2	3.4	7.2	1.7	44.5	56721
40-44	56.4	49.6	3.6	45.0	-	0.4	0.6	-	6.8	2.4	3.9	0.5	43.6	18305
45-49	46.2	40.7	6.3	32.5	0.5	-	1.4	-	5.5	-	4.3	1.1	53.8	19931
15-44	38.5	26.8	0.6	20.7	0.8	0.6	4.1	-	11.7	3.8	6.7	1.3	61.5	197020
15-49	39.2	28.1	1.1	21.8	8.0	0.5	3.8	-	11.1	3.4	6.5	1.3	60.8	216951
13-49	39.0	27.9	1.1	21.7	8.0	0.5	3.8	-	11.1	3.4	6.5	1.3	61.0	218087
Urban														
13-19	27.5	21.4	-	-	3.1	2.4	15.9	-	6.1	3.1	3.1		72.5	5699
20-24	28.2	13.2	-	1.5	2.0	1.7	7.6	0.4	15.1	0.5	13.8	1.4	71.8	14795
25-29	39.4	27.5	-	13.3	2.0	1.3	11.0	-	11.9	5.4	6.5		60.6	15023
30-39	55.1	39.0	0.7	28.8	0.5	0.7	8.2	-	16.1	1.4	14.7	0.5	44.9	16482
40-44	67.3	48.6	-	46.7	-	-	1.9	-	18.7	9.6	9.0		32.7	5870
45-49	46.5	40.3	5.3	27.3	6.8	-	1.0	-	6.2	-	6.2		53.5	5682
15-44	42.7	28.7	0.2	16.8	1.5	1.2	8.9	0.1	14.0	3.2	10.6	0.5	57.3	57869
15-49	43.0	29.7	0.7	17.7	1.9	1.1	8.2	0.1	13.3	2.9	10.2	0.5	57.0	63551
13-49	43.0	29.7	0.7	17.7	1.9	1.1	8.2	0.1	13.3	2.9	10.2	0.5	57.0	63551
Total														
13-19	18.9	9.1	-	0.9	8.0	1.0	6.4	-	9.8	4.7	4.8	0.2	81.1	33309
20-24	24.1	11.5	-	3.6	1.0	1.0	5.8	0.1	12.6	2.9	8.5	1.5	75.9	64802
25-29	39.4	26.4	-	17.7	1.7	0.6	6.4	-	13.0	4.4	7.4	1.1	60.6	60536
30-39	55.4	42.3	0.8	35.8	0.7	0.6	4.3	-	13.1	2.9	8.9	1.4	44.6	73203
40-44	59.0	49.3	2.7	45.4	_	0.3	0.9	-	9.7	4.1	5.2	0.4	41.0	24175
45-49	46.3	40.6	6.0	31.3	1.9	-	1.3	-	5.7		4.8	0.9	53.7	25613
15-44	39.4	27.2	0.5	19.8	1.0	0.7	5.2	0.0	12.2	3.6	7.6	1.1	60.6	254889
15-49	40.1	28.4	1.0	20.9	1.0	0.7	4.8	0.0	11.6	3.3	7.3	1.1	59.9	280501
13-49	39.9	28.3	1.0	20.8	1.0	0.7	4.8	0.0	11.6	3.3	7.3	1.1	60.1	2281638

Table 6.5: Current use of contraceptives by background characteristics

Background characteristics	Any method	Any I modern s method	teriliza	Femal e steriliz ation	Cu- T/IUD	Pill	Condom or Nirodh	Other modern method	Any W traditional method		Periodic abstinenc e		Not using N any method	lumber of women
Residence														
Rural	39.0	27.9	1.1	21.7	0.8	0.5	3.8	-	11.1	3.4	6.5	1.3	61.0	218087
Urban	43.0	29.7	0.7	17.7	1.9	1.1	8.2	0.1	13.3	2.9	10.2	0.5	57.0	63551
Education														
Illiterate	35.1	23.8	0.9	19.2	0.4	0.4	2.9	-	11.3	2.8	7.5	1.0	64.9	172534
Upto class 4	43.2	31.7	0.6	24.9	1.1	0.7	4.5	-	11.4	3.4	7.0	1.0	56.8	20903
Primary	49.3	38.1	1.6	28.9	1.8	-	5.8	-	11.3	4.9	6.0	0.3	50.7	32367
Upto middle	47.4	35.1	1.4	23.3	2.3	1.7	6.2	0.2	12.3	4.0	7.5	1.4	52.6	31343
Upto high	46.2	32.0	0.8	13.9	2.3	2.5	12.4	-	14.2	4.0	8.4	1.8	53.8	11791
Above high school	51.3	38.8	-	15.0	3.2	2.0	18.6	-	12.6	3.3	7.2	2.6	48.7	12700
Religion														
Hindu	40.8	29.2	1.0	22.0	0.9	0.6	4.6	0.0	11.7	3.3	7.3	1.2	59.2	252435
Muslim	31.7	20.8	0.9	9.4	2.3	1.1	7.1	-	10.9	3.5	6.8	0.6	68.3	28336
Others	55.3	39.8	-	39.8	-	-	-	-	15.5	-	15.5	-	44.7	866
Caste														
Scheduled caste	32.9	21.3	0.7	15.4	0.6	0.9	3.6	0.1	11.6	3.5	7.3	0.7	67.1	67714
Scheduled tribe	35.2		-	17.0	-	-	8.2	-	9.9	5.1	3.0	3.6	64.8	5502
Backward caste	39.1	26.8	0.6	21.2	0.7	0.5	3.8	-	12.3	2.6	8.5	1.2	60.9	111917
Higher caste Hindu	52.3	41.3	2.1	30.4	1.7	0.7	6.5	-	11.0	4.0	5.8	1.2	47.7	67303
Other religious groups	32.2	21.2	0.8	10.1	2.2	1.1	6.9	-	11.0	3.4	7.0	0.6	67.8	29202

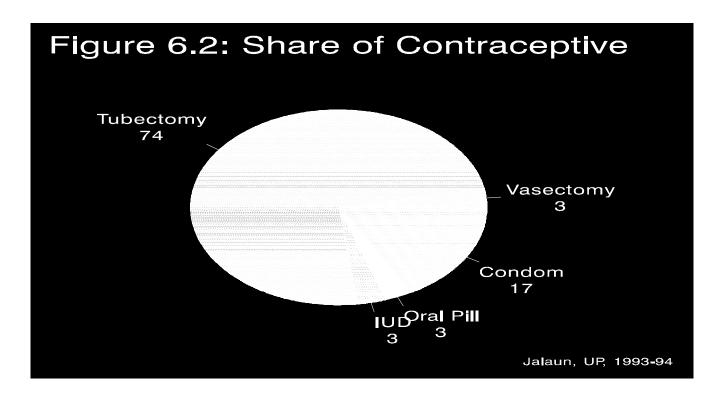


Table 6.6 gives the current use of contraceptives by sex composition of surviving children . Women with higher parity were mostly sterilized (either she or her husband) while others were using either modern spacing methods or traditional methods. The percentage increases with the number of living children in case of sterilization and traditional methods, while the use rate decreases after 2nd child for modern spacing methods.

Table 6.6: Current use of contraceptive by sex composition of surviving children

Number and sex of living children	Sterilization	Modern spacing method	Any traditional method	Not using any method	Total percent Num	ber of women
None	-	3.5	5.6	91.0	100.0	36921
1 child	2.4	8.8	13.9	74.9	100.0	44082
1 son	4.2	10.8	13.7	71.2	100.0	25403
No son	-	6.0	14.1	79.9	100.0	18678
2 children	16.6	9.5	10.9	63.0	100.0	56505
2 sons	34.6	11.0	8.7	45.6	100.0	17288
1 son	11.6	9.4	13.7	65.3	100.0	29175
No son	-	7.0	6.4	86.5	100.0	10043
3 children	33.5	7.3	12.0	47.2	100.0	53528
3 sons	46.2	4.6	14.5	34.7	100.0	8398
2 sons	42.3	6.8	11.2	39.7	100.0	26752
1 son	17.7	10.2	10.4	61.7	100.0	15449
No son	-	4.7	20.8	74.4	100.0	2929
4+ children	36.4	4.4	13.2	46.0	100.0	90603
3+ sons	37.9	4.5	12.4	45.2	100.0	44567
2 sons	43.1	4.4	13.2	39.3	100.0	29856
1 son	23.2	5.1	17.1	54.5	100.0	13312
No son	5.1	-	5.8	89.1	100.0	2868
Total	21.8	6.5	11.6	60.1	100.0	81638

Table 6.7 gives the various problems encountered with the methods. In all, 38 percent reported to have faced problem with vasectomy. For tubectomy, 41 percent have faced problem. In case of IUD, 35 percent reported to have faced some sort of problem, while for pills 25 percent have faced problem.

Table 6.7: Percent reporting problem(s) faced with the method currently used

Method used	Percent face	d problem with the	method used
	Rural	Urban	Total
Vasectomy			
Tubectomy	0.0	44.8	38.1
Cu-T/IUD	40.8	41.3	41.2
Pill	30.3	37.9	34.8
Injectables	27.6	22.9	24.6

Table 6.8 shows the proportion reporting problems with various F.P. methods. As regards male sterilization, most of the respondents reported weakness (48%). In female sterilization, 48 percent reported abdominal pain, following backache (39 percent) and weakness (28 percent). A little less than one-third reported backache and abdominal pain as major problems with IUD. While half of the women consuming oral pills complained of excessive bleeding.

Table 6.8: Problems with the current method

Problem faced	Male sterilization	Female sterilization	Cu-T/IUD	Pills
Percent faced problem with the method	38.1	41.2	34.8	24.6
Type of problem faced				
Sepsis	10.1	4.0	-	-
Abdominal/gastric pain	11.7	48.1	29.9	11.8
Backache/body pain/headache	38.3	39.0	31.9	29.9
Weakness	47.7	28.0	7.5	-
Excessive or irregular bleeding	-	13.1	21.0	50.4
White discharge	-	12.8	25.1	-
Fear of failure	-	0.6	-	-
Problem in disposing	10.1	-	-	-
Infertility	-	0.5	-	-
Loss of sexual desire	-	0.5	-	-
Weight gain	-	0.6	-	-
Others	18.4	9.4	25.1	37.8
Total %	100.0	100.0	100.0	100.0

6.3 Level of Unmet Need

Table 6.9 gives the level of unmet need for F.P. services. The table shows that in rural areas 22 percent and in urban areas about 16 percent are the unmet need for spacing. The unmet need for limiting family size for non-pregnant women who are neither using any F.P. methods nor wanting any more child is about 20 percent in both rural and urban areas. With this the total unmet need for rural areas stands at 42 percent while that in the urban areas as 36 percent.

