

## Chapter II

### REVIEW OF LITERATURE

Why almost all developing countries are experiencing rapid population growth? Why some people produce more children while some are satisfied with a few? What are the consequences of this unprecedented population growth? How can we check it? These are only some of the many similar questions being raised, debated, researched and worked on for more than three decades. In fact "Population" in its broadest sense cuts across many academic disciplines and professional interests. Breadth of the "Population" field covers biological, psychological, social, anthropological, environmental, economic, political, educational, health and related fields. In this respect, major purpose of this chapter is to present literature which reviews efforts of social work and social sciences for the problems of fertility and family planning in the larger context of socioeconomic development. This presentation provides the basis for a social work relevant research problem which was delineated and presented in the first chapter.

The present chapter begins with an assertion that social work profession is primarily concerned with providing services

to alter psycho-social functioning of people for improving quality of life. Improvement in quality of life or socio-economic development affects and is affected by the population growth and family planning programs. In view of this interdependence, participation of social work in family planning can be visualized as follows : Social Work should help the people to restrict their family size and thereby help the nation to check population growth which in turn will facilitate speedier socioeconomic development. In this connection, efforts of social sciences and social work in the areas of fertility and family planning have been reviewed.

#### Society's Need for Specialized Services :

Developmental processes affect and are affected by economy, polity and society at large. One of these pervasive effects is<sup>3</sup> an increased need for specialized services. Services which were traditionally an integral part of or responsibility of family or immediate local community are no longer considered adequate. At the present time, transport and communication services, educational services, welfare services, health services, etc. demand specialized knowledge and skills on the part of relevant occupational groups to perform specialized tasks to deliver these services and to solve problems in these areas. In return for their knowledge

and skill based services, the society offers money, power and prestige to these occupations.

### Social Work's Concern for Socioeconomic Development :

What kind of specialized services are provided by Social Work? Review of social work literature suggests that concern for fellow human being and helping activities have existed since long. Organization of helping activities became more specialized as general organization increased. Taking a clue from their predecessors in philanthropic and social reform work, the social workers in U.K. and U.S.A. started recognizing the need for specialized knowledge, skills and values in delivery of social services. Since the beginning of this century, much has been written about the history of social work in various countries and attempts are being made to increase the professional elements (i.e. knowledge, skills and values), in delivery of social services. These professional elements are discussed in Flexner (1915); Carr-Saunders and Wilson (1933); Greenwood (1957); Mackey (1964); Vollmer and Mills (1966); Nanavatty (1968); Etzioni (1969); Weinberger (1969); Moore (1970); Meyer (1971); and Miller (1971). Culmination of these ideas can be seen in Alexander's (1977) definition of Social Work Practice. He states that :

"Social Work practice would then be defined as a professionally guided system that engages people

and their social units in change activities to alter their psycho-social functioning for the purpose of improving the quality of life."

We need to note that this is one of the latest (1977) works of a scholar, educator and practitioner of Alexander's standing.

Similarly, historical development of social work philosophy, education and practice in India, as well as its recent concern for socioeconomic development have been discussed by Encyclopedia of Social Work in India (1968); Report of First and Second Review Committee of University Grants Commission on Social Work Education in India (1965 and 1978); Gore (1965); Wadia (1968); Gokhale (1974); Ganguli (1976); Seminar on Four Decades of Social Work Practice and Education in India (1977); Kulkarni (1979); and Special Number on Rural Development of the Indian Journal of Social Work (January, 1979). This literature discusses various issues of which two themes seem to be most prominent. One : inadequate socioeconomic development of India, and Second : inadequate participation of social work in the socioeconomic development programs. Before we elaborate these two themes, let us clarify the concept of socioeconomic development.

### Concept of Socioeconomic Development :

The term socioeconomic development has been used along with other similar terms like, Social Development, Planned Development, Planned Change, Social Change, Quality of Life, Modernization etc. In spite of the fact that there are similarities among these terms, each of the social science discipline has focussed on different aspects of these concepts. For example, economists have focussed on economic aspects while political scientists on polity. As a result, none of the definitions of socioeconomic development is generic enough to include various aspects of economy, society and polity. Even among the same discipline, a unanimously accepted definition of socioeconomic development seems to be non-existent. This has made Kendall (1974) to comment that explication of developmental functions have not achieved enough specification to provide a firm base for curriculum planning in social work. In light<sup>of</sup> this situation, after evaluating various definitions of socioeconomic development, Roger's (1973) explanation of the following two related concepts, seems to be relatively simple and useful. He explains them as follows :

"Modernization is the process by which individuals change from a traditional way of life to a more complex, technologically advanced, and rapidly changing style of life. We see modernization at the

individual level corresponding to development at the societal level; so development is a kind of aggregated modernization. Development is a type of social change in which new ideas are introduced into a social system in order to produce higher per capita incomes and levels of living through more modern production methods and improved social organization."

