



DEMOGRAPHIC PARTICULARS OF STERILIZED
PERSONS IN PONDICHERRY REGION

1967 - 68

An
Evaluation Report

ISSUED BY
BUREAU OF STATISTICS & EVALUATION
GOVERNMENT OF PONDICHERRY
1969

INTRODUCTION

The "Demographic Particulars of Sterilised Persons in Pondicherry Region 1967-68" is the fifth issue in the Evaluation series of the Bureau of Statistics and Evaluation, Pondicherry. This issue critically deals with the sterilisation aspect of the family planning activities as carried out in Pondicherry Region by the Department of Health and Family Planning Services, Pondicherry.

The willing co-operation extended by the Department of Health and Family Planning Services, Pondicherry, in providing all facilities in connection with this study is gratefully acknowledged. The comments of the Director of Health and Family Planning Services, Pondicherry, are also appended to the report.

It is hoped that the present report will be quite useful for all those who are concerned with the evaluation of plan schemes.

Pondicherry,
16th October, 1969.

S. MUTHUBASAVAN,
Director.

DEMOGRAPHIC PARTICULARS OF STERILISED PERSONS IN PONDICHERY REGION, 1967-68.

Government of India had made a prompt beginning to propagate family planning activities even in the First Five Year Plan. In the draft outline of the Fourth Plan a sum of Rs. 95 crores has been tentatively set apart for propagation of family planning methods and the implementation of the plans. The Government of India is now contemplating in terms of making sterilisations compulsory for persons who have three or more children. Similarly the necessity of raising girls' age of marriage is also put forward as an effective device of family planning method. All these tend to highlight the seriousness of the population explosion and the urgent need to limit the size of the family.

Speaking of this Union Territory, it is pointed out that according to the 1961 population census the total population was 3,69,079 and the annual growth rate was 1.5%, while the All India Growth rate was 2.15%. The density of population was 780 per square K. M. while it is 144 per square K. M. for the entire country. The Union Territory of Pondicherry has an area of 0.01% of the total area of the Indian Union, while its population is 0.08% of the total population of the Indian Union. In other words the density of the population is rather high and in this respect the Union Territory ranks third when compared to the States and Union Territories. The pressure of population on land can be said to be the basic cause of food scarcity, growing unemployment and decreasing level of income and the consequent economic bottleneck.

The density of population in the Pondicherry Region is higher than that of the density of the Union Territory as a whole. There are 889 persons per sq. kilometre as against 780 persons for the Union Territory. Among the four regions constituting the Union Territory, Pondicherry region is next only to Mahe region in so far as the density of the population is concerned. The population of the region has registered gradual increase due

to steady growth. Consequent on the various public health schemes and improvement of medical science in combating the human diseases, the death rate has been receding while the birth rate has risen. The mean decennial birth rate has increased to 38.2 in the decade 1951-60 from 36.4 in the decade 1941-50 in Pondicherry region. Conversely the mean decennial death rate has decreased to 26.3 in the decade 1951-60 from 33.7 in the decade 1941-50. The pressure of population in this region is quite considerable and is increasing steadily since Pondicherry is fast becoming more industrialised consequent on the setting up of small scale industries in and around Pondicherry Town. It therefore becomes imperative to effectively popularise family planning measures in Pondicherry region.