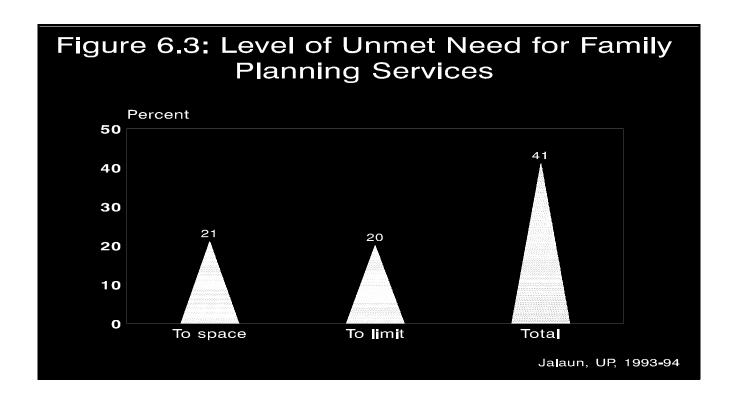
Table 6.9: Level of unmet need for family planning services

Background Characteristics	To space	To limit	Total	No. of women
Age				_
13 - 19	42.0	2.9	44.8	33309
20 - 29	29.6	14.0	43.7	125338
30 - 39	8.7	24.5	33.3	73203
40 - 49	1.8	40.3	42.2	49788
Residence				
Rural	22.2	19.9	42.1	218087
Urban	15.7	20.6	36.3	63551
Education				
Illiterate	21.7	23.6	45.3	172534
Upto class 4	18.9	17.8	36.7	20903
Primary	17.1	16.2	33.3	32367
Upto middle	19.6	13.6	33.2	31343
Upto high	23.9	7.9	31.9	11791
Above high school	19.8	12.7	32.5	12700
Religion				
Hindu	20.7	19.6	40.3	252435
Muslim	21.5	24.9	46.5	28336
Others	15.5	-	15.5	866
Caste				
Scheduled caste	23.7	22.4	46.1	67714
Scheduled tribe	30.3	9.8	40.1	5502
Backward caste	22.8	18.5	41.2	111917
Higher caste Hindu	13.5	19.3	32.8	67303
Other religious groups	21.4	24.4	45.8	29202
Number of living children				
None	32.8	3.8	36.6	36921
1	43.0	5.8	48.8	44082
2	28.5	15.5	44.0	56505
3	12.7	25.6	38.3	53528
4+	5.0	33.2	38.2	90603
Total	20.8	20.1	40.8	281638

The unmet need is more obvious among the illiterate and women having lower educational levels than those having higher education.

The unmet need was slightly more among the Muslims (47%) than their Hindu counterparts (40%).

The unmet need was comparatively higher among the scheduled castes and tribes and other backward castes.



With respect to the parity, women with one to two children are the targets for the unmet need for F.P. (44 to 49%).

Table 6.10 gives the reasons of the unmet need. Among the most frequently reported reasons, about one fifth said that they are going to use a F.P. method. This is true for rural as well as urban areas. This is also true for women below 30 years as well as above 30 years and above.

Table 6.10: Reasons of unmet need

Reasons of unmet need	Rural	Urban		Total	
			< 30 years	> 30 years	Total
Percent face problem with the method					
Going to use a FP method	17.4	27.7	15.0	19.4	22.3
Do not like existing method	9.1	9.5	9.0	9.2	9.3
Services are not available	1.1	1.2	1.0	1.1	1.3
After operation one can't work	0.2	-	0.2	0.2	0.2
Fear of operation	1.0	-	0.4	0.8	1.0
Health does not permit	2.1	1.1	2.1	1.9	1.7
Operation may fail	0.1	0.7	-	0.2	0.4
Currently pregnant	0.1	-	-	0.1	0.1
Fear of after effects of methods	2.4	0.3	1.8	2.0	2.1
Unaware of any FP method	2.6	0.7	2.1	2.2	2.3
Opposition from husband or other family members	4.3	4.2	2.7	4.3	5.2
Against religion	1.7	3.6	2.8	2.1	1.6
Natural sterility	7.3	8.1	18.5	7.4	0.3
MC stopped	13.2	11.2	19.1	12.8	8.7
Others	17.4	19.7	17.4	17.9	18.2
DK/Can't specify	9.9	8.8	9.9	9.7	9.5

6.4 Hindrances to the Acceptance of Family Planning

6.4.1 Perceived Disadvantages of the Methods

Table 6.11 gives the perceived disadvantages of various F.P. methods. For vasectomy 26 percent believe that the method has disadvantages. For tubectomy about 45 percent believed the method to have disadvantages.

Laparoscopy has been perceived disadvantages by about 38 percent. For IUD about 45 percent believe that the method has disadvantages. Proportionately a little more than one-fifth believe oral pills to have disadvantages. For condoms, a small proportion of 8 percent believed the method to have disadvantages.

The table further analysis the perceived disadvantages of various F.P. methods. In case of vasectomy 65 percent perceived `weakness' as a disadvantage. For tubectomy half of the women perceived abdominal pain as the major disadvantage while another 60 percent also reported abdominal pain as the major disadvantage for laparoscopy. In case of IUD about 62 percent reported excessive bleeding as the major disadvantage.

As regards pills about 28 percent perceived `weakness' as the major disadvantage. For condoms a large majority of about 46 percent expressed their fear about the failure of the method.

Further analysis of the table indicates that about 48 percent believed the said disadvantage to be permanent in nature for vasectomy. And 91 percent reported that they have heard this from others which makes the basis of their belief.

For tubectomy, 59 percent believed the disadvantage to be permanent in nature. And again the basis of the belief was "heard from others" (85 percent). For other methods, the proportion reported that they believed the said disadvantage to be permanent are 56 percent in laparoscopy, 57 percent IUD, 63 percent for pills and 74 percent in case of condoms.

In almost all the cases, the majority said the basis of their beliefs as "heard from others".

Table 6.11: Perceived disadvantages of the method

Table 6.11: Perceived d	Vasec-	Tubec-		Loop/Cu-	Oral Pill	Condom/
	tomy	tomy	roscopy	T/ IUD		Nirodh
Rural						
A % believed that method has some disadvantage	27.7	43.2	36.4	40.0	23.5	6.5
Total number aware of	173320	207175	207175	149270	159072	180784
B Nature of disadvantage						
Sepsis	12.8	15.6	4.6	12.1	0.3	1.6
Abdominal/gastric pain	15.0	48.8	57.1	8.9	4.7	1.8
Backache/body pain/headache	11.7	30.6	27.8	9.5	18.0	5.5
Weakness	66.2	32.7	20.4	9.8	27.8	8.6
Excessive or irregular bleeding	-	9.9	7.2	60.3	13.9	1.7
White discharge	0.6	2.6	2.9	11.3	2.6	3.2
Fear of failure	4.3	1.7	12.7	2.5	3.1	48.9
Problem in disposing	1.4	0.4	1.1	3.6	1.8	3.2
Infertility/secondary sterility	-	-	0.1	0.2	0.8	0.8
Loss of sexual desire	1.7	0.1	-	-	0.3	9.8
Weight gain	10.6	3.6	1.5	0.3	-	-
Others desire	8.8	4.4	7.5	14.5	47.3	22.7
Don't know/can't specify	1.8	0.4	0.6	0.7	0.3	-
Total %	100.0	100.0	100.0	100.0	100.0	100.0
C % believed disadv. to be permanent in nature	46.3	59.3	55.8	57.5	60.8	73.3
D Basis of this belief						
Own experience	4.4	23.9	18.4	9.3	12.4	32.4
Friends experience	20.1	22.5	19.3	24.9	18.2	16.3
Heard from friend	12.3	18.7	20.3	17.9	12.5	6.6
Heard from others	91.4	81.3	81.0	75.7	72.6	49.4
TV, radio, posters	1.0	0.3	-	0.4	0.3	-
Health personnel	0.2	1.6	-	0.3	0.3	-
Others	2.1	-	1.9	2.6	2.6	-
Total %	100.0	100.0	100.0	100.0	100.0	100.0
Total N	47944	89486	75505	59562	37414	11751
Hebon	21 5					
Urban A % believed that method has some disadvantage	21.5 56741	49.8	40.9	57.8	23.5	13.0
Total number aware of	00711	62230	62230	53698	53578	57603
	5.5	02200	02200	00070	000.0	0.000
B Nature of disadvantage	17.2					
Sepsis	7.6	18.1	2.3	9.4	0.4	-
Abdominal/gastric pain	59.8	57.5	64.8	5.4	1.0	0.8
Backache/body pain/headache	-	29.0	12.8	9.5	8.6	8.2
Weakness	-	13.2	11.0	8.1	26.6	11.6
Excessive or irregular bleeding	9.4	11.9	9.8	65.2	16.2	-
White discharge	-	4.3	0.9	16.9	3.9	15.4
Fear of failure	-	1.3	18.1	3.7	1.1	41.3
Problem in disposing	1.3	-	0.5	0.6	-	2.7
Infertility/secondary sterility	7.4	-	1.0	0.7	-	-
Loss of sexual desire	6.4	0.2	_	-	-	4.8
Weight gain	1.5	3.5	1.7	0.6	1.0	-
Others desire Don't know/can't specify	100.0	8.7 0.5	5.3 0.7	14.7 0.2	58.0 1.8	24.0
Don't knowleant specify	100.0	0.5	0.7	0.2	1.0	-
Total %		100.0	100.0	100.0	100.0	100.0

Disadvantages	Vasec- tomy	Tubec- tomy	Lapa- roscopy	Loop/Cu- T/ IUD	Oral Pill	Condom/ Nirodh
C % believed disadv. to be permanent in nature						
•	52.8	57.8	55.8	56.6	70.5	75.9
D Basis of this belief						
Own experience						
Friends experience	1.0	17.6	5.8	15.1	19.3	33.2
Heard from friend	4.3	10.2	5.7	8.9	5.6	2.0
Heard from others	12.4	17.7	18.3	14.4	10.6	21.9
TV, radio, posters	90.1	94.0	91.7	88.9	80.6	51.6
Health personnel	2.1	2.7	-	1.0	-	-
Others	6.1	3.1	4.8	3.1	1.1	-
Total %	100.0	100.0	100.0	100.0	100.0	100.0
Total N	12201	30979	25438	31038	12576	7477
Total		44.7				
A % believed that method has some disadvantage	26.2	269405	37.5	44.7	23.5	8.1
Total number aware of	230061		269405	202968	212650	238387
		16.2				
B Nature of disadvantage		51.0	4.0			
Sepsis	11.3	30.2	59.0	11.2	0.3	1.0
Abdominal/gastric pain	15.5	27.7	24.0	7.7	3.8	1.4
Backache/body pain/headache	10.0	10.4	18.0	9.5	15.6	6.5
Weakness	64.9	3.1	7.9	9.2	27.5	9.8
Excessive or irregular bleeding	_	1.6	2.4	61.9	14.5	1.0
White discharge	0.5	0.3	14.1	13.3	2.9	7.9
Fear of failure	5.4	_	1.0	2.9	2.6	45.9
Problem in disposing	1.3	0.1	0.4	2.6	1.4	3.0
Infertility/secondary sterility	1.6	3.6	_	0.4	0.6	0.5
Loss of sexual desire	9.9	5.5	1.5	-	0.3	7.8
Weight gain	8.4	0.4	7.0	0.4	0.3	-
Others desire	1.7		0.6	14.5	50.0	23.2
Don't know/can't specify	-	100.0	0.0	0.5	0.6	-
Don't know our spoons		100.0	100.0	0.0	0.0	
Total %	100.0	58.9		100.0	100.0	100.0
		00.7	55.8			
C % believed disadv. to be permanent in nature	47.6		00.0	57.2	63.2	74.3
F		22.3				
D Basis of this belief		19.4	15.2			
Own experience	3.7	18.5	15.9	11.3	14.1	32.7
Friends experience	16.9	84.6	19.8	19.4	15.0	10.7
Heard from friend	12.3	0.9	83.7	16.7	12.0	12.5
Heard from others	91.2	2.0	-	80.2	74.6	50.3
TV, radio, posters	1.2	2.0	-	0.6	0.2	-
Health personnel	0.1		2.6	0.2	0.5	_
Others	2.9	100.0	2.0	2.8	1.9	_
Others	2.7	120465	100.0	۷.0	1.7	-
Total %	100.0	120403	100.0	100.0	100.0	100.0
Total N	60165		100743	90601	49981	19228
ı Otal IV	00103			7000 l	4770 I	17220

Table 6.12 shows the source of supply of modern contraceptive methods. In case of all the methods, the source of supply has been the government hospitals followed by primary health centres (including camps).

