A Study on Women of Todapur –Dasghara, Delhi Emphasizing Demographic Profile

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Abstract: *Fertility is generally used to indicate the actual reproductive performance of a woman or a group of women. The present study was conducted to study the reproductive profile of Todapur and Dasghara women in Delhi .The data were collected from Jat dominated villages in different months of the year 2013-2014 from 900 households. The focus of study was the every married women in the reproductive age group of 15 to 56 years. The data was collected through interviews and observations. Data on age at marriage, literacy level, menarche , age at marriage and mortality etc were collected. The results revealed that the mean age at menarche was 13.99 years. The age at marriage was as low as 15 years. This indicated relatively early marriage and child bearing. The mean duration of postpartum amenorrhoea is 4.9 months. 60 percent of the women are illiterate .Crude death rate found to be 7.26 per thousand.*

Keywords: *Demography, fertility, illiteracy, Yadav.*

INTRODUCTION

Fertility is generally used to indicate the actual reproductive performance of a woman or a group of women **(Thompson and Lewis, 1965).** The universe revolves around the maternal and child health. Birth and death of a child is the key controlling the family structure. Every aspect of human life is influenced by fertility today. The fertility of woman is a vital concern to all people. Menarche and menopause govern the beginning and end of fecund period. It is the period during which women can conceive and give birth to a young one. In demographic studies the reproductive span that is the childbearing period of woman is usually taken to be between 15 to 49 years of age. Thus a fecund woman may or may not be fertile but a fertile woman must be fecund. Fertility is associated with the following parameters: age at menarche, age at marriage and age at menopause. There is a wide variation in menarcheal age. These factors including genetics nutrition and social economic conditions influence age at menarche. **(Eveleth and Tanner, 1976; Bhasin, 1990; Bhasin and Nag, 2002.** Genetics perhaps sets the boundaries but environment dictates how one falls within the limits. Similarly menopause is influenced by nutrition, genetics, socio-economic conditions, climate, smoking habits, drugs, contraceptives **(Indian Council of Medical Research, 1998; Frish and McArthur, 1974; Beall, 1983)**. The relationship between age at marriage and fertility is well known and age at cohabitation determines the reproductive life span of a woman and has direct bearing on fertility **(Maudlin and Berelson, 1978; Nag, 1982; Pandey and Talwar, 1987; Chaudhary, 1984).** However**,** it is found that a later stage at marriage reduces fertility. **(Agarwal ,1967;Durch,1980;Yadav and Badari,1997).** Educational level, economic status, religious attitudes, women's work participation etc are other factors affecting fertility **(RGI-fertility survey, 1971; Basu et al., 1988; Bhasin,V., 1990; Elamin and Bhuvan, 1999, Pandey et al., 2000; Bhasin and Nag, 2002)**, in addition to, conception control practices and attitudes, **(Bhuyan and Ahmed,1984).**

Objective of the study: The present paper explores the demographic profile of women of Todapur- Dasghara . In this paper authors want to estimate the various demographic parameters among women including literacy, age at marriage, age at menarche, duration of post partum amenorrhea and mortality.

METHODOLOGY

The present study was conducted among the rural women of Todapur Dasghara in Delhi. The data were collected from ever-married women aged 15-56 years from a sample of 900 households using interview schedule. The interview schedule consisted questions on household identification, ego's name, age, etc besides questions related to literacy, menarche, post partum amenorrhea and mortality. The data collected was statistically treated using descriptive statistics. In some cases age could not be properly assessed due to misstatement of age especially by older women who tend to understate their true ages. There are chances of underreporting in some cases about data on reproductive wastage.