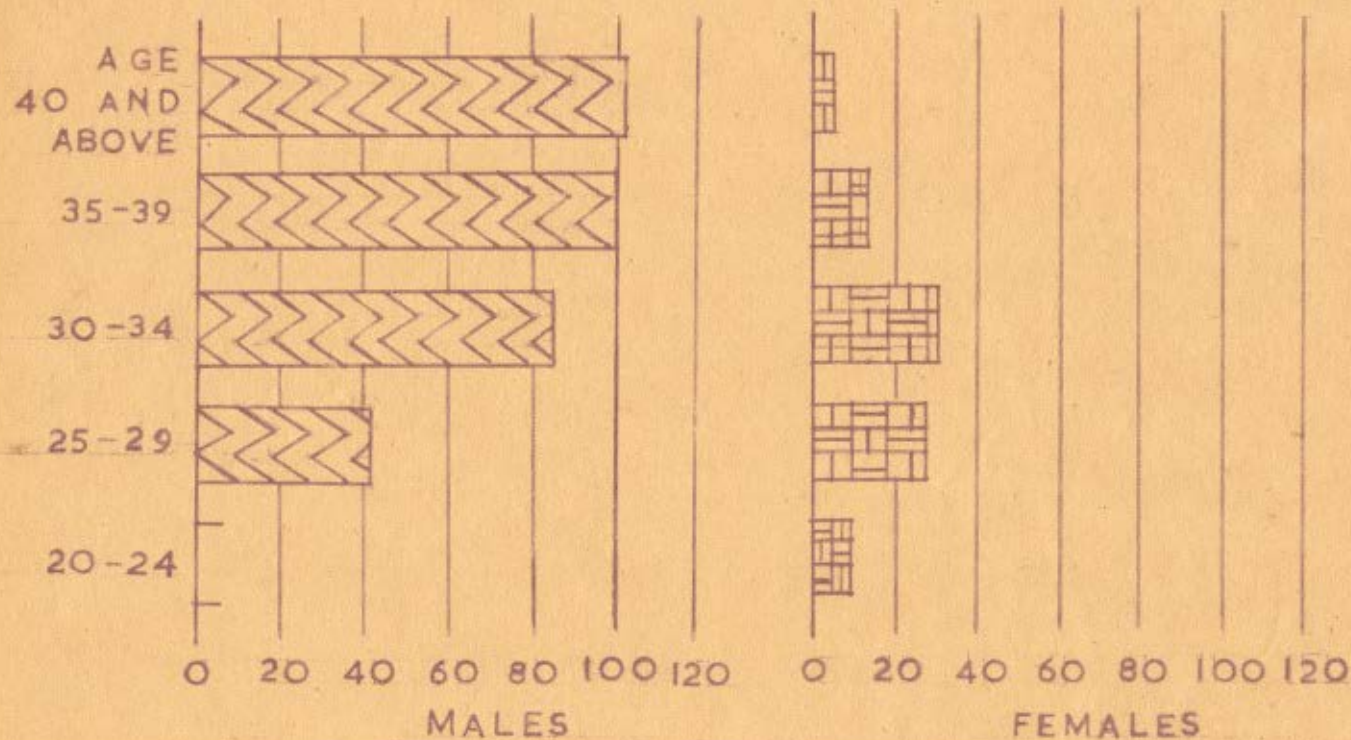
There are quite a good number of family planning devices for the control of birth. Of all these by far the best and the most effective method is the sterilisation operation. This operation can be performed either on men or on women. The choice of undergoing the operation is left to the wishes of the husband and the wife.

A modest beginning was made in the year 1961 towards propagation of family planning measures in this Territory. However, much head way could not be made in the initial stages. The scheme has gathered momentum gradually.

II. Previous Studies : No previous study of any kind regarding family planning measures was conducted. This is the first attempt at assessing the impact of the family planning programme in so far as this Territory is concerned.

III. Object of the Study : The principal object of the present study is to highlight the progress achieved by the family planning programme in controlling the birth rate. Simultaneously it is also intended to spotlight the different aspects like age, sex, education, religion, income, number of children born and the general fertility pattern of the population who undergo sterilisation. The response to family planning programme from the different religious groups has also to be studied so that more attention could be paid wherever necessary.

STERILISED PERSONS ACCORDING TO AGE



IV. *Limitations* : This study has some obvious limitations. The data furnished were collected by the staff of the Family Planning Clinics and it cannot be said that the details were the result of scientific investigations. Hence, it may be noted that the conclusions arrived at may not be totally correct.