Table 6.12: Source of supply of modern contraceptive methods ever used

Source of supply	Male sterilization	Female sterilization	Copper T /IUD	Pill	All modern methods
Rural Public sector					
Government Hospital/CHC	52.6	62.7	48.0	30.2	57.1
PHC/camps .	22.9	29.2	24.9	12.8	26.8
SC/Male/Female worker	4.7	0.4	11.1	6.8	2.7
Private medical sector					
Private doctor	4.0	2.0	7.0	9.0	3.2
Medical shop	-	-	4.4	20.7	2.5
Other private sector					
NGOs, Depot holders	-	0.2	-	-	0.2
Others	15.9	5.4	4.5	20.5	6.9
Total %	100.0	100.0	100.0	100.0	100.0
Total N	2728	47908	7101	7353	67478
Urban Public sector					
Government Hospital/CHC	38.8	61.1	47.7	48.9	54.6
PHC/camps	33.1	25.6	12.4	5.1	19.9
SC/Male/Female worker	-	0.8	12.2	-	3.7
Private medical sector					
Private doctor	-	5.5	18.2	11.9	10.0
Medical shop	-	-	5.5	23.9	4.7
Other private sector					
Others	28.1	7.0	4.0	10.2	7.1
Total %	100.0	100.0	100.0	100.0	100.0
Total N	420	11328	5448	3479	22024
Total Public sector					
Government Hospital/CHC	50.8	62.4	47.9	36.2	56.5
PHC/camps	24.2	28.5	19.5	10.3	25.2
SC/Male/Female worker	4.1	0.5	11.6	4.6	2.9
Private medical sector					
Private doctor	3.4	2.7	11.9	9.9	4.7
Medical shop	-	-	4.9	21.7	3.0
Other private sector					
NGOs, Depot holders	-	0.2	-	-	0.1
Others	17.5	5.8	4.2	17.2	6.9
Total %	100.0	100.0	100.0	100.0	100.0
Total N	3148	59236	12549	10832	89501

Table 6.13 shows the knowledge of sources from where the method can be obtained. As regards the permanent methods, PHCs/District hospitals have been reported to be the major sources while for the spacing methods, PHC/district hospitals as well as shops have been reported to be the main sources from where the method can be obtained.

Table 6.13: Knowledge of sources from where the method could be obtained

Methods		Percentage who mentioned					
	PHC/District hospital	SC + workers	CBD	Private doctor	Shops	aware of the method	
Vasectomy	82.2	2.6	-	18.7	0.1	226419	
Tubectomy	92.5	3.5	-	23.2	0.3	268208	
IUD	82.4	8.9	-	23.9	0.7	200146	
Pills	70.6	10.4	0.4	17.2	30.1	208931	
Condom	68.2	14.3	0.9	13.6	40.7	236780	
Jelly	46.3	3.2	0.3	11.2	31.1	22622	
Injectable	59.9	1.3	1.1	18.1	1.7	174305	

Table 6.14 gives the supply position of pills and condoms as reported by the current users. For pills about 85 percent reported regular supply of pills. Shops are reported to be most regular in the supply of pills (43%). As regards the question of alternatives in case of short supply of pills, an equal proportion of about 37 percent said that they don't use the method or get it from some other sources. Further, on the supply position of pills a large majority (63%) reported that they don't get it sometimes.

On the supply of condoms, shops have been identified as the source of supply in most of the cases. In case of short supply, a large majority of 78 percent said they shift to other methods. On the supply position of condoms 62 percent said they don't get it sometimes.

Table 6.14: Supply position of pills and condom as reported by the current users

Source of supply	Pill Total	(_	
	users	Rural	Urban	Total
Source of supply				_
PHC/SC	32.7	47.1	9.7	32.4
Government Hospital	20.5	4.8	5.4	5.0
Male and female FP workers	-	10.5	-	6.4
Shops	42.9	55.1	73.8	62.4
Private doctors/clinic	19.9	9.7	11.5	10.4
Others	5.4	7.7	6.3	7.2
Total %	100.0	100.0	100.0	100.0
Total N	1888	8336	5202	13538
% reporting regular supply	84.6	79.4	93.5	84.9
Alternative in case of short supply				
Do not use the method	36.8	17.0	-	16.0
Get from some other source	37.4	6.4	-	6.0
Shift to other method	25.8	76.6	100.0	78.0
Supply position during last 3 months				
Always got the supply	36.8	24.9	100.0	29.4
Did not get some time	63.2	66.3	-	62.3
Never received	-	8.8	-	8.3
How many cycles R would like to receive at a time	0.40	11.38	12.15	11.68

Table 6.15 shows the availability of pills and condoms from sources other than the usual public distribution system in the rural areas. In all, 5.1 percent villages reported to have retailers/shops stocking both pills and condoms.

For any FP method, private doctors are providing services to 15.4 percent of the villages. No other source have been found to be in operation.

Table 6.15: Availability of pills and condom from other than public sources in rural areas

Villages	Percentage of villages reporting availability of							
	Pills	Condom	Both	Any FP				
Percent of villages having at least one								
Retailers/shop stocking contraceptive	5.1	9.0	5.1	-				
Community based distribution	0.0	0.0	0.0	-				
Private doctors providing contraceptive	NA	NA	NA	15.4				
NGO distributing the method	NA	NA	NA	0.0				
Number of villages	78	78	78	78				

Table 6.16 gives the attitude of the respondents towards F.P. A large majority of women (90 percent) approve of F.P. across rural and urban areas. Eight percent of women said the disapproval of FP by their family members. Among the family members husbands (57%) stand as the main barricade along with his mother (34%). Other family members contribute from 3-9 percent. Only 3 percent of women reported that their parents disapprove of it.

Table 6.16: Attitude towards family planning

Attitude towards family planning	Rural	Urban	Total
Percent of women approving use of FP	89.2	94.0	90.2
Percent reporting disapproval of FP by family members	7.3	8.8	7.6
Who oppose FP in family			
Husband	55.2	61.7	56.9
Parents	2.6	3.9	2.9
Father-in-law	12.3	7.2	11.0
Mother-in-law	38.0	24.0	34.4
Other male member	6.7	14.2	8.7
Other female member	6.0	1.1	4.8
Others	2.9	3.7	3.2

This shows the major disapproval coming from the husband and the in-laws, thus there is an urgent need to generate more awareness and sensitize both husband and the in-laws towards small family norm.

Table 6.17 shows the level of approval to family planning by the various members of the household. As can be seen from the table, a large proportion reported no opposition at all from any one (92%).

Among those who have been opposing to FP are husband (4%) and mother-in-law (3%). The level of opposition has not been seen to follow a specific association with age, educational status, religion or caste.

Table 6.17: Approval to family planning by household members

Background	Percent		Percentag	e report	ing opposi	tion from		Total % N	lumber of
characteristics	approvin g FP use	No one	Husband	Parent	Father-in- law	Mother- in-law	Others		women
Age									_
13 - 19	86.8	94.3	2.7	0.3	0.6	2.3	1.3	100.0	33309
20 - 29	90.6	90.8	5.0	0.3	1.2	3.6	1.7	100.0	125338
30 - 39	92.2	92.6	4.2	0.3	0.9	2.6	0.4	100.0	73203
40 - 49	88.8	94.5	4.0	-	-	0.4	1.4	100.0	49788
Residence									
Rural	89.2	92.7	4.0	0.2	0.9	2.8	1.1	100.0	218087
Urban	94.0	91.2	5.4	0.3	0.6	2.1	1.7	100.0	63551
Education									
Illiterate	87.3	92.3	4.6	0.3	0.6	2.5	1.3	100.0	172534
Upto class 4	91.1	89.6	9.2	-	-	2.3	0.3	100.0	20903
Primary	94.4	92.1	3.8	0.3	0.5	2.4	1.7	100.0	32367
Upto middle	95.3	92.8	2.2	0.3	2.5	3.2	1.0	100.0	31343
Upto high	97.3	90.3	1.9	-	2.3	6.0	1.8	100.0	11791
Above high school	99.3	98.0	2.0	-	-	1.2	8.0	100.0	12700
Religion									
Hindu	91.1	93.3	3.4	0.2	0.9	2.6	1.0	100.0	252435
Muslim	82.0	84.2	12.3	0.8	0.4	2.8	3.2	100.0	28336
Others	100.0	100.0	-	-	-	-	-	100.0	866
Caste									
Scheduled caste	90.2	92.9	4.3	-	0.5	1.9	1.4	100.0	67714
Scheduled tribe	90.0	91.0	3.6	-	-	5.4	-	100.0	5502
Backward caste	89.6	93.0	3.5	0.5	1.0	2.7	1.0	100.0	111917
Higher caste Hindu	94.8	94.3	2.4	-	1.1	2.8	0.7	100.0	67303
Other religious groups	82.4	84.6	12.1	0.7	0.4	2.7	3.1	100.0	28990
Total	90.2	92.4	4.3	0.3	0.8	2.6	1.2	100.0	281425

Table 6.18 gives the source from where the respondents have heard F.P. messages, on radio and television. A majority of the respondents both in rural and urban areas (62-76 percent) have heard of F.P. from both radio and TV. This is also true across all educational levels, religion, caste groups, and ever usership of FP methods.

Table 6.18: Heard family planning messages on radio and television

Background	Heard of family	planning mess	ages on radio and	l television	Total %	Total N
Characteristics	Neither	Radio only	Television	Both		
Age						
13-19	17.7	2.8	8.9	70.6	100.0	33529
20-24	13.5	6.1	12.8	67.6	100.0	65539
25-29	10.2	3.7	10.8	75.3	100.0	61159
30-49	11.1	5.5	8.5	74.9	100.0	132614
Residence						
Rural	12.5	2.5	9.1	75.9	100.0	226050
Urban	11.7	13.1	12.8	62.4	100.0	67116
Education						
Illiterate	11.4	2.7	7.7	78.1	100.0	179996
Upto class 4	13.3	6.8	9.7	70.2	100.0	22049
Primary	13.1	8.3	13.8	64.9	100.0	33790
Upto middle	14.2	7.8	14.5	63.5	100.0	32008
Upto high	14.0	11.5	17.8	56.7	100.0	12176
Above high school	13.7	10.3	13.1	62.9	100.0	13147
Religion						
Hindu	11.8	4.5	10.6	73.2	100.0	262345
Muslim	15.8	9.4	4.5	70.3	100.0	29955
Others	15.5	-	15.0	69.5	100.0	866
Caste						
Scheduled caste	10.1	2.7	11.5	75.7	100.0	70463
Scheduled tribe	5.1	5.7	9.9	79.3	100.0	5702
Backward caste	12.0	3.9	9.4	74.7	100.0	115886
Higher caste Hindu	13.7	7.0	11.8	67.4	100.0	70294
Other religious groups	15.8	9.2	4.7	70.3	100.0	30609
Use of contraception *						
Ever use	11.5	4.8	10.0	73.0	100.0	160994
Never use	13.1	4.7	10.2	72.0	100.0	120643
Total	12.2	5.0	10.0	72.9	100.0	292954

^{*} Currently married women

Table 6.19 shows the FP messages through different media as well as the types of messages received. In case of both radio, TV and cinema the messages received have been on small family size, use of condoms and use of pills.