In Delhi, most of the urban villages are engulfed within urban areas have become slum pockets. Delhi had 369 villages in 1981 of which 111 villages were urban and 258 were rural villages. The universe of population is the present study is the urban villages, Todapur- Dasghara with a population of 4134. Todapur-Dasghara is located along the ridge in large master plan green in an area of 20 hectares. The population of these two villages not only comprises of original inhabitants, who are Jat and Yadav, but a good percentage of the population belongs to the migratory population of Bihar. Tap water, Sewage disposal facility and electricity are available in these two villages. Many women, who mainly belong to the migratory population of Bihar, are working in agarbati factories, with wages which are much below the normal wages prescribed by the government.

RESULTS AND DISCUSSIONS

Menarche is the primary indicator of onset of sexual maturation in a female which affects her reproductive life. Age at menarche is varied as it being physiological phenomenon is affected by interaction between different factors such as genetic ,nutrition and socio-economic status (**Eveleth and tanne; 1976**).Earlier, in India ,age at menarche in many societies also determined age at marriage, as girls were married before or immediately after the attainment of menarche (**Mandelbaum, 1974**). Early menarche and late menopause gives greater reproductive span than vice-versa situation, therefore, higher fertility is expected in such cases. Among Todapur-Dasghara girls, menarche is relatively uncommon before 13 years of age. Menarcheal age for ever married women ranges between 11 and 18 years. The median age at menarche is 14.0 years

[mean age at menarche is 13.99 years].The mean menarcheal age is almost same as that for rural Indian population (mean 14.04 years: ICMR,1972)

The Crude Birth Rate is a rate of total registered live birth to the total population also in a specific year, multiplied by thousand

$$CBR = \frac{\text{Total population of children who took birth in a year}}{\text{Total Population}} \times 1000$$

Where CBR –Crude Birth Rate

B= Total number of birth Registered during calendar year

P= Total Population at the middle of the year

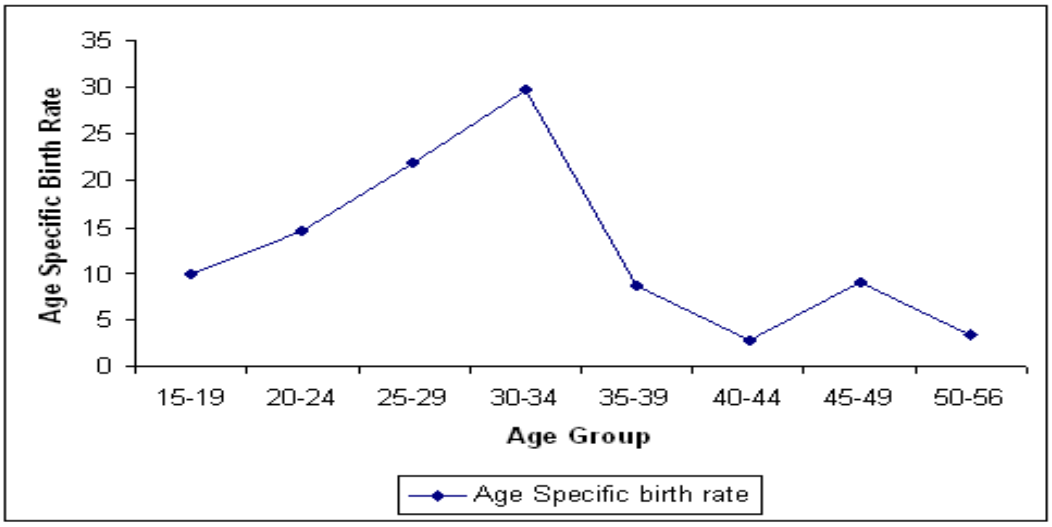
K= Thousand

$$CBR = \frac{B \times K}{P}$$

A look at the current fertility level indicates that CBR for women of Todapur –Dasghara is 24.38 births per 1000 individuals .It is higher than all Delhi Crude birth rate for year 2002 [17.2:SRS,2003], but slightly lower than all India [25.0:SRS,2003].The total fertility rate is 1.24 per 1000 woman. The estimates of age specific fertility rates show that majority of total fertility is concentrated in the prime child bearing age of 20-34 yrs. [Table-1 and Graph-1].The fertility rate declines in the next age group 35-39 yrs. Among Todapur-Dasghara women, early child bearing at the age of 15-19 years and child bearing at the age of 39 years and above is quite low. Anova test when applied showed a highly significant value (p value < 0.05) within different age groups and the age specific birth rate.

