

Not for Publication

Preliminary Abstract

FERTILITY CONTROL AND SOCIAL CHANGE IN INDIA

The attempt to lower India's fertility by deliberate policy resembles other attempts to speed up the course of social change. In every such attempt there is the assumption that, without intervention, the change will occur (if it occurs at all) as part of a normal and virtually automatic pattern of development which has been observed in the past. With respect to population, the pattern of change is known as the demographic transition; and the problem is whether or not the gap between mortality and fertility which ordinarily occurs in this transition can be deliberately minimized.

Examination of the demographic transition shows that it is clearer as an abstraction than as a description of actual fact. It is a rough empirical generalization which does not fit any set of historical data perfectly and shows considerable variation from one country to another. As such, it is a dangerous instrument when used for purposes of prediction.

The normal lag of fertility decline behind mortality decline raises two questions: First, does this lag have to occur? Second, if it does occur, how long does it have to last and how severe must it become? In the case of India the question is idle, because the lag is already visible -- notably since 1918. The second question is highly pertinent, but it cannot safely be answered on the basis of past experience. For one thing, the time required for the demographic gap to recede after reaching the point currently exhibited in India cannot be determined accurately for Western countries, partly because the elements constituting the current position are different. Departing from the rate of

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natural increase alone (12.5 per 1,000 per year in India during 1941-51), we find the time required for completion of the cycle after this point in Britain was roughly 30 years. But while this rate of natural increase is comparable to that in Britain in 1901-1911, nothing else is comparable. In terms of the Indian birth rate, the time required to complete the cycle, by analogy with Britain, would be 55 to 60 years; and on the basis of the death rate it would be approximately 135 years. Thus analogical reasoning in terms of the demographic transition is of little value except to demonstrate its ambiguity.

If attention is given to other patterns of change -- such as the industrial revolution -- it will be found that not all of the stages are repeated in each new country experiencing the change. Underdeveloped countries today are taking over the latest developments without going through all the intermediate stages which led to these developments. If this variability is true of the process of economic modernization, it must also be possible with respect to demographic modernization. In fact, a noteworthy difference in the cycle as it is emerging today is the tendency of mortality to decline much faster than it did previously at a similar stage of economic development in Western countries. This is one of the new features which is putting great pressure on families to reduce their fertility. Other new elements having the same tendency (also noticeable in India) are the following: (1) The ever tighter governmental control over agricultural production and marketing; (2) the availability of new means of communication for mass education and propaganda; (3) the wide currency of humanitarian and egalitarian doctrines affecting the role of women and attitudes toward children; (4) the common realization that social change is not only possible but inevitable. Such elements as these, together with the rapid fall in the death rate and the consequent increase in rural densities and the

cost of land, make a rapid spread of fertility control even among an Asian peasant population seem possible. The old social structure supporting high fertility is crumbling fast. Field studies indicate that already Indian families wish to limit the number of children. The Indian government's program for fertility control is therefore not a hopeless effort. If the program is strengthened and expanded, it may give an extra push to a tendency already incipient, and thus may reduce the duration of size of the demographic gap.

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