Table 6.19: Family planning messages through different media

Types of messages received			Radio	7	elevisior)	(Cinema	
on family planning	Rural	Urban	Total	Rural	Urban	Total	Rural	Urban	Total
Percent received messages on family planning	50.9	38.1	47.4	51.7	55.3	53.6	40.4	25.9	34.1
-	79.7	66.0	76.8	71.6	50.7	60.1	64.3	52.6	60.4
Small family size	59.4	57.6	59.0	58.4	70.9	65.3	54.5	61.4	56.8
Use of condom/Nirodh	63.6	73.5	65.7	72.1	74.4	73.3	48.3	55.4	50.7
Use of oral pills/Mala D	16.3	5.6	14.0	14.9	14.8	14.8	14.9	12.3	14.0
Use of loop/IUD/Cu-T	6.6	6.8	6.7	9.4	7.9	8.5	5.3	5.1	5.2
Sterilization	6.1	3.9	5.6	6.4	4.5	5.4	3.8	11.9	6.5
Population problems Others	2.0	0.8	1.7	-	1.7	0.9	6.7	11.0	8.1

Table 6.20 gives reasons for discontinuation of FP methods. The most frequently reported reasons for discontinuation is "wanted to have a child" (31%).

Table 6.20: Reasons for discontinuation

Reasons for discontinuation	Rural	Urban	Total
Method failed or got pregnant	4.5	5.3	4.7
Lack of sexual satisfaction	1.7	2.7	1.9
Created menstrual problem	1.3	2.1	1.5
Created health problem	2.3	5.7	3.1
Inconvenient to use	0.2	-	0.2
Put on weight	1.3	-	1.0
Did not like the method	3.3	8.2	4.3
Wanted to have a child	30.5	31.7	30.7
Wanted to replace dead child	0.4	-	0.3
Lack of privacy for use	0.5	-	0.4
Others	7.7	12.6	8.8
Don't know	46.3	31.6	43.1
Missing	6.6	3.9	6.0
Total %	100.0	100.0	100.0

Table 6.21 gives the future intention to use contraceptives. More than half of the respondents said that they are going to use a method within one year, while another about one fifth said that they use it within one or two years.

Table 6.21: Future intention

	Rural	Urban	Total
Within 1 year	46.5	63.8	51.5
1-2 year	16.2	24.9	18.7
2 + year	9.6	2.7	7.6
Do not know	27.7	8.6	22.2
Total %	100.0	100.0	100.0

CHAPTER VII

FERTILITY PREFERENCE

In the BSUP, women were asked about their desire for more children. This was aimed to understand the number of children they desire to have, the proportion of boys and girls preferred thereof. Alongside, the ideal number of children has also been assessed.

Communication between couples on the number of children is important for controlling the family size. This is essential as it should lead to a proper understanding of the desired family size a couple should have.

In the following sections, desire for more children, ideal number of children, husband-wife communication on the number of children a couple should have and family planning related issues have been dealt with.

7.1 Desire for More Children

In the BSUP, currently married women were asked "would you like to have another child or would you prefer to have any more children?" Women who did not yet have any child were asked whether or not they wanted to have any child. Women who want another child were then asked about the preferred timing and sex of their next child.

Table 7.1 provides information about the fertility preferences of currently married women. Overall, only 39 percent of women say they want another child at some time in the future and a little more than half of these women say they would like to wait for at least two years before having their next birth. The figures are similar in both rural and urban areas. About 23 percent of women say they would like another child soon (soon is, within one year).

Table 7.1: Fertility preferences

Desire for children	Numb	er of livin	g childrer	ı *	Total
	0	1	2	3 +	
Rural					
Desire for additional child					
Within 11 months	47.6	15.8	10.5	15.0	22.1
12-23 months	9.8	11.7	12.5	15.6	12.1
24 or more months	18.1	61.9	65.6	49.4	50.0
Do not know	24.5	10.6	11.4	20.0	15.8
Total %	100.0	100.0	100.0	100.0	100.0
Preferred sex of additional child					
Only boy(s)	0.7	5.2	6.0	8.8	4.9
Only girl(s)	0.4	1.5	1.5	0.7	1.1
Both boy and girl	94.2	83.5	85.9	82.3	86.5
Either	2.3	6.8	3.6	2.1	4.1
Others	2.5	3.0	3.0	6.1	3.5
Total %	100.0	100.0	100.0	100.0	100.0
Number wanting more children	22659	30937	23248	16438	93283

Desire for children	Numb	er of living	g childrei	า *	Total
	0	1	2	3 +	
Total					
Desire for additional child					
Within 11 months	48.2	16.1	13.3	13.0	22.7
12-23 months	9.7	12.5	11.5	12.3	11.6
24 or more months	19.6	61.0	63.8	55.4	50.6
Do not know	22.5	10.5	11.4	19.3	15.2
Total %	100.0	100.0	100.0	100.0	100.0
Preferred sex of additional child					
Only boy(s)	1.1	5.3	5.5	10.2	5.2
Only girl(s)	0.3	1.2	1.2	1.1	1.0
Both boy and girl	92.6	79.7	86.0	81.3	84.7
Either	3.6	11.2	5.0	1.9	6.2
Others	2.3	2.8	2.4	5.6	3.0
Total %	100.0	100.0	100.0	100.0	100.0
Number wanting more children	29183	39639	29587	20828	119237

^{*} Includes current pregnancy. For tabulating this table add one in living number of children if the woman is currently pregnant, i.e. for currently pregnant women number of living children = 133 + one.

As regards the preference of the sex of the child, in both rural and urban areas, a large proportion of respondents (78-87 percent) expressed their preference for both sons as well as daughters. However, the preference in both the places (rural and urban) is skewed towards males, with a slightly higher proportion that preferred to have boys than girls.

With respect to the parity of the women, as expected, the desire to have more children declines rapidly as the number of children increases (Table 7.2). More than 94 percent of women with no children say they want a child and only 5 percent say they do not want any children. The proportion who want another child drops to 53 percent for women who have two living children and 24 percent for those with three living children.

Table 7.2: Number of living children by number of additional desired children

Number of living children *		Num	ber of des	ired childre	en		Total % N	lumber of
_	0	1	2	3	4+	DK		women
Rural								
0	5.5	2.8	33.0	47.3	8.8	2.7	100.0	24297
1	10.5	31.3	45.9	8.5	2.1	1.8	100.0	34557
2	46.7	37.8	13.2	1.4	0.6	0.4	100.0	43768
3	76.7	16.4	5.3	0.6	0.5	0.4	100.0	46136
4	88.4	7.5	2.6	-	0.6	0.9	100.0	33135
5+	94.3	4.3	0.7	-	0.2	0.4	100.0	36194
Urban								
0	4.1	9.9	34.3	43.9	3.7	4.1	100.0	7071
1	14.9	37.3	41.5	4.2	1.2	1.0	100.0	10220
2	46.4	46.0	5.1	2.5	-	-	100.0	11830
3	74.6	20.6	2.9	0.7	-	1.3	100.0	10857
4	92.8	6.2	1.0	-	-	-	100.0	9789
5+	92.7	6.0	-	0.7	-	0.6	100.0	13785
Total								
0	5.2	4.4	33.3	46.5	7.6	3.0	100.0	31368
1	11.5	32.7	44.9	7.5	1.9	1.6	100.0	44776
2	46.6	39.5	11.4	1.6	0.5	0.3	100.0	55598
3	76.3	17.2	4.8	0.7	0.4	0.6	100.0	56994
4	89.4	7.2	2.2	-	0.5	0.7	100.0	42923
5+	93.9	4.7	0.5	0.2	0.2	0.5	100.0	49979

^{*} Includes current pregnancy

Table 7.3 gives the desire of the women for more children by their background characteristics. In all, about 94 percent women having three or less number of children desire to have more children.

Women of younger age group and with less number of children desire to have more children than their older counterparts. The desire increases with the increase in age and then decreases. The same is true for the number of children.

As regards the place of residence, there seems to be little difference between the rural and the urban areas. The trend is almost uniform with respect to the number of living children.

Table 7.3: Desire to have more children by background characteristics

Background	N	umber d	of living o	:hildren *		Total	Number of women
characteristics	0	1	2	3	4+	%	wanting more children
Age							
13 - 19	54.9	38.5	5.6	1.0	0.0	100.0	31034
20 - 29	12.9	35.1	33.9	14.5	3.6	100.0	73423
30 - 39	15.7	12.6	20.0	18.1	33.6	100.0	12382
40 - 49	30.4	13.7	20.3	10.0	25.6	100.0	2398
Residence							
Rural	24.3	33.2	24.9	11.4	6.2	100.0	93283
Urban	25.1	33.5	24.4	10.6	6.3	100.0	25954
Education							
Illiterate	23.3	29.7	26.4	13.0	7.5	100.0	72497
Upto class 4	20.2	28.1	28.5	18.3	4.8	100.0	7852
Primary	30.5	27.4	21.9	10.6	9.6	100.0	11554
Upto middle	28.5	43.1	21.2	5.9	1.4	100.0	14713
Upto high	25.7	41.9	25.0	5.1	2.3	100.0	6874
Above high school	20.7	61.1	14.2	1.9	2.0	100.0	5746
Religion							
Hindu	25.5	33.3	24.4	11.0	5.7	100.0	106413
Muslim	16.0	32.8	29.2	13.2	8.9	100.0	12515
Others	0.0	53.4	0.0	0.0	46.6	100.0	309
Caste							
Scheduled caste	23.0	27.6	30.9	11.8	6.8	100.0	33176
Scheduled tribe	30.6	51.1	14.2	4.0	0.0	100.0	2647
Backward caste	27.2	32.8	22.7	11.7	5.6	100.0	49224
Higher caste Hindu	25.2	41.2	19.4	9.2	5.1	100.0	21366
Other religious groups	15.8	33.1	28.7	13.0	9.4	100.0	12824
Number of living sons							
None	44.1	31.7	15.4	5.1	3.7	100.0	65945
1	0.2	43.0	34.7	16.2	5.8	100.0	43598
2	0.0	0.0	55.7	26.5	17.8	100.0	7655
3+	0.0	0.0	0.0	45.0	55.0	100.0	2039
Number of living daughters							
None	48.4	40.3	9.0	1.9	0.5	100.0	60117
1	0.2	44.4	46.5	7.1	1.8	100.0	34780
2	0.0	0.0	48.9	45.2	5.9	100.0	16395
3+	0.0	0.0	0.0	30.1	69.9	100.0	7945
Total	24.5	33.2	24.8	11.2	6.2	100.0	119237

^{*} Includes current pregnancy

In case of other variables, such as, educational status, religion and caste groups, the trend is also similar. That is with the increase in the number of living children (two or more) there is a decrease in the level of desire subsequently.