Table 4.1

Distribution of Sterilised Persons according to age and sex

Age	Males	Per- cent- age	Females	Per- cent- age	Total	Per- cent- age
1	2	3	4	5	6	7
20-24	-	-	9	10.7	9	2.2
25-29	41	12.4	27	32.2	68	16.4
30-34	86	26.1	29	34.5	115	27.8
35-39	100	30.3	13	15.5	113	27.3
40 and above	103	31.2	6	7.1	109	26.3
N. R.	-	-	-	-	-	-
Total	330	100.0	84	100.0	414	100.0

The total number of sterilisations performed was 414 out of which 330 were on males and 84 were on females. The proportion of females sterilised to total sterilisations was 20.3%. This proportion even though it cannot be said to be remarkable, is quite considerable.

It will be seen that a large number of males sterilised are in the age-group 40 and above. 31.2% of the males got sterilised only after attaining the age 40 and above. In view of the fact that a large number of males adopt sterilisation practically very late the real goal of the programme cannot be said to be achieved. In other words it is imperative to urge early sterilisation so that the birth rate could be effectively controlled.

In respect of females the highest number sterilised is in the age-group 30—34, the percentage being 34.5. 22.6% of the females sterilised fall under the age-group 35 and above. In this respect

the females are also on a par with males, in the sense that sterilisation is adopted at a very late age. Obviously special efforts should be taken to induce younger ladies to undergo sterilisation. This is all the more important since women get married comparatively early in our country (as late marriages are considered to be against religious sanctity).

Table 4.2
Distribution of Sterilised persons according to Religion and Sex

S. No.	Religion	Males	Percentage	Females	Percentage	Total	Percentage
1	2	3	4	5	6	7	8
1.	Hindu	268	81.2	74	88.1	342	82.6
2.	Christian	47	14.2	5	5.9	52	12.6
3.	Muslim	15	4.6	5	5.9	20	4.8
4.	Not recorded	—	—	—	—	—	—
Total		330	100.0	84	100.0	414	100.0

The above table furnishes data of sterilised persons according to religion and sex. It will be evident that as much as 82.6% of the sterilised persons belong to Hindu religion. In other words only 17.4% of the sterilised persons are non-Hindus. Among non-Hindus, Christians constitute 12.6% while the remaining 4.8% are Muslims. This clearly shows that response to sterilisation is equally encouraging in all sections of the population—the Hindus, Christians and Muslims in this region—because these percentages roughly correspond to actual composition of the population of Pondicherry region on regions basis which are as follows :—

Table 4.2 (a)

S.No.	Religion	Males	Females	Percentage to Total	
				Males	Females
1	2	3	4	5	6
1.	Hindus	1,14,996	1,11,776	88.4	86.9
2.	Christians	11,391	13,040	8.7	10.2
3.	Muslims	3,471	3,538	2.7	2.7
4.	Other religions	192	157	0.2	0.2
Total		1,30,050	1,28,511	100.0	100.0