Table- 1: Age specific birth rate for the population of Todapur, Dasghara

Age group	Age specific birth rate	F test (P value)
15-19	10.00	4.769 (.000)
20-24	14.55	
25-29	21.8	
30-34	29.6	
35-39	8.7	
40-44	2.79	
45-49	8.99	
50-56	3.33	

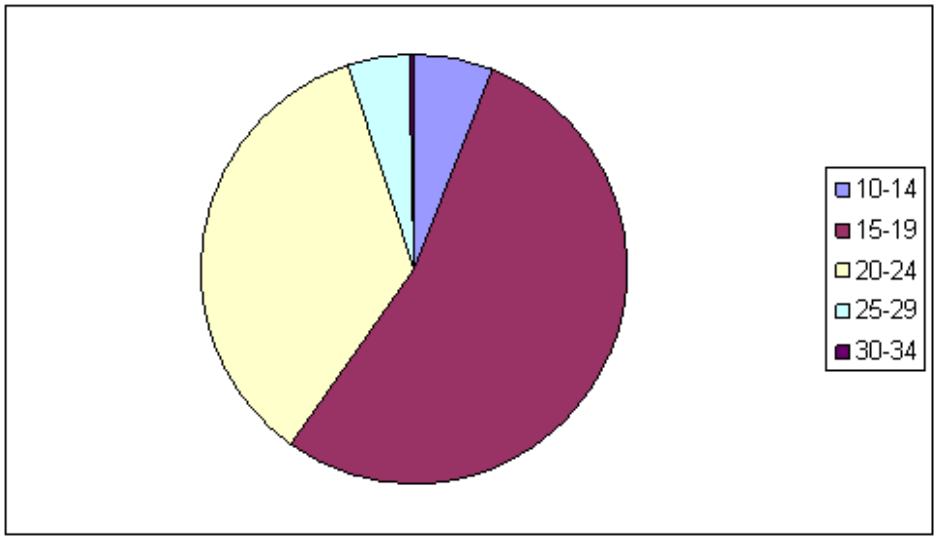


Graph 1: Showing the age specific birth rate of the population of Todapur-Dasghara.

In the present study age at first marriage refers to age at formal marriage. In this group, the formal marriage is always immediately followed by cohabitation, because most of the marriages are taking place after the age of 15 years. The study of patterns of age at first marriage indicates that more than 53.6% of the women got married between 15-19 years of age while proportion marrying before 15 years of age and above 25 years of age is low (Table 2).It is observed that 59.7% of the women got married before 18 years of age (Table- 2).The median age at first marriage for women aged 15-56 years is 18 years.(mean 18.72years). The Anova test when applied between the age groups and the number of marriages showed a significant difference at the level of $p < 0.05$.

Table -2: Showing the distribution of ever married women, by age at first marriage