7.2 **Ideal Number of Children**

Table 7.4: Ideal and actual number of children

Ideal number of children			Number	of living cl	hildren *			Total
	0	1	2	3	4	5	6+	
Rural								
None	0.8	0.3	0.4	0.5	0.4	-	1.0	0.5
1	1.8	1.4	0.4	0.6	0.9	-	0.5	8.0
2	31.2	36.5	30.5	16.5	23.0	15.9	17.0	25.1
3	54.5	52.7	56.6	70.3	52.6	69.7	57.3	59.3
4	8.2	7.1	8.2	7.6	18.6	8.2	12.5	9.8
5	1.1	0.3	0.6	1.7	1.1	3.9	1.1	1.3
6+	-	0.2	0.2	8.0	0.8	0.4	5.2	8.0
Non-numeric responses	2.3	1.4	3.0	1.8	2.5	1.9	5.4	2.4
Total %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Number of women	25289	35705	44890	47544	34406	20487	17729	226050
Mean ideal number **								2.87
Ever-married women	2.72	2.68	2.77	2.96	2.98	3.02	3.12	2.87
Currently married women	2.73	2.67	2.76	2.96	2.98	3.01	3.10	
Urban								0.7
None	4.8	-	-	-	1.0	-	-	0.7
1	0.8	0.5	0.5	2.5	-	-	-	26.4
2	27.9	26.7	42.8	23.0	19.1	33.6	3.8	59.6
3	55.5	61.9	51.7	62.0	58.6	58.9	73.4	9.7
4	7.5	8.1	2.1	11.5	19.2	6.3	15.0	8.0
5	-	1.1	2.4	-	-	-	1.7	0.2
6+	-	-	-	-	-	-	2.3	1.8
Non-numeric responses	3.6	1.6	0.4	1.1	2.1	1.2	3.7	100.0
Total %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	67116
Number of women	8003	10488	12115	11754	10031	7816	6909	
Mean ideal number **								2.82
Ever-married women	2.62	2.82	2.63	2.83	2.97	2.72	3.22	2.82
Currently married women	2.66	2.82	2.62	2.86	2.98	2.72	3.20	
Total								0.5
None	1.8	0.2	0.3	0.4	0.6	-	0.7	8.0
1	1.6	1.2	0.4	1.0	0.7	-	0.4	25.4
2	30.4	34.3	33.1	17.8	22.2	20.8	13.3	59.4
3	54.8	54.8	55.6	68.7	53.9	66.7	61.8	9.8
4	8.1	7.3	6.9	8.4	18.8	7.7	13.2	1.2
5	0.8	0.5	1.0	1.4	0.9	2.8	1.3	0.7
6+	-	0.2	0.1	0.7	0.6	0.3	4.4	2.3
Non-numeric responses	2.6	1.4	2.5	1.7	2.4	1.7	5.0	100.0
Total %	100.0	100.0	100.0	100.0	100.0	100.0	100.0	29316
Number of women	33292	46193	57005	59298	44437	28303	24638	
Mean ideal number **								2.86
Ever-married women	2.70	2.71	2.74	2.93	2.98	2.93	3.15	2.86
Currently married women	2.72	2.70	2.73	2.94	2.98	2.93	3.13	

^{*} Includes current pregnancy

** Means are calculated excluding the women giving non-numeric responses.

The analysis above has focused on the respondent's reproductive desire for the future, taking into account the number of sons and daughters that she already has. In determining the ideal number of children, on the other hand, the respondent is asked about the ideal number of children.

Table 7.4 shows that the ideal number of children falls within the fairly narrow range of 2-3 children for a large majority of women. Almost no woman expressed a desire for fewer than two children and only 12 percent thought that more than four children would be ideal. The ideal number of children, reported both by currently married and ever married women is 2.86.

Table 7.5 gives the match between the ideal number of children reported by the respondents and the number of children they have. The most close match between the ideal and actual number of children as reported among the respondents, consists of women who have 3 children (70%).

Table 7.5: Match between ideal number of children and number of living children

Number of ideal children **		Number	of living childre	n *	
	0-1	2	3	4	5+
Rural					
Less than ideal	98.6	67.7	10.4	2.0	0.2
Equal to ideal	1.2	31.4	71.6	19.1	4.4
More than ideal	0.2	0.9	18.0	78.9	95.4
Total %	100.0	100.0	100.0	100.0	100.0
Total N	59939	43540	46681	33556	36870
Urban					
Less than ideal	97.6	56.5	11.6	-	-
Equal to ideal	2.4	43.0	62.7	19.6	-
More than ideal	-	0.5	25.7	80.4	100.0
Total %	100.0	100.0	100.0	100.0	100.0
Total N	18037	12061	11625	9818	14373
Total					
Less than ideal	98.4	65.3	10.6	1.5	0.2
Equal to ideal	1.5	34.0	69.8	19.2	3.2
More than ideal	0.1	0.8	19.6	79.3	96.7
Total %	100.0	100.0	100.0	100.0	100.0
Total N	77976	55601	58306	43374	51243

^{*} Includes current pregnancy

On the question of husband-wife communication on the number of children the couple should have, Table 7.6 analyses the stages at which such discussions have taken place.

As evident from the table, most of discussions are initiated only after the birth of the third child mostly in case of older women (30 + years). In the youngest cohort (13-19 years), the discussion starts immediately after marriage. In the subsequent older age groups, the initiation of discussions is delayed after the first and second births.

^{**} Excluding non-numeric response

Table 7.6: Husband-wife communication on number of children they should have

Background		Stage a	t which	<u>discus</u> si	on took place		Total	Number
characteristics	Immediately after marriage	After 1st child	After 2nd child	After 3rd child	Don't know/remmber	Never	%	
Age								
13-19	28.2	14.2	3.9	0.3	0.6	52.9	100.0	33309
20-29	8.3	18.4	24.0	14.1	0.8	34.4	100.0	125338
30-39	3.4	5.8	16.8	35.2	0.4	38.4	100.0	73203
40-49	2.4	5.0	7.8	30.8	1.8	52.0	100.0	49788
Residence								
Rural	8.6	11.8	16.6	20.6	0.9	41.4	100.0	218087
Urban	7.5	13.7	17.9	21.8	0.7	38.4	100.0	63551
Education								
Illiterate	7.1	9.6	13.7	22.2	1.1	46.3	100.0	172534
Upto class 4	6.6	15.8	17.3	24.3	0.8	35.1	100.0	20903
Primary	6.9	10.6	21.6	26.4	0.5	34.0	100.0	32367
Upto middle	12.8	13.9	24.5	15.7)	33.1	100.0	31343
Upto high	12.6	26.2	20.0	7.4	0.8	33.0	100.0	11791
Above high school	17.1	29.9	25.5	8.8	1.6	17.1	100.0	12700
Use of contraceptive								
Ever use	6.2	12.4	20.5	28.5	0.8	31.6	100.0	160994
Never use	11.3	12.1	12.1	10.8	0.9	52.8	100.0	120643
Total	8.4	12.3	16.9	20.9	0.9	40.7	100.0	281638

Women with education level beyond middle standard, tend to discuss about the number of children after the first or second birth. Illiterate women tend to discuss it only after the birth of the second child or more commonly after the birth of the third child.

However, about one-third to half of the women in different age groups, have never discussed about the number of children with their husbands. The percent is slightly higher in rural areas (41%) than in the urban areas (38%).

About 46 percent of the respondents, who are otherwise illiterate have never discussed about the number of children with their husband. The percentage decreases with the increase in the education level.

Further analysis of ever-user and never-user couples reveals that more than half of the never-users have never discussed about the number of children they should have. Contrary to this, about one-third of the ever-user couples have never discussed the matter.

7.3 Fertility Planning

Irrespective of the parity, women were asked whether for any given pregnancy, it was an unwanted child that she would have terminated otherwise.

Table 7.7 shows that about 11 percent women reported to have one or more unwanted pregnancies. The proportion of such women is slightly higher in the urban areas than in the rural areas. Moreover, illiterate mothers tend to have least unwanted pregnancy than their literate counterparts.

Table 7.7: Unwanted pregnancy

Background	Numbe	r of unwanted	l pregnancies		Total	Total
characteristics	0	1	2	3+	%	Number
Age						_
13 - 19	96.5	3.2	0.3	-	100.0	33212
20 - 29	90.8	6.8	2.0	0.4	100.0	124690
30 - 39	84.4	10.2	4.2	1.3	100.0	73100
40 - 49	85.4	9.2	2.1	3.4	100.0	49713
Residence						
Rural	89.9	7.1	1.8	1.2	100.0	217418
Urban	85.2	9.7	4.4	0.7	100.0	63297
Education						
Illiterate	90.4	6.5	1.9	1.2	100.0	171974
Upto class 4	87.7	8.2	2.9	1.3	100.0	20903
Primary	85.6	9.7	3.2	1.4	100.0	32090
Upto middle	85.1	11.3	3.1	0.6	100.0	31343
Upto high	88.2	7.1	3.3	1.4	100.0	11791
Above high school	87.1	9.9	3.0	-	100.0	12614
Religion						
Hindu	88.8	7.7	2.4	1.1	100.0	251513
Muslim	88.9	7.6	2.4	1.1	100.0	28336
Others	100.0	-	-	-	100.0	866
Caste						
Scheduled caste	91.6	5.7	1.2	1.5	100.0	67461
Scheduled tribe	93.4	4.9	1.7	-	100.0	5502
Backward caste	90.3	6.3	2.4	1.1	100.0	111533
Higher caste Hindu	83.2	12.4	3.6	8.0	100.0	67017
Other religious groups	89.1	7.4	2.4	1.1	100.0	28990
Total	88.8	7.7	2.4	1.1	100.0	280503

Hindus and Muslims show similar trend in this regard. Lower proportion has also been reported from scheduled castes and tribes than higher caste Hindus.

Table 7.8 gives the outcome of the unwanted pregnancies. As evident from the table, 76.2 percent of the pregnancies are live birth, about 10 percent have been aborted (induced), 6 percent are spontaneous abortions and about 3 percent still births.

Table 7.8: Outcome of unwanted pregnancies

Table 7.0. Outcome of unwanted pregnancies						
Outcome of unwanted pregnancies	Rural	Urban	Total			
Live birth	75.0	78.8	76.2			
Still birth	3.7	1.1	2.9			
Spontaneous abortion	4.7	9.2	6.0			
Induced abortion/MTP	9.5	10.2	9.7			
Attempted to abort but failed	0.3	0.0	0.2			
Others	6.8	0.7	5.0			
Total %	100.0	100.0	100.0			
Total N	31107	13001	44109			

62

Table 7.9 gives the detailed fertility planning. This provides the intention of the women towards a pregnancy. A large majority reported that they wanted the pregnancy to occur then (84%). It was quite high in the urban areas (95%) than in the rural areas (80%). The table further shows that as high as about 13 percent of the rural women did not want to have a child as compared to their urban counterparts (3%). Moreover, about 7 percent of the rural women wanted to delay their pregnancies as compared to about 3 percent in the urban areas.