STERILISED PERSONS ACCORDING TO RELIGION



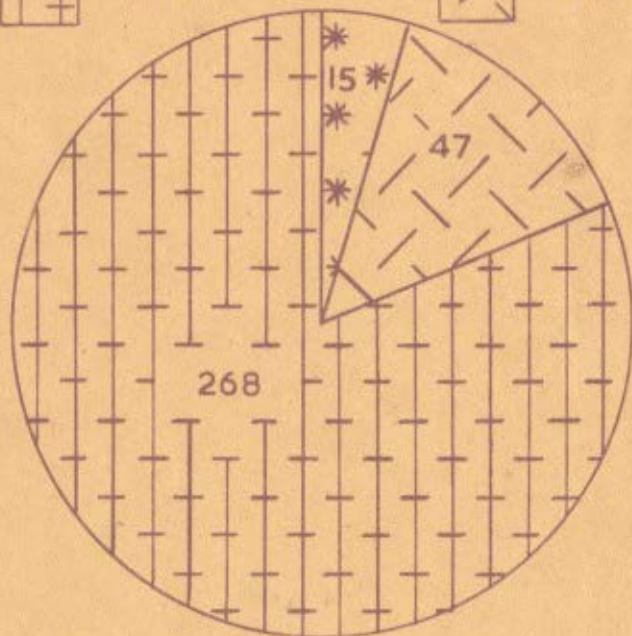
HINDUS



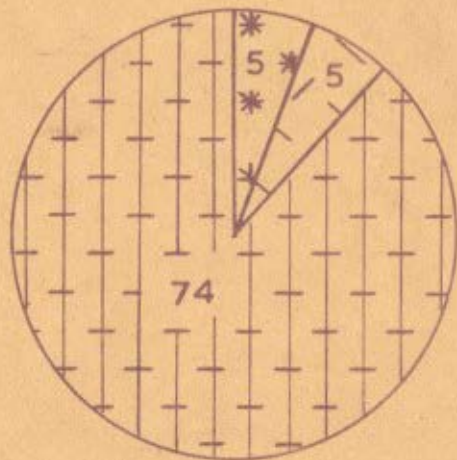
CHRISTIANS



MUSLIMS



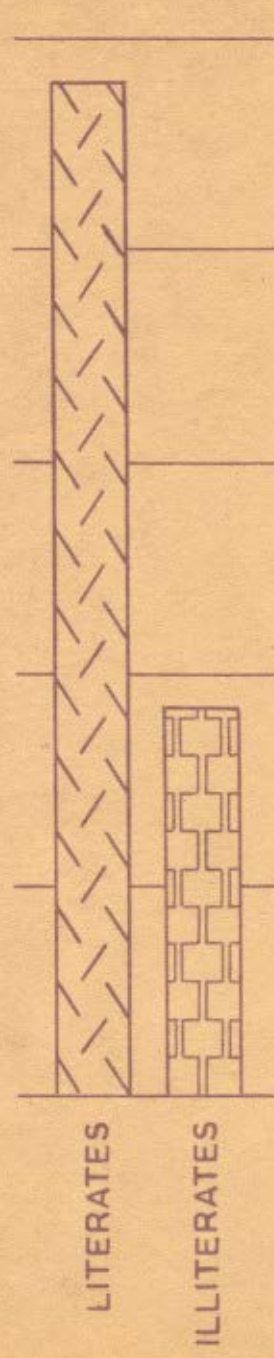
MALES



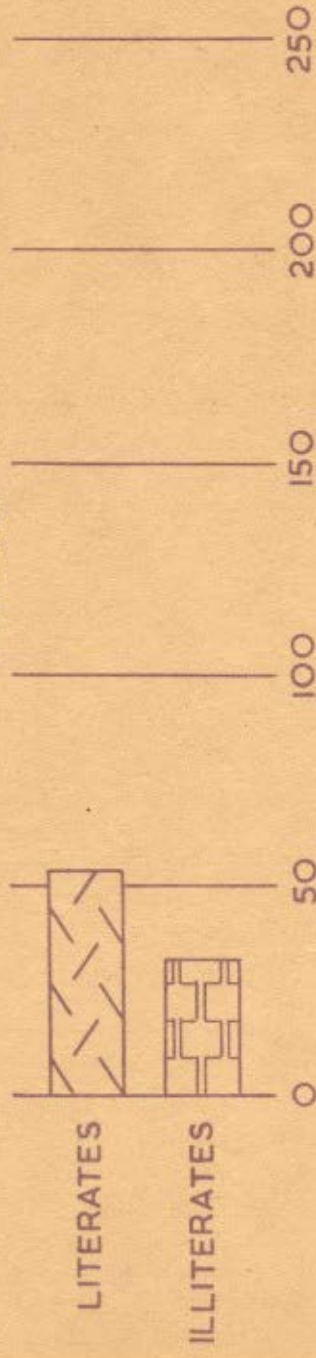
FEMALES

STERILISED PERSONS ACCORDING TO LITERACY

MALES



FEMALES



However, it cannot but be pointed out that females in all the religious groups are lagging behind the males in respect of sterilisation. Special efforts should, therefore, be taken to convince the women to adopt birth control methods.