Drewnowski (1974) has made a noteworthy contribution by clarifying and operationalizing the components of development which he calls quality of Life. Nine components and their indicators in parenthesis are as follows :

1. Nutrition : Food Intake (Calories intake, Protein intake, Percent of non-starchy calories).
2. Clothing : Use of Clothes (Cloth consumption, Footwear consumption, Quality of Clothing).
3. Shelter : Occupancy of Dwellings (Services of dwellings, Density of occupancy, Independent use of dwellings).
4. Health : Health Services Received (Access to medical care, Prevention of infection and parasitic disease, Proportional mortality ratio).
5. Education : Education Received (School enrolment ratio, School output ratio, Teacher/Pupil ratio).
6. Leisure : Protection from Over-Work (Leisure time).
7. Security : Security Assured (Security of the person, Security of the way of life).

8. Social Environment : Social Contacts and Recreation  
(Labour relations, Conditions for social and economic activity, Information and Communication. Recreation : Cultural activities, Music, Theatre, Cinema, Visual Arts, Book reading, Recreational travel, Sports and physical exercises).
9. Physical Environment : (Cleanliness and quietness, Public amenities in the neighbourhood, Beauty of the environment).

He further clarifies the units of measurement for each indicator and presents a framework for the assessment of interrelations between social and economic variables. He proposes a planning model which has social targets as variables in its objective function, and the interdependence between the economic and social variables is reflected in the constraints. This approach opens up the possibility of giving social content to development planning. He himself admits that the ideas he has presented are controversial and that much work is necessary before they can obtain general recognition. He has recommended various improvements in the planning model to make it more elaborate, realistic and adaptable to help practical planners.

Developmental Programs in India and Participation  
of Social Work in these Programs :

Since fifties, as an integral part of Five Year Plans, India initiated various developmental programs like Community Development, Integrated Rural Development, Urban Community Development, Family and Child Welfare Projects, Applied Nutrition Projects, Supplementary Nutrition Program, Family Welfare/Planning Program, Tribal Welfare Blocks, Tribal sub-plan, Social Education, Mass Adult Education, etc. These programs covered geographically identified areas and/or specific socioeconomic groups.

These programs were initiated to overcome some of the glaring socioeconomic deficiencies primarily due to faulty developmental planning, negative side effects of economic growth, maldistribution and wastage. These programs, however, suffered heavily from inadequate goal setting (objectives), goal measuring (criteria), program planning, program operation and program evaluation. The analysts (e.g. Kothari, 1976) consider that deficiencies are largely due to luxury oriented living of a small class of bourgeoisie, politicians and bureaucrats who are "corrupt, uncivil, vulgar, greedy, acquisitive, exploitative and self-seeking". Others have felt that these programs were ad-hoc and policy making as well as service



delivery machinery was not development oriented. There was a much lack of infrastructure to support the service delivery machinery. As a result, the well meaning and relatively heavy efforts in terms of staff and program inputs were diffused and lost.

Most of the social work writers have felt that for historical reasons, involvement and participation of social work practitioners and educators in these programs has remained incidental and indifferent on both the sides; professionally for social work and rationally for the country. This feeling stems from the fact that relatively few social workers were connected with various stages of developmental programs. Some writers have blamed politicians and bureaucrats for this state of affairs while others believe that social work has not attained the level of maturity and abilities (knowledge-Skills-Values) to make special contributions in these programs.

Considering some element of truth in this criticism, social work educators and practitioners organized and participated in various national and international seminars and symposia, to clarify the role of social work in the development. Voicing this concern in the Seminar on Four Decades of Social Work Practice and Education in India, Professor Gore

(1977) says that :

"It may seem surprising that such an issue (of the identity of social work profession) should be raised at the end of forty years of professional social work education and practice in India. But I believe that as social work educators we are still seeking clarity on the role and function of social work in our society at our present stage of development".