Table 7.9: Fertility planning

Pregnancy intention	Rural	Urban	Total
Wanted then	80.2	94.5	83.8
Wanted later	6.5	2.7	5.5
Wanted no more	12.7	2.9	10.2
Missing	0.6	-	0.4
Total %	100.0	100.0	100.0
Number of pregnancies	17501	5863	23364

On the question of `what the women would do, if she gets unwanted pregnancy'(Table 7.10), 27 percent women said they will accept the child. A sizeable 14 percent said they will get it aborted, the proportion varying from 12 percent in rural to 20 percent in urban areas. However, about 40 percent of the women were sterilized, hence could not answer the question.

Table 7.10: What the women would do if gets unwanted pregnancy

Intention	Rural	Urban	Total
Will accept the pregnancy	27.2	26.2	27.0
Will get it aborted	12.4	20.3	14.2
Others	11.6	13.5	12.1
Not sure/do not know	7.2	7.7	7.3
Not possible/sterilized	41.6	32.3	39.5
Total %	100.0	100.0	100.0
Number of Women	124222	37343	161565

CHAPTER VIII

MATERNAL AND CHILD HEALTH AND UTILISATION OF HEALTH SERVICES

Safe motherhood and child survival has been emphasized by the government to lead the nation towards a brighter future. Towards this, special schemes have been launched for maternal and child health care. Alongside, special care has been taken to improve the quality of services.

This section deals with the maternal and child health and utilisation of health services.

8.1a Mortality

Table 8.1a gives the crude death rate and infant mortality rate. As can be seen from the table, the total CDR in Jalaun is 13.2 per 1000 population. The IMR has been estimated as 102.9 per 1000 live births. There is hardly any variation between the rural and urban areas. For CDR, in the rural areas, it is 13.3 as against 12.9 in the urban areas. Similarly, in case of IMR, it is 101.3 in rural areas and 108.8 in the urban areas.

Table 8.1(a): Crude Death Rate and Infant Mortality Rate

	Rural	Urban	Total
Crude Death Rate	13.3	12.9	13.2
Infant Mortality Rate	101.3	108.8	102.9

Table 8.1(b): Place and type of treatment

	Rural	Urban	Total
Place of treatment			_
District Hospital	20.7	30.2	22.6
PHC	7.1	2.6	6.2
Sub centre	1.6	3.9	2.0
Private doctor	34.5	37.9	35.2
Local vaidya	1.9	-	1.5
Home treatment	12.2	3.5	10.4
Others	22.0	21.9	22.0
Total %	100.0	100.0	100.0
Total N	30184	7662	37846
Type of treatment			
No treatment	23.5	24.5	23.7
Home remedies	10.4	1.1	8.5
Magic/exorcism	1.1	-	0.9
Ayurvedic	2.3	1.6	2.2
Allopathy	59.8	71.4	62.1
Homeopathy	0.6	-	0.5
Others	1.5	-	1.2
Don't know	0.8	1.4	0.9
Total %	100.0	100.0	100.0
Total N	30184	7662	37846

Table 8.1b shows the place and type of treatment availed for those who died. The table shows that over one-third of the deceased have received treatment from the private doctors. Another 23 percent have received treatment from the district hospital. The trend is almost similar in both the rural and urban areas.

As regards the type of treatment, over 60 percent have received Allopathic treatment. This ranges from 60 to 71 percent for rural and urban areas, respectively. About 24 percent have not received any treatment during their illness leading to their death.

8.1b Antenatal Care

Table 8.1 analyses the determinants of antenatal care. It shows women of 20-34 years seek antenatal care (ANC) most frequently (26%), followed by women below 20 years (19%) and women above 35 years (16%).

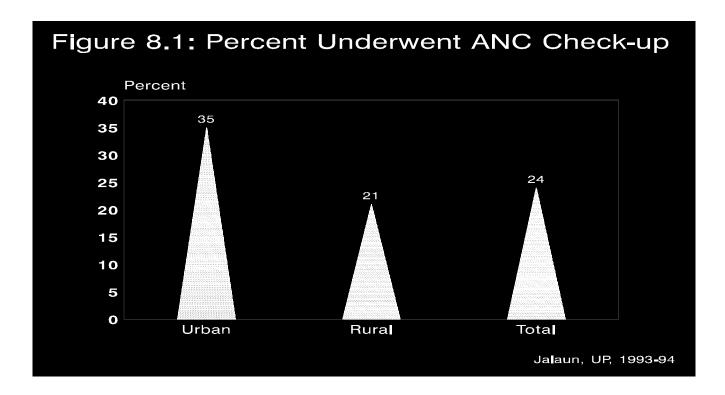
Table 8.1: Antenatal care

Background	% underwent		Source	of ANC tr	eatment			% red	ceived	Number of women
characteristics	ANC = check-up	District hosp/PHC	Sub- centre	Private doctor	Camp	At (home	Others	IFA tab.	TT injection	pregnant in last two years
Age										
< 20	19.1	47.5	8.1	18.8	-	20.0	5.7	22.3	42.1	15636
20 - 34	26.0	46.3	2.4	30.7	1.1	16.6	1.7	33.7	48.8	105308
35+	15.9	79.8	-	15.1	-	5.1	-	21.4	29.1	11954
Residence										
Rural	21.2	44.7	3.0	24.4	1.4	23.0	2.5	29.4	43.9	101746
Urban	34.6	55.8	2.2	37.2	-	2.7	0.7	37.3	53.7	31152
Education										
Illiterate	17.6	43.2	0.7	26.0	1.3	24.8	3.2	25.1	35.4	81926
Upto class 4	23.0	48.2	6.2	23.4	-	15.1	-	30.1	51.5	9752
Primary Primary	28.6	46.9	2.6	39.6	-	10.9	-	33.5	56.6	12640
Upto middle	32.2	57.8	4.8	17.8	2.2	15.7	1.7	42.6	66.5	14889
Upto high	33.6	56.8	14.6	24.1	-	4.4	-	36.1	65.2	6524
Above high school	70.2	51.7	-	43.2	-	1.7	1.5	70.4	84.9	7168
Religion										
Hindu	24.6	47.7	2.6	29.2	1.1	16.5	2.2	31.8	46.2	115401
Muslim	22.8	53.6	3.6	24.5	-	14.2	-	27.1	45.6	16993
Others	-	-	-	-	-	-	-	69.5	100.0	292
Caste										
Scheduled caste	18.4	41.5	2.0	31.6	-	21.6	1.7	25.3	39.0	33892
Scheduled tribe	26.0	35.9	13.1	37.9	-	13.2	-	24.1	39.2	3163
Backward caste	21.9	48.4	1.7	23.8	2.6	20.4	3.0	29.7	41.8	52546
Higher caste Hindu	38.1	51.8	3.2	33.4	-	9.0	1.7	45.5	65.9	25801
Other religious groups	22.5	53.6	3.6	24.5	-	14.2	-	27.8	46.5	17285
Total	24.4	48.4	2.8	28.7	0.9	16.2	1.9	31.3	46.2	132686

The table further shows that a larger proportion of women from urban areas (35%) have undergone ANC check ups than their rural counterparts (21%).

Education level has direct association with the utilisation of ANC services. With the increase in the level of education, there is an increase in the level of utilisation of ANC among those who had been educated above high school level.

As regards the various religious groups, there seems to be little difference between Hindus (25%) and Muslims (23%).



Caste-wise distribution shows that women from higher caste group utilise ANC services most frequently (38%), followed by the women of scheduled tribes (26%), other religious groups (23%), and backward castes (22%). ANC services include, apart from ANC checkup, intake of IFA tablets. The table shows that intake of IFA tablets among women between 20-34 years is highest (34%), followed by women below 20 years and women above 35 years (about 22%). More urban women had taken IFA tablets (37%) than their rural counterparts (29%).

As in the case of ANC checkup, education level is directly associated with the intake of IFA tablets. With the increase in the level of education, the intake increases. It ranges from 25 percent among illiterates to 70 percent among those having education above high school.

More Hindu women (32%) have had taken IFA tablets than their Muslim counterparts (27%). Among the Hindus most of the high caste women have had taken IFA tablets (46%), followed by women from backward castes (30%), scheduled castes (25%) and scheduled tribes (24%).

Most of the women (48-80 percent) have availed ANC services from the district hospitals/PHCs. The rural-urban distribution is 45 percent and 56 percent, respectively. Similar distribution has been observed with respect to the education level, religion, caste of the women. That is, most of the women irrespective of their background have availed ANC treatment from district hospitals/PHC. However, more than two-fifth of the women have had availed ANC treatment from either private doctors or at home.

Table 8.2: Stage of pregnancy

ANC visits	Rural	Urban	Total
Stage of pregnancy at the time of the first ANC visit			_
No antenatal care	78.5	65.4	75.4
First trimester	6.8	13.0	8.3
Second trimester	6.1	9.4	6.8
Third trimester	8.5	12.2	9.3
Don't know/missing	0.2)	0.2
Total %	100.0	100.0	100.0
Median months pregnant at first visit (for those with ANC)	5.0	5.0	5.0
Number of pregnancies in last two years	101746	31152	132898

Table 8.2 shows the ANC visit vis-a-vis the stages of pregnancy. Most of the women (9 percent) have had their ANC visit at the third trimester followed by 8 percent at the first trimester and 7 percent at the second trimester. More urban women (13 percent) have had ANC visits during their first trimester as compared to their rural counterparts (7%).

Table 8.3 shows the place of delivery. In all, about 84 percent births have had taken place at home. About 13 percent at public health centres, while the rest of the 3 percent deliveries have been conducted at private health centre. The rural areas experienced more `home deliveries' (88.4%) than in urban areas (68%). In urban areas, about 27 percent deliveries were conducted at public health centres as against only about 9 percent in rural areas.