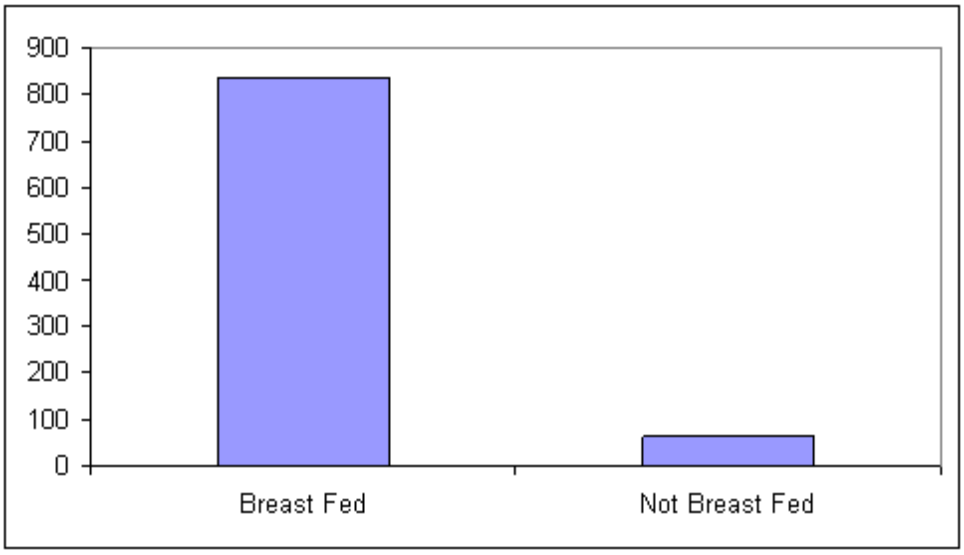
Age-cohort		Number of marriages	Percent	**F test (P value)**
	10-14	55	6.1	4.12 (.003)
	15-19	482	53.6	
	20-24	317	35.3	
	25-29	43	4.8	
	30-34	3	.2	
	Total	900	100.0	



Pie-2: Showing the distribution of ever married women by age at first marriage

Table-3: Showing the number of mothers who breast fed their children.

		Number	**Percent**
Breast Fed		837	93.0
Not Breast Fed		63	7.0
	Total	**900**	**100.0**



Graph 3: Showing the number of mothers who breast fed their children

The duration of postpartum amenorrhoea following a birth is closely associated with the duration of breast feeding, which tends to suppress resumption of ovulation (**Huffman et al.,1987; Srinivasan et al.,1989; Babu,1996**).Thus lactation amenorrhoea is one of the factors that influence the risk of pregnancy following a birth. The proportion of amenorrhoeic mothers gradually decreases as number of months since birth increases. This is also related to breastfeeding of children. Breastfeeding is the major determinant of prolonged postpartum amenorrhoea. The birth interval and the resumption of next menses, in societies where it is universal, prolonged and of high intensity (**Singh and Negi,1985; Srinivasan et al.,1989**).However the duration of post partum amenorrhoea varies from women to women (**Knodel and Lewis,1984; Jones,1988**).

Table-3 and Graph-3 shows the number children who have been breast fed and number of children not breast fed. The number of children who have been breast fed is 93% and children who have not been breast fed is 7%.Thereby showing that only a small percentage of children have not been breast fed, that too only in cases where the mother was not well and thus not able to feed the child.

Mortality checks the unlimited growth of population and regulates the distribution of individuals in different age groups. It is a continuous force of attrition tending to reduce population but

having its effects counteracted by the force of fertility. The crude death rate for people of Todapur-Dasghara is 7.26 per 1000 population which is higher than all Delhi crude death rate for year 2002.(5.1:SRS,2003).The literacy rate is quite low, about 60 percent of women are illiterate.

CONCLUSION

From the foregoing discussion, it may be concluded that in general, the egos are currently married, less educated and engaged in household activities. Fertility among Todapur-Dasghara women is higher than all Delhi population as indicated by period and cohort measures of fertility as well as by lower mean age at effective marriage for females. Todapur-Dasghara women are by and large reproductively active during prime childbearing ages of 20-29 years. Women tend to marry early and there is still a fair amount of fertility at very younger ages. Infant and child mortality is relatively higher in groups where fertility is higher, reflecting a well recognized fertility-mortality relationship. The mean duration of postpartum amenorrhoea is 4.9 months. Mean age at menarche is 13.99 years. Though Infant Mortality Rate is lower among these people, but overall mortality (CDR- crude death rate) is slightly higher than all Delhi population with respiratory disorder being the primary cause of death. It may be concluded that among Todapur-Dasghara, woman's age has most significant effect on fertility as well as use of birth control methods while infant mortality is chiefly influenced by fertility.

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