It is worth noting that Dr. Gore - a foremost among social work educators - recognizes and emphasizes the issue of the identity of social work profession. In the same Seminar, Professor Kulkarni (1977) suggests that :

"Given the rapid rate of social change, most of the current social work practice and education is likely to become non-relevant any way and so the challenge of reviewing and revising its role is inevitable. It can either reinvent the wheel, as it were, and go back to the fundamentals or adopt the modern systems approach and cybernetic devices for changes. In either case the survival of social work profession as a profession depends upon how it responds to these challenges".

In light of the above comments, what are the ways of improving participation of social work profession in the process and programs of socioeconomic development in Indian

setting? Preliminary search and a glance at the literature, which attempts to answer this question, is voluminous, divergent and ever increasing. We have already mentioned some of this literature, however, the task of reviewing and summarizing it, is almost formidable. Instead of talking about the role of social work in numerous developmental programs we have selected family planning program as a specific one for study purpose. The role of social work in family planning has involved wider and more pertinent discussion with predominant community orientation. It has achieved greater focus and concern because of its significance in reducing population growth and facilitating socio-economic development.

Relationship between Socioeconomic Development,  
Population Growth and Family Planning Programs :

All countries and specially that of Asia, Africa and Latin America have been trying to develop their societies in general and economies in particular. In their attempts to accelerate the process of development, many of these countries have learnt that restricting the unprecedented population growth can be a facilitating condition for relatively speedier development. Some of the countries, however, feel that

socioeconomic development rather than family planning program; is a pre-requisite for achieving required amount of reduction in the population growth.

Relationship between family planning programs, population growth and socio-economic development have been debated at a great length, by representatives of 136 countries at the World Population Conference held in Romania, during August, 1974. Of course, a commonly acceptable statement, summarizing these complex relationships was never arrived at. But it can be safely said that many of the non-communist countries felt that increasing attention must be paid to the developmental programs and at the same time, family planning program efforts should be improved.

This feeling was latter on supported by the empirical findings of Mouldin and Berelson (1978). They made a macro-analysis of the correlates of fertility decline in 94 developing countries. One of their conclusions was that family planning programs had a significant and independent effect on fertility decline, over and above the effect of socioeconomic development. The key finding was that the two go together most effectively.

Even if we take this finding as tentative, it has a great significance for social work. Effective participation

of social work in family planning program can be viewed in terms of helping the individuals, groups and communities to restrict their family size and thereby help the nation to check its population growth. Restricting the population growth can be a facilitating factor for speedier socioeconomic development. Thus, effective participation of social work and other helping professions in family planning can result in its contribution for socioeconomic development.

#### Family Planning Programs and Social Work :

Social work has been one of the late entrants in the field of fertility and family planning. In the late sixties and seventies, social work has tried to make it up by increasing its involvement.

Looking at the rapid growth of inter-disciplinary literature in the field of fertility and family planning, Social Work educators found it essential to provide a common base of knowledge for social workers. Qettinger and Stansbury (1972), highlighted fifty five articles and books on the subject of social work education and family planning. Glasser et al. (1973), have added a voluminous annotated references and topical outlines to enrich the knowledge base of social workers.

Number of seminars, workshops and conferences were held (e.g. Kendall, 1971; ASSWI, 1972 and 1973; IASSW, 1974); to clarify the role of social work in fertility and family planning. An added emphasis was on a developmental outlook for social work education, which can meet with the challenges of population growth and socioeconomic development.

Modifications in curriculum, to include these demands, were recognised and necessary materials were provided to the schools of social work. Case studies based on field experiences of the social workers (e.g. Haselkern ed., 1971; Oettinger, 1975) were made available to facilitate the integration of family planning with the usual courses in social work education.

Some schools of social work have been relatively more active while some were less, in integrating the family planning material with their usual course curriculum for social work students. At present, in most of the schools, efforts are being made to sensitize the students to a wide variety of situations where knowledge of family planning can be used. These situations may include, poor health of mother and child, inadequate personal and family resources, difficulties in role performance, etc., which can be directly or indirectly, traced to the number and spacing of the children. Whatever position

(Labour Welfare Officer, Social Defense Worker, Medical and Psychiatric Social Worker etc.) a social worker may occupy, he comes across many situations where he needs to educate and motivate couples to plan the number and spacing of children.