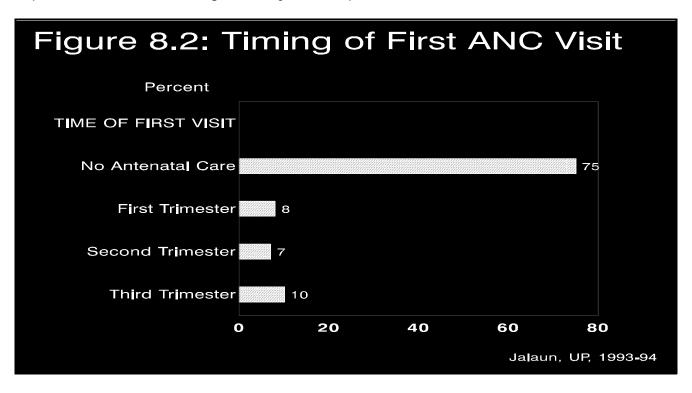
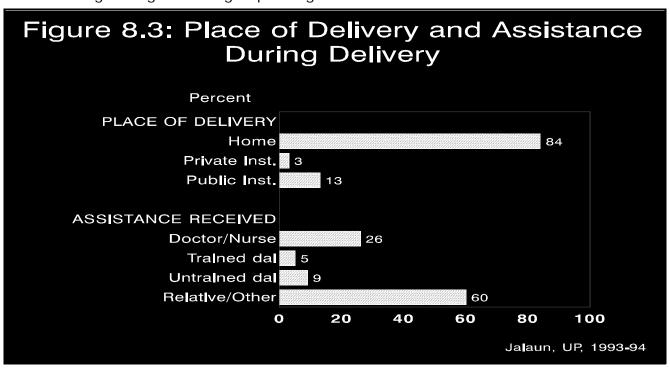


Table 8.3: Place of delivery

Background			Place of delivery								
characteristi	ics	Health 1	Health facility		Home	Missing	%	women pregnant in			
		PHC/Dist. hospital	Public	Private				last 2 years			
Mother's age	at birth										
< 20		11.2	11.2	5.4	83.4	-	100.0	26603			
20 - 34		13.7	13.7	2.8	83.3	0.2	100.0	91681			
35+		5.5	5.5	1.4	93.1	-	100.0	6780			
Residence	Rural	8.6	8.6	2.8	88.4	0.2	100.0	96426			
	Urban	26.6	26.6	5.1	68.3	-	100.0	28638			
Education											
Illiterate		6.4	6.4	1.2	92.2	0.3	100.0	76960			
Upto class 4		11.2	11.2	6.9	81.9	-	100.0	8931			
Primary		16.1	16.1	6.0	77.9	-	100.0	11988			
Upto middle		23.9	23.9	5.9	70.2	-	100.0	14429			
Upto high		18.9	18.9	1.7	79.4	-	100.0	5895			
Above high	school	38.3	38.3	15.1	46.6	-	100.0	6860			
Religion	Hindu	12.8	12.8	3.6	83.5	0.2	100.0	109233			
	Muslim	12.6	12.6	1.5	85.9	-	100.0	15326			
	Others	-	-	-	0.00	-	100.0	504			
Caste											
Scheduled c	aste	9.4	9.4	2.3	88.3	-	100.0	32875			
Scheduled to	ribe	3.3	3.3	3.6	93.2	-	100.0	2976			
Backward ca	aste	9.7	9.7	1.7	88.2	0.4	100.0	49088			
Higher caste	Hindu	24.9	24.9	8.9	66.2	-	100.0	24294			
Other religion	ous groups	12.4	12.4	1.5	86.1	-	100.0	15618			
Total		12.8	12.8	3.3	83.8	0.1	100.0	124851			

`Home deliveries' are more frequent among those women who had poor educational levels. There is a slight variation between the Hindus and the Muslims, i.e., about 84 percent (Hindus) and 86 percent (Muslims) deliveries were conducted at home. `Home deliveries' are lowest among the higher caste groups as against that in the lower castes.



As most of the deliveries have been conducted at home, the deliveries were mostly assisted by family members (Table 8.4). This is however more frequent in rural areas (64%) than in the urban areas (21%). A large proportion of about 36 percent of the deliveries in urban areas have been conducted by doctors or trained nurses.

Table 8.4: Assistance during delivery

Delivery assisted by	Rural	Urban	Total
Doctor or trained nurse	15.4	35.8	20.1
Trained dai	5.2	6.7	5.5
Untrained dai	5.0	21.9	8.8
Family member	64.1	21.1	54.3
Private doctor/nurse	4.3	10.4	5.7
Others/self	6.1	4.1	5.6

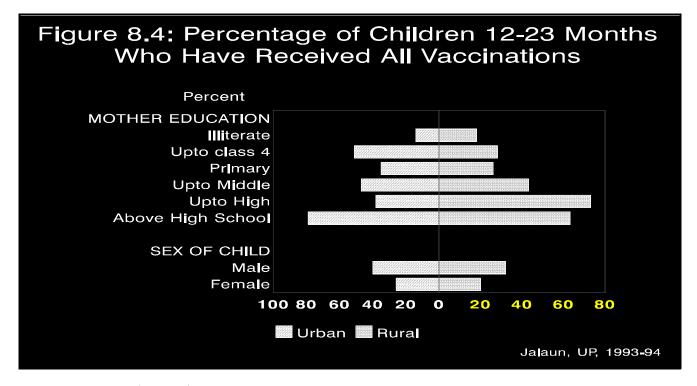


Table 8.5 (a,b,c,d) shows the immunization status of children of 6-23 months and 12-23 months by the place of residence of the respondent.

In case of the children of 6-23 months in the rural areas, more males are vaccinated than females. In all, 26 percent males have had been fully immunized as against 16 percent females. For individual vaccines in males, it ranges from 37 percent for measles to 59 percent for Oral Polio vaccine (Ist dose). The corresponding figures for females range from 28 percent for measles to 51 percent for Oral Polio Vaccine (Ist dose). This shows vaccination for measles is lowest and OPV (1) is highest. In the urban areas (6-23 months), in all, 36 percent males and 24 percent females have been fully immunized. The immunization among males varies from 43 percent for measles to 64 percent for BCG. Correspondingly for females it varies from 28 percent for measles to 52 percent for BCG.

In case of the children of 12-23 months in the rural areas again, more males (32%) are vaccinated than females (20%). The percentage varies from 41 percent in case of DPT (3rd dose) to 61 percent for OPV (1st dose). Correspondingly the immunization varies from 28.1 percent for DPT (3) to 51 percent for OPV (1).

Table 8.5a: Vaccination by 6-23 months children background characteristics (urban and rural)

Background			Percen	tage of	childr	en 6-23	3 mont	hs vac	cinated a	against		Numbe
characterist	rics	BCG		DPT			Polio		Measle S	AII*	None	r of childre
			1	2	3+	1	2	3+				n
Rural												
Sex	Male	54.9	51.4	41.7	38.0	58.9	48.3	41.4	37.0	26.3	35.1	25437
	Female	47.3	45.2	35.3	26.4	50.5	39.1	30.3	27.5	16.0	42.6	24971
Mother's ed	ucation											
Illiterate		41.8	38.9	29.5	22.1	45.4	33.5	25.9	24.6	14.0	47.8	32774
Upto class 4	4	52.1	48.9	38.0	38.0	58.2	47.3	38.0	35.9	25.7	35.8	3154
Primary		56.9	60.5	43.1	36.7	65.0	56.7	47.9	32.6	17.8	30.5	4554
Upto middle	Э	72.3	68.5	60.8	54.4	71.6	60.8	54.6	45.0	36.2	20.4	5713
Upto high		86.8	82.0	78.0	73.5	96.1	87.5	78.3	70.6	56.5	-	2325
Above high	school	89.9	78.8	68.5	69.4	84.0	78.8	69.4	72.9	58.4	10.1	1889
Religion	Hindu	51.7	49.3	39.9	33.2	55.7	45.2	37.0	33.1	22.0	37.6	46425
J	Muslim	42.3	35.3	22.4	19.9	41.6	26.6	22.0	21.2	10.5	53.6	3698
	Others	100.0	100.0	46.7	46.7	100.0	46.7	46.7	46.7	46.7	-	285
Caste												
Scheduled of	caste	48.8	46.2	36.3	28.8	52.1	40.2	31.9	28.2	16.0	40.9	14353
Scheduled t	tribe	62.8	36.3	36.3	36.3	76.0	76.0	62.8	62.7	36.3	24.0	813
Backward c	aste	47.1	44.5	35.8	27.1	50.9	40.1	30.6	27.8	18.5	41.8	20661
Higher cast	e Hindu	63.9	63.7	52.8	50.9	68.4	59.4	54.6	48.0	35.7	26.1	10597
Other religion	ous groups	45.2	38.5	23.6	21.3	44.4	27.6	23.2	22.5	12.3	51.0	3889
Total		51.2	48.4	38.6	32.3	54.8	43.8	36.0	32.3	21.2	38.7	50314
Urban												
Sex	Male	63.7	58.8	55.7	50.6	61.6	58.0	50.6	42.5	35.7	34.0	6885
	Female	52.0	42.7	39.9	37.4	46.0	40.9	38.5	28.2	23.8	45.2	6983
Mother's ed	ucation	45.3	32.1	30.9	28.0	35.2	30.1	28.0	15.9	12.1	54.7	6758
Illiterate		70.3	64.7	53.4	53.4	64.7	64.7	53.4	64.7	47.7	29.7	1233
Upto class 4	4	56.8	62.8	56.8	56.8	62.8	56.8	56.8	36.1	36.1	37.2	1236
Primary		73.0	75.6	70.1	57.2	78.9	73.4	57.2	55.0	43.6	21.1	1987
Upto middle	9	49.5	30.9	30.9	25.0	43.1	36.9	30.9	25.0	19.1	44.2	1262
Upto high Above high	school	94.3	100.0	100.0	100.0	100.0	100.0	100.0	83.7	83.7	-	1391
J		57.0	50 /	47.6	40.0	504	40.0		0 (0	00.4	00.0	2054
Religion	Hindu Muslim	57.2 58.9	50.6 50.8	47.6 48.0	43.9 44.0	53.1 55.0	49.2 49.8	44.7 44.0	36.8 32.5	32.6 24.5	38.9 41.1	8954 4914
	MASIIII	50.7	50.0	- 10.0	- 	55.0	₹7.0	∓ ∓.∪	JZ.J	27.3	71.1	7/14
Caste		40.0	20.7	20.7	20.7	20.7	20.7	20.7	20.0	10 5	F0 0	2020
Scheduled of		49.8	30.6	30.6	30.6	30.6	30.6	30.6	20.8	18.5	50.2	2938
Scheduled to Backward c		100.0	100.0 47.0	40.1	100.0		100.0		100.0	100.0 27.5	- 10.2	172 2947
Higher cast		46.7 84.7	47.0 82.6	82.6	37.5 70.9	50.7 86.6	43.7 82.6	39.5 70.9	29.3 69.3	27.5 57.6	49.3 5.5	3847 1996
Other religion		58.9	50.8	48.0	44.0	55.0	49.8	44.0	32.5	24.5	41.1	4914
_		E7 0	E0 7	477	42 O	E2 0	40.4	// F	25.2	20.0	20.7	12047
Total	are fully vaccinated, i.e	57.8	50.7	47.7	43.9	53.8	49.4	44.5	35.3	29.8	39.7	13867

^{*} Children who are fully vaccinated, i.e., those who have received BCG, measles and three doses of DPT and polio vaccine (excluding polio 0).