Table 4.3
*Distribution of Sterilised Persons according to
Educational Standards*

S. No.	Educational Standards	Males	Percentage	Females	Percentage	Total	Percentage
1	2	3	4	5	6	7	8
1.	Illiterate	91	27.6	31	36.9	122	29.5
2.	Below Primary	239	72.4	53	63.1	292	70.5
3.	Passed Primary						
4.	Passed middle below middle						
5.	Passed middle below matric						
6.	Matric						
7.	Above Matric	330	100.0	84	100.0	414	100.0
	Not recorded						
Total		330	100.0	84	100.0	414	100.0

The above table throws light on the educational standards of the sterilised persons. Due to non-availability of accurate data, as seen above, it will not be possible to arrive at precise conclusions. However, it is obvious that the literate take to sterilisations more favourably than the illiterate. Of recorded cases 29.5% are illiterate. However, viewing from the angle that 64.77% in the Pondicherry region are illiterate an achievement of 29.5% cannot be said to be an impressive achievement. It is however heartening to find that among the illiterates the percentage of female response is better than the response from the males.

Table 4.4

Distribution of Sterilised Persons according to income and sex

Income		Males	Per- centage	Females	Per- centage	Total	Per- centage
1		2	3	4	5	6	7
Below		50	77	23.3	—	77	18.6
Between	50 - 99	137	41.8	—	—	137	33.1
"	100 - 149	42	12.7	—	—	42	10.1
"	150 - 199	32	9.9	—	—	32	7.7
"	200 & above	15	4.5	—	—	15	3.6
Not recorded		27	8.2	84	100.0	111	26.8
Total		330	100.0	84	100.0	414	100.0

As the income of the entire female sterilisations was not recorded, it will be meaningful to analyse the male sterilisations alone. Of the total male sterilisations in respect of 27 sterilisations or 8.2% income was not recorded. 65.1% of those who had undergone sterilisations have an income of less than Rs. 100. Only 27.1% of the male sterilisations have an income of more than Rs. 100. The important aspect is that there appears to be a definite bearing on sterilisations and earning capacity. However, it may not be ruled out that some persons might have quoted low income deliberately in view of the financial assistance granted for sterilisations. This factor should also be taken into account while analysing the reasons for the remarkable percentage of sterilised persons in the low-income group.