The activities of educating and motivating couples for the acceptance of family planning are similar in many ways with other change activities in which social workers are engaged. Similarities in these activities are based on the use of certain social science theories, which are commonly applicable in many situations of interest to social workers. Social science theories have tried to explain important factors in the process of adoption of innovation i.e. new ideas, attitudes behaviours etc. From this perspective, it will be useful to review some conceptual models on which family planning research and programs have been conducted. This will also suggest some areas for research relevant to social work in general and particularly for social work in the field of family planning.

#### Social Work Relevant Conceptual Models in Social Sciences for Fertility and Family Planning :

Emphasizing usefulness of conceptual models in strengthening theoretical knowledge (knowledge ready for use) and

knowledge in working with people (knowledge in use); Loeb (1960) stated that :

"One of social work's great need is for a theory of social pathology which will define social work problems as related to social work practice and competence. If we could define problems and describe the nature of social work intervention in any generalizable and communicable way, and if we could build models of the process, social work could make great contributions to the social sciences as medical physiology has to the biological sciences.... Social work will have to develop some models so that problems can be delineated for which specific models can be built and from which theories can be developed - these theories will concern cause of social inadequacy and intervention which will prevent, rehabilitate, or ameliorate."

This statement represents a general recognition and need for conceptual models in advancing social work knowledge and practice. Similarly, all disciplines have recognized that these models guide researchers in selecting appropriate procedures of data collection and logical procedures of reaching conclusions. The field of fertility and family planning is not an exception. Demography, Sociology, Economics, Medicine and at a later stage Psychology and Social Work have increasingly involved themselves in studying various aspects of fertility and family planning. By now, these disciplines



have contributed significant amount of researches in this area. Let us have a look at some of the widely used conceptual models on which good amount of research studies have been conducted.

### SOCIOLOGICAL MODELS :

Research studies with a sociological bias are summarized by Freedman (1961, 1974) and Hawthorn (1970). For assessing the contribution of sociological research studies in explaining fertility; a conceptual model of Davis and Blake (1956) modified by Freedman (1967) has been very influential. This model is presented in Figure II. Major blocks of variables are discussed below :

#### Intermediate Variables :

##### 1. Factors Affecting Exposure to Intercourse

###### (Intercourse Variables )

- (A) Those governing the formation and dissolution of unions in the reproductive period.
  - (i) Age of entry into sexual unions.
  - (ii) Permanent celibacy: proportion of women never entering sexual unions.