Table 8.5b: Vaccination by 6-23 months children background characteristics (Rural and Urban)

Background		Percer	itage o	f childi	ren 6-2	3 mon	ths vac	cinated a	gainst		Number of
Characteristics	BCG		DPT			Polio		Measles	AII	None	children
	-	1	2	3+	1	2	3+				
Rural											
Sex											
Male	57.1	52.4	44.8	41.0	61.2	52.4	45.0	42.6	32.1	33.0	19402
Female	48.9	46.7	36.7	28.1	51.4	39.9	33.2	33.8	20.4	41.6	17327
Mother's education											
Illiterate	44.0	40.5	33.4	25.8	47.8	37.2	29.8	29.2	18.2	45.4	23781
Upto class 4	55.6	51.8	42.5	42.5	62.9	53.7	42.5	40.0	27.8	29.9	2635
Primary Primary	56.1	59.0	39.6	33.8	65.2	58.9	53.1	46.9	25.6	31.5	3164
Upto middle	77.4	66.6	57.6	50.8	71.0	57.6	51.0	52.8	43.3	20.7	4023
Upto high	87.1	92.8	86.9	86.9	100.0	94.1	94.1	80.4	73.2	-	1549
Above high school	87.9	80.8	68.5	69.6	80.8	74.6	69.5	80.8	63.4	12.1	1577
Religion											
Hindu	54.2	51.1	42.1	35.8	58.0	47.8	40.7	39.3	27.1	35.7	34235
Muslim	38.4	27.6	23.1	19.3	34.1	26.5	19.3	24.5	16.2	58.5	2405
Others	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	-	89
Caste											
Scheduled caste	55.7	52.7	43.9	34.4	57.8	47.3	38.8	35.2	20.5	34.7	10403
Scheduled tribe	66.4	48.6	48.6	48.6	84.1	84.1	84.1	66.3	48.6	15.9	608
Backward caste	47.5	44.3	36.3	28.9	52.3	42.0	32.8	31.9	23.9	41.3	15418
Higher caste Hindu	64.3	62.7	50.5	50.5	67.7	56.8	55.6	57.1	40.6	27.3	7806
Other religious group	40.6	30.2	25.9	22.2	36.5	29.1	22.2	27.2	19.2	56.4	2494
Total	53.2	49.7	41.0	34.9	56.6	46.5	39.4	38.4	26.6	37.1	36729
Urban											
Sex											
Male	68.4	63.1	61.7	56.7	65.5	60.6	56.7	46.2	39.9	28.6	5123
Female	50.1	46.8	42.6	41.0	50.3	42.6	41.0	32.8	26.2	48.2	4603
Mother's education											
Illiterate	47.8	38.5	36.7	34.7	41.4	34.2	34.7	19.4	14.0	52.2	4714
Upto class 4	64.6	57.8	57.8	57.8	57.8	57.8	57.8	57.8	51.1	35.4	1033
Primary	46.8	56.2	46.8	46.8	56.2	46.8	46.8	34.8	34.8	43.8	799
Upto middle	76.9	72.3	64.8	53.7	76.9	69.3	53.7	62.6	46.9	23.1	1443
Upto high	60.7	60.7	60.7	49.1	72.9	60.7	49.1	49.1	37.5	27.1	644
Above high school	92.8	100.0	100.0	100.0	100.0	100.0	100.0	79.3	79.3	-	1092
Religion			_	_			_			_	
Hindu	60.9	59.3	54.5	50.4	61.9	55.7	50.4	44.9	38.3	34.9	5624
Muslim	58.0	50.1	50.1	47.7	53.4	47.2	47.7	32.9	26.7	42.0	4102
Caste											
Scheduled caste	62.2	51.9	51.9	51.9	51.9	51.9	51.9	35.2	31.2	37.8	1736
Scheduled tribe	100.0	100.0			100.0	100.0		100.0	100.0	-	75
Backward caste	35.9	39.7	27.9	27.9	42.6	30.8	27.9	23.3	20.4	57.4	2279
Higher caste Hindu	94.9	94.9	94.9	79.6	100.0	94.9	79.6	85.2	70.0	-	1535
Other religious groups	58.0	50.1	50.1	47.7	53.4	47.2	47.7	32.9	26.7	42.0	4102
Total	59.7	55.4	52.6	49.2	58.3	52.1	49.2	39.9	33.4	37.9	9727 (cluding polio 0).

^{*} Children who are fully vaccinated, i.e., those who have received BCG, measles and three doses of DPT and polio vaccine (excluding polio 0).

In the urban areas (12-23 months), in all, about 40 percent males and 26 percent females have been immunized. The immunization among males varies from 46.2 percent for measles to 68 percent for BCG. For females it ranges from 33 percent for measles to 50 percent for OPV(1).

Furthermore, with the increase in the educational level of the mothers, the immunization status increases. In all, Hindu respondents reported immunization of their children more than their Muslim counterparts.

Table 8.6 gives the preferred sources of medical assistance during sickness. A large proportion of 47 percent reported that they preferred always private doctors for curing sickness. This was closely followed by 47 percent who preferred public services as well as private services as and when required. Interestingly, in rural areas private doctors were more popular (52 percent) as compared to urban areas (29%).

On the reasons of the preferred sources of medical assistance, a large proportion of about 87 percent perceives private source to be better as compared to other sources because it renders a better treatment. This was true for rural as well as urban areas.

With respect to the availability of the doctors at the PHCs, majority of the respondents (69 %) expressed their confidence that the doctor is available whenever needed. However, another one-forth are not quite certain about the availability of the doctors.

Table 8.6: Preferred sources of medical assistance during sickness

	Rural	Urban	Total
Preferred sources			
Always public sources (PHC/CHC, District Hospital, SC)	6.0	7.0	6.2
Sometime public source and sometime private	41.3	64.0	46.5
Always private source/doctor	52.3	28.5	46.8
Others	0.5	0.6	0.5
Reasons for always preferring private source *			
Cheaper treatment	7.7	1.8	6.9
Near to my house	11.3	17.8	12.2
Better treatment	86.6	87.5	86.7
PHC/SC are far off	2.5	0.8	2.2
Bad behaviour of PHC staff	4.1	4.1	4.1
No alternative	5.1	4.9	5.0
No medicines available	11.2	20.4	12.5
No staff/doctor available	1.8	4.3	2.2
Takes more time at government hospital	2.1	8.1	3.0
Others	3.4	2.1	3.2
Can't say/Don't know	2.8	0.5	2.5
Certainty about availability of doctor at PHC			
Quite certain	69.9	67.5	69.2
Not certain	23.6	28.5	25.1
Do not know	6.5	4.0	5.7

^{*} Suppress all who mention 1, 2 and 7 in 159

Table 8.7 gives the percentage of women who reported that they pay at the health centres. About 52 percent responded positively. More so from the rural areas (56%) than in urban areas (43%).

Further analysis shows that a very large majority of women are ready to pay for service if it improves. The proportion is almost same in rural as well as in the urban areas (92%).

Table 8.7: Payment for the services at public clinics

	Rural	Urban	Total
Percent of women reporting payment at health centres *	55.9	42.7	51.8
Percent ready to pay for service if it improves	92.7	91.1	91.5

^{*} Supress those answered 159=3

Table 8.8 gives the client-providers contact with the community. About 60 percent of the respondents said that she or someone in the family have had visited PHC/SC. The proportion was 84 percent in urban and 52 percent in rural areas.

Table 8.8: Client-providers' contact

	Rural	Urban	Total
% of women or her HH member contacted PHC/SC workers during last 3 months	52.2	83.6	59.4
Average number of contacts with PHC/SC workers	0.50	0.53	0.51
Mean SD	0.96	0.98	0.97
	16.0	4.8	13.4
% of households visited by workers in the last 3 months			
% of households reported visit of	66.0	59.6	65.5
1 person	25.4	30.8	25.8
2 persons	7.9	9.6	8.0
3 or more persons	0.8)	0.7
Total %	100.0	100.0	100.0
Frequency of visit during last 3 months			
1st person	68.1	69.5	68.1
1	18.3	11.0	17.7
2	13.1	17.1	13.4
3 or more times	0.6	2.4	8.0
DK/missing			
2nd person	72.7	78.4	73.2
1 '	18.4	13.5	17.8
2	7.5)	6.7
3 or more times DK/missing	1.4	8.2	2.2
DKIIIISSIIIg			
Who visited last	92.3	93.8	92.4
ANM/LHV	4.6	-	4.2
Male workers	0.5	2.5	0.7
Doctor	1.3	-	1.2
Others	1.3	3.7	1.5
Percent of families reporting at least one contact with public health service providers	58.9	83.8	64.6

Contrary to this 87 percent of the respondents said that none of the health workers have visited them since last 3 months. This shows that it is usually the community which visits the health centres more frequently than the workers visiting the households.

Of those who reported that someone from the health centre has visited the household, above 66 percent said that only one person has visited them. Moreover, the frequency of visit of this person was mostly (68%) one time.

In most of the cases (92%) ANM/LHV had visited the households. This was true in the rural areas.

Table 8.9 gives the quality of client-provider interface. The table shows that about 66 percent reported that the health workers provided enough time for them. And a very large proportion (94 percent) said that they are satisfied with the assistance provided. Furthermore, about 93 percent expressed their desire for her repeat visit. Even, a large proportion (69 percent) of the villagers hold good opinion about the health workers.

8.9: Quality of client-provider interface

	Number of women reporting visit of a worker	Provided enough time	Satisfied with assistance provided	Would like her to visit again	Villagers hold good opinion about the worker
Urban	36172	66.7	94.6	93.4	67.8
Rural	3197	52.6	92.2	84.8	87.2
Total	39369	65.5	94.4	92.7	69.3

Table 8.10 gives the level of information provided about various F.P. methods by the health workers. The table shows that tubectomy has been mentioned most frequently (69%), followed by IUD/Cu-T (34%), pills and condoms (26% each).

The table further analyses the level of information about various contraceptives. In case of vasectomy, 58 percent and 74 percent mentioned about the use and the source, respectively.

In case of tubectomy 66 percent and 90 percent were informed about the use and source. In case of IUD, 73 percent and 82 percent have been told about the use and the source respectively. 75 percent reported to have availed information on the method of oral pill while 83 percent were informed about its source.

In case of condoms, 75 percent have been informed about the use and 87 percent about the source.

As regards traditional methods such as withdrawal and periodic abstinence, only about 9 to 11 percent reported to have been informed.

Table 8.10: Level of information (detailed) provided about various methods by workers

Methods	Percentage reported that					
	Method was mentioned	Informed advantages and disadvantages		Informed how	Informed about	
		Both	None	to use	source	
Vasectomy	9.2	5.3	25.9	58.4	73.7	
Tubectomy	68.5	7.9	10.8	65.8	89.9	
IUD/CuT	33.6	9.2	17.6	73.3	82.4	
Pills	26.0	16.3	12.8	75.1	83.1	
Condom	26.0	17.1	8.5	75.3	86.7	
Withdrawal	4.5)	20.9	10.8	10.8	
Safe period	5.3	8.8)	9.1	9.1	

Table 8.11 gives the perception of women about ANM. In all, 75 percent expressed their agreement that the ANMs should be young. There is no rural urban differentiation. About 21 percent expressed their agreement that a high caste ANM will not attend to a lower caste woman. On the contrary, 17 percent agree with the fact that an ANM belonging to scheduled caste will not be acceptable to high caste people.

Further, 29 percent agrees with the fact that an ANM does not want to visit or attend deliveries in poor families.

Table 8.11: Perception of women about ANM

	Rural	Urban	Total
% agreeing that a young ANM is better than a traditional dai for assisting delivery	72.5	82.3	74.7
% agreeing that a high caste ANM does not want to attend delivery of scheduled caste women	23.9	10.6	20.8
% agreeing that ANM/Nurse belonging to SC are not acceptable among high caste	19.7	8.4	17.1
% agreeing that ANM often do not want to visit or attend delivery in poor families	31.8	20.7	29.3