STERILISED MALES ACCORDING TO INCOME

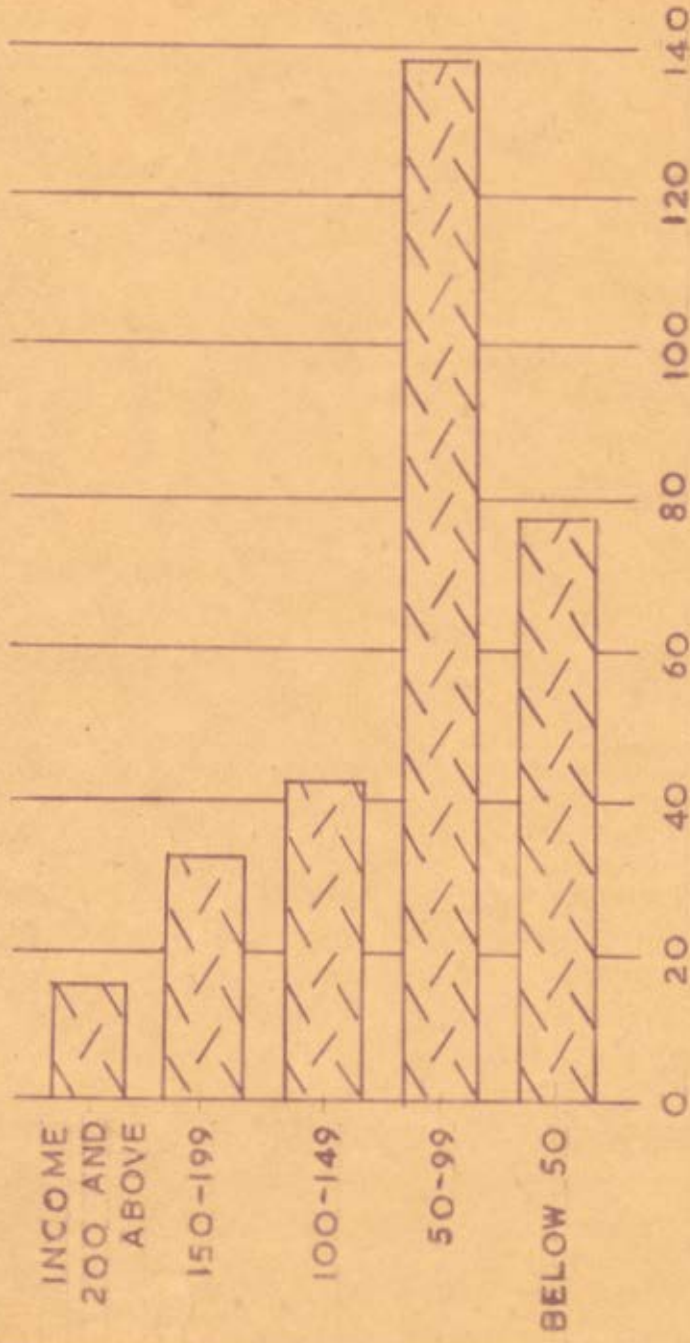


Table 4.5

*Distribution of Sterilised Persons according to
number of children living by sex*

Number of children living		Percen- Males	Percen- Females			
1	2	3	4	5	6	7
1	—	—	1	1.2	1	0.2
2	7	2.1	3	3.5	10	2.4
3	204	61.9	21	25.0	225	54.3
4	68	20.6	25	29.8	93	22.6
5	28	8.5	13	15.5	41	9.9
6	16	4.8	11	13.1	27	6.5
7	7	2.1	5	5.9	12	2.8
8	—	—	4	4.8	4	0.9
9	—	—	1	1.2	1	0.2
10 and above	—	—	—	—	—	—
Not recorded	—	—	—	—	—	—
Total	330	100.0	84	100.0	414	100.0

It will be evident from the above table that 61.9% of males and 25.0% of the females sterilised have three children living at the time of the operation. On the whole it will be seen that 54.3% of the males and females who were sterilised have three children living at the time of the operation. Apparently the males reacted in time for sterilisation while it was not the case with the females. Nearly 70.3% of the females who got sterilised have four or more children, while in the case of males the percentage is only 36. In fact in the case of one lady, sterilisation has been done only after the ninth child was born. This is inadequate data to conclude that sterilisation was resorted to, not to limit the control of birth but due to other exigencies. An inference in that direction cannot be ruled out.

Table 4.6

*Distribution of Sterilised Females according to
number of children born and age*

Age	Number of Children born											N. R.	Total	Ave- rage
	1	2	3	4	5	6	7	8	9	10 & above	11			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
15-19	—	—	—	—	—	—	—	—	—	—	—	—	—	—
20-24	—	—	4	2	3	—	—	—	—	—	—	—	9	3.8
25-29	—	—	5	9	7	1	1	2	2	—	—	—	27	4.9
30-34	—	—	5	5	2	8	5	2	—	2	—	—	29	4.9
35-39	—	1	1	1	1	2	4	2	—	1	—	—	13	6.1
40 and above	—	1	—	1	—	1	—	1	2	—	—	—	6	6.3
Not recorded	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total	—	2	15	18	13	12	10	7	4	3	—	—	84	5.1
Percentage	—	2.4	17.8	21.4	15.5	14.3	11.9	8.3	4.8	3.6	—	—	100.0	—