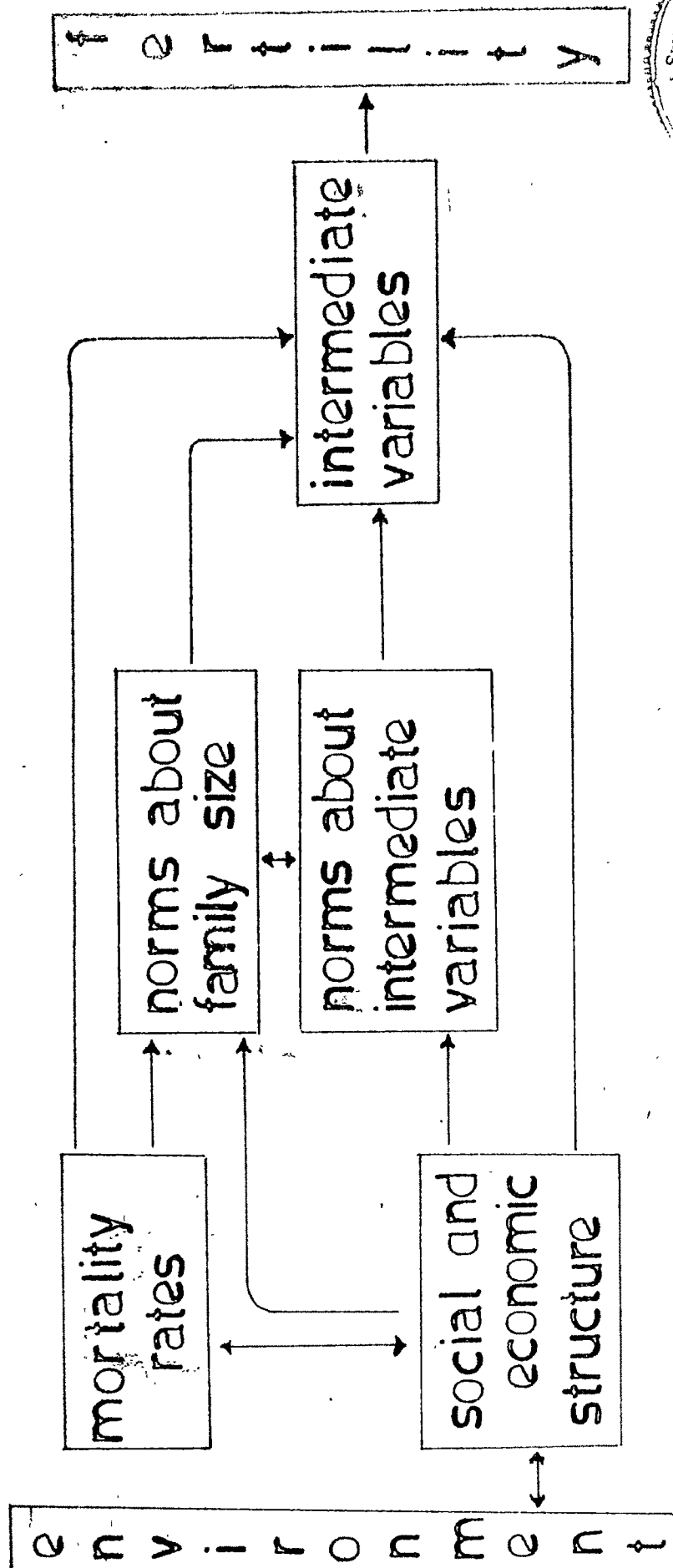


Figure II  
Schematic diagram of factors affecting Fertility by Freedman  
(1967), including intermediate variables by Davis and Blake (1956).



- (iii) Amount of reproductive period spent after or between unions :
  - a) When unions are broken by divorce, separation; or desertion.
  - b) When unions are broken by death of husband.
- (B) Those governing the exposure to intercourse within unions
  - (iv) Voluntary abstinence
  - (v) Involuntary abstinence (from impotence, illness, unavoidable but temporary separations).
  - (vi) Coital frequency (excluding periods of abstinence).
- 2. Factors Affecting Exposure to Conception  
(Conception Variables)
  - (vii) Fecundity or infecundity, as affected by involuntary causes.
  - (viii) Use or non-use of contraception
    - (a) By mechanical and chemical means
    - (b) By other means.
- 3. Factors Affecting Gestation and Successful  
parturition (Gestation variables).
  - (x) Foetal mortality from involuntary causes
  - (xi) Foetal mortality from voluntary causes.

As can be seen, this is an exhaustive model in the sense that three general categories of eleven intermediate variables will have to be common for any disciplines. It is universally accepted that following factors :

- i) exposure to intercourse
- ii) exposure to conception
- iii) gestation and successful parturition ;

directly affect fertility and all other factors should operate through them to affect fertility. But, then, what determines the intermediate variables? Sociologists have tried to explain intermediate variables in terms of norms.

#### Norms about Family Size and Intermediate Variables :

"Norm" is one of the central concepts of Sociology, described in all introductory textbooks. They describe a norm as an abstract pattern which sets limits for behaviour. In other words it is a standard or code of conduct. These norms are learnt in the family, school and other primary groups through the process of socialization. There are punishments if norms are violated and rewards if they are conformed. However, we have to note that the norm may be implicit or explicit and there is a range of permissible behaviour. Partly, this is one of the reasons why the internalization and acceptance

of the norm is a matter of degree. Sociologists tell us further that norms operative in one group may not be operative in another and the attitude toward norms in any particular group is affected by the relation between that group and other groups. With or without mentioning the complexities of these norms, large number of earlier studies were concerned with the quantitative measurement of fertility and intermediate variables. Since about two decades, there has been an increasing volume of research regarding norms about family size, age for marriage and contraceptive use.

Along with many interesting findings, the studies conducted in developing countries, have brought out some important facts. It has been found that norms about family size are higher than suggested or prescribed by the government. Number of conceptions and actualized family size are still higher than desired family size. Similarly, there is a significant gap between expressed attitudes towards contraceptive use and actual use. These discrepancies needed explanations which are usually sought in the next block of variables, i.e. mortality and socio-economic structure.

#### Mortality Rates and Socio-Economic Structure :

Demographers have helped us by working out many precise

mortality rates which has made it a relatively straight forward variable. One of the explanations of discrepancy between family size norms and actual family size, concerns child survival hypothesis. Many researchers indicated strong evidences that higher fertility was related to experiences with or fear of child mortality. The effects of child mortality on fertility remained after eliminating those portions of the relationship attributable to maternal age, marriage duration, parity and socio-economic differentials. Contrary to this assertion. Bogue (1974) commented that after controlling socio-economic status, whatever explanatory value child mortality has for fertility is negligible; and could easily be due to the effect of high fertility in causing excess infant mortality.

Another Sociological or Social Psychological model is that of Hill, Stycos, and Back (1959), who conducted an experimental research in Puerto Rico. As family Sociologists, they focussed their attention on family characteristics. Their conceptual scheme is provided in Figure-III.

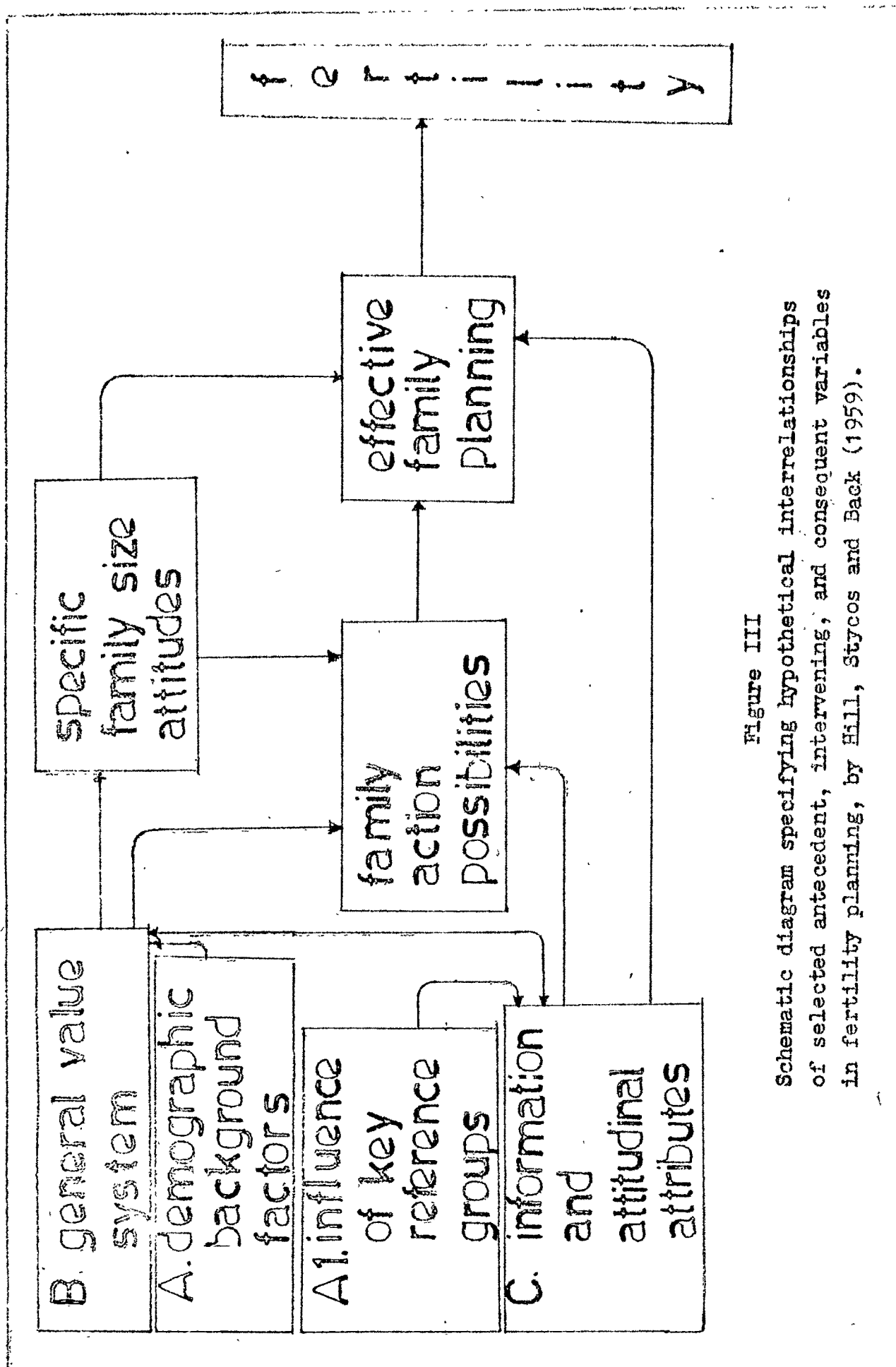


Figure III

Schematic diagram specifying hypothetical interrelationships of selected antecedent, intervening, and consequent variables in fertility planning, by Hill, Stycos and Back (1959).