The criterion to arrive at the successful implementation of the family planning programme is the assessment of the number of children born to the couple at the time of sterilisation. From the above table it is seen that the average number of children born to couple whose female partner is sterilised is 5.1. It may again be noted that the percentage of sterilised females who have 3 or or less children is only 20.2. In other words in respect of 79.8% of the females, sterilisation has been done only after the birth of the fourth child. This trend should be checked and steps should be taken to induce ladies to resort to sterilisation when they have three or less number of children. Only under these circumstances, the birth rate will be effectively brought down and the desired target of the family planning programme can be achieved.

Table 4.7

*Distribution of Sterilised Persons according to
number of children born and age*

Age	Number of Children Born										Average			
	1	2	3	4	5	6	7	8	9	10 and above	N. Total	No. of children		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
15 - 19	-	-	-	-	-	-	-	-	-	-	-	-	-	-
20 - 24	-	-	-	-	-	-	-	-	-	-	-	-	-	-
25 - 29	-	2	27	11	-	-	1	-	-	-	-	-	41	3.3
30 - 34	-	1	53	21	5	6	-	-	-	-	-	-	86	3.5
35 - 39	-	-	43	29	13	7	6	1	1	-	-	-	100	4.1
40 and above	-	1	26	21	23	14	12	3	1	2	-	-	103	4.8
Not recorded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total	-	4	149	82	41	27	19	4	2	2	-	-	330	4.1
Percentage	-	1.2	45.2	24.8	12.4	3.2	5.8	1.2	0.6	0.6	-	-	100	-

As in the case of females, in respect of males too who have undergone sterilisation, the average number of children born is also fairly high. However, it should be noted that the average is somewhat lower when compared to the females. The actual average number of children born to males who have undergone sterilisation operation is 4.1. 46.40% of the sterilised males have three children and less. In other words 53.60 of the males have four or more children.

Table 4.8

*Distribution of Sterilised Males according to the
number of children living in each sex*

Male Children living	Female children living							6 and N.R. above	Total	Per- centage
	0	1	2	3	4	5				
1	2	3	4	5	6	7	8	9	10	11
0	-	-	2	8	3	-	-	-	13	4.0
1	-	4	88	18	4	1	1	-	116	35.2
2	1	94	30	7	2	2	-	-	136	41.2
3	14	13	12	4	1	-	-	-	44	13.2
4	-	5	7	2	-	-	-	-	18	5.5
5	-	2	1	-	-	-	-	-	3	0.9
6 and above	-	-	-	-	-	-	-	-	-	-
Not recorded	-	-	-	-	-	-	-	-	-	-
Total	19	118	140	39	10	3	1	-	330	100.0
Percentage	5.7	35.7	42.5	11.8	3.1	0.9	0.3	-	100.0	-

The above table indicates that among the sterilised males 41.2% have two male children living while 42.5% of the males sterilised have two female children living. 4% of the sterilised males have no male children living while 5.7% of the sterilised males have no female children living.

Table 4.9

Distribution of Sterilised Females according to the number of children living in each sex

Male Children living	0	1	2	3	4	5	6 and above	N. R.	Total	Percentage
1	2	3	4	5	6	7	8	9	10	11
0	-	-	-	1	-	1	-	-	2	2.4
1	1	1	10	6	3	-	-	-	21	25.0
2	2	6	12	5	1	-	-	-	26	31.0
3	4	6	1	1	2	1	-	-	15	17.8
4	1	3	1	2	1	-	-	-	8	9.6
5	-	3	1	1	-	-	-	-	5	6.0
6 and above	5	-	1	1	-	-	-	-	7	8.3
Not recorded	-	-	-	-	-	-	-	-	-	-
Total	13	19	26	17	7	2	-	-	84	100.0
Percentage	15.5	22.6	31.0	20.2	8.3	2.4	-	-	100.0	-

2.4% of the sterilised females do not have male children living while 15.5% of the sterilised females have no female children living. It is seen that 31.0% of the sterilised females have two male as well as two female children living at the time of the operation.