A. Demographic Background Factors :

- |               |                          |
|---------------|--------------------------|
| 1. Residence  | 5. Economic Status       |
| 2. Occupation | 6. Type of marital union |
| 3. Education  | 7. Age at marriage.      |
| 4. Religion   |                          |

A1. Influence of Key Reference Groups :

1. Resident referrents
2. Occupational colleagues
3. Classmates.
4. Fellow parishioners etc.
5. Extent of social participation.
6. Patrons of birth control clinics.

B. General Value System :

1. Fatalism-striving
2. Traditionalism-modernism
3. Aspirations for self and children.
4. Tendencies toward general planning.

C. Informational and Attitudinal Attributes :

1. Information on methods.
2. Attitude toward birth control.
3. Extent of agreement on birth control.

D. Specific Family Size Attitudes :

1. Attitudes towards importance of children.



2. Ideal family size (present and past).
3. Summary index of family size preferences.
4. Sense of pressure of fertility on family resources.
5. Interest in spacing children.

E. Family Action Possibilities :

1. Marital happiness.
2. Agreement on general issues.
3. Sexual satisfaction.
4. Communication on general issues.
5. Communication on family size ideals and birth control.
6. Modesty handicaps.
7. Familistic organization types :
  - i) Degree of wife autonomy
  - ii) Degree of male dominance
  - iii) Extent of prohibitions exercised by husband
  - iv) Family readiness for action on birth control.

F. Effective Family Planning :

1. Proportion using birth control methods
2. Length and regularity of use.
3. Success rate.

G. Fertility :

1. Different measures.

### ECONOMIC MODEL :

Alike sociologists, economists were the early enterants in the field of fertility and family planning. Initially macroeconomic studies concentrated on exploring various aspects of population growth and economic development. It was during fifties that microeconomic theory of fertility gained momentum. Easterlin (1975) has reviewed the earlier work and suggested an economic framework for fertility analysis. A rough scheme of his ideas is presented in Figure-IV. Microeconomic theory of fertility is chiefly derived from the economic theory of consumer behaviour. Easterlin reviewed the limitations of the earlier formulations and made the concept of production of children more explicit and comprehensive; to make the framework suitable for incorporating the concepts and hypotheses of noneconomists along with those of economists.

### Demand for Children :

The major question posed under "demand for children" is : if fertility regulations were costless (psychological or subjective and objective costs), how many surviving children would parents demand or want? In the theory of household choice, the demand for children is determined by three major variables i.e. income, price and taste or subjective