SUMMARY AND CONCLUSIONS :

The preceeding paragraphs brings to light the following salient features.

(1) Females are lagging behind males in sterilisation. While the total number of sterilisation operations were 414, females account for only 84. In other words only 20.3% of the total sterilisation were conducted on females and this figure has to be termed low. This may perhaps be due to the fact that sterilisation on females can be done only at the time of delivery and requires hospitalisation for about a week or ten days. In

the case of males, sterilisation can be performed without hospitalisation. Further, facilities for female sterilisation are available only at the Maternity Hospital, Pondicherry, while for male sterilisation facilities exist in all the Primary Health Centres.

(2) In a large number of cases of both males and females, sterilisation has been performed rather late in their life. This conclusion applies equally well both in regard to the age at which the operation was performed as well as to the number of issues born at the time of sterilisation. In respect of males the maximum number of sterilisations performed fall in the age-group of 40 plus while in the case of females it is in the age-group of 30-34. As regards the average number of children at the time of the operation, it is 5.1 in respect of females and 4.1 in respect of males. This is a cause for considerable concern and the urgent need for a even more effective implementation of the Family Planning programme is felt.

(3) As regards the correlation of sterilisation with earnings it should be noted that the income of the entire females sterilised were not recorded. Hence the analysis should be restricted to males alone. Even with regard to males, income particulars were not recorded for 27 cases. Any way it is significant to note that 65.1% of the males sterilised have an income of Rs. 99 and below. Generally speaking this tendency is quite good but it should also be noted that there is the danger of certain persons understating their income with a view to derive some financial assistance just because of the sterilisation.

It is further suggested that the State Family Planning Department should endeavour to record the earnings of the sterilised females also in case they happen to be employed. Similarly the occupation of the sterilised persons should also be obtained. These two particulars will make the findings of the analysis more purposeful and will also throw light on the attitude of the sterilised persons. With more number of staff at the disposal of the Family Planning Wing, significant progress can be achieved.

*Comments of Director of Health and Family Planning
Services, Pondicherry :*

The following comments are offered on the findings of the Evaluation Report on Family Planning Programme captioned "Demographic particulars of Sterilised persons in Pondicherry Region 1967-68" prepared by the Director of Statistics and Evaluation, Pondicherry .

Page 2 : para from pre-page

Though population pressure is considered to be one of the offsetting factors in the economy, it is conditioned by the relative level of economic development. The statement, "The Pressure of population on land can be said to be the basic cause of food scarcity, growing unemployment and decreasing level of income and the consequent economic bottleneck" may be revised suitably or omitted completely.

Page 5 ; para 2

The observation "as late marriages are considered to be against religious sanctity" may be deleted as the present thinking of the Government is to encourage late marriage and the Government have been contemplating to bring in a legislation for raising the age of marriage. It is to be pointed out in this context that for men age factor is not to be considered, for the obvious reason that fertility potentiality is retained by males even in very late ages.

Page 9 ; para 1

The fact that 54.3% of the recorded cases of both sexes of sterilised persons have three children and 22.3% of sterilised persons have four children at the time of the operation, definitely prove that people have shown acceptance for sterilisation as the effective birth control method for limiting the size of their families. The inference drawn in the report "that sterilisation was resorted to not to limit the control of birth but due to other exigencies" has

not to limit the control of birth but due to other exigencies" has no support of factual evidence, as it is based on the information of one single stray case. We do not agree with the vague phrase "due to other exigencies".

I am to conclude that the study that has been made for the year 1967-68 is not complete and elaborate.

The Evaluation Report received from the Finance Department is herewith returned.

*Director of Health and
Family Planning Services.*