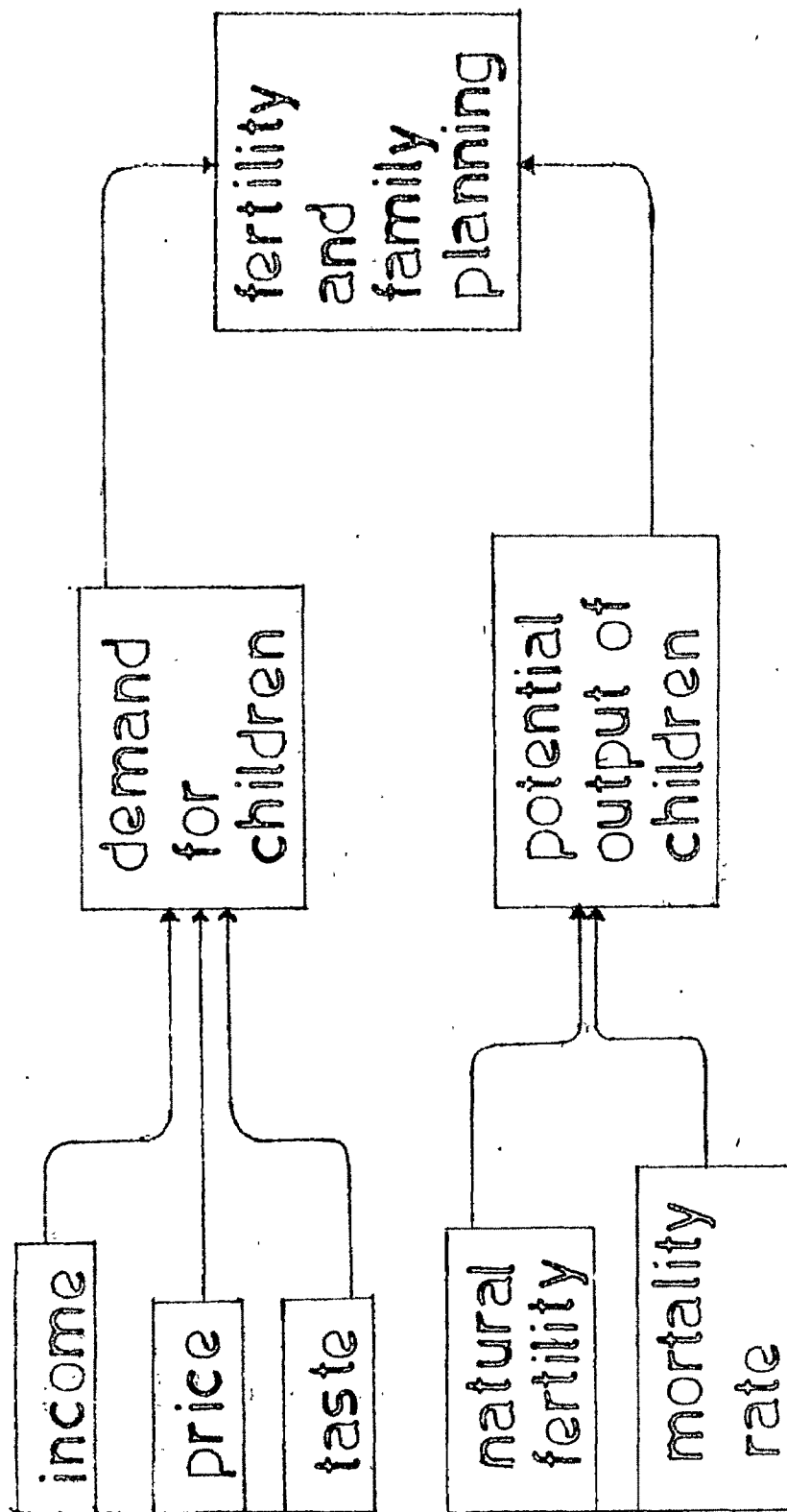


Figure IV

Schematic Diagram of Economic Framework for Fertility Analysis

preferences. In over simplified form: goods and children have costs. One has to pay price for buying goods as well as producing children. A couple, with a given income has to decide how much to spend on buying goods and how much on producing/rearing children. While deciding this, the couple tries to maximise their satisfaction at a minimum cost.

#### Potential Output of Children :

Potential output of children means, the number of surviving children a couple will have, if fertility is not deliberately regulated. Potential output of children will directly depend upon natural fertility and infant survival prospects. Natural fertility includes all the intermediate variables except those practices which are consciously and deliberately planned to reduce fertility. Thus, natural fertility is determined partly by physiological or biological factors and partly by cultural practices.

#### Motivation for Family Planning :

Motivation for family planning or fertility regulation is determined jointly by the potential output of and demand for children. If the potential output of children is more than the couple wants, the motivation for family planning

would be stronger. On the contrary, if demand for children exceeds the output, then, the couple will try to find out ways of enhancing fertility. However, in the situation, where the couple experiences excess supply of children and is motivated to use contraception; the cost of family planning becomes a crucial factor.

#### Cost of Family Planning :

Motivation for family planning is a necessary condition for effective use of contraception, but it is not a sufficient condition. Use of contraception involves two types of costs. One is psychic or subjective cost, e.g. displeasures or inconveniences associated with the use of contraception. Second is objective or market cost, e.g. time and money required to learn and use contraception. Both of these costs are determined by social attitudes about fertility regulation and accessibility. Viewed this way : if there is an excessive supply of children; use of fertility regulation will be determined by motivation for and cost of fertility regulation.

#### Fertility :

In many studies, fertility analysis is performed by taking age and marital specific number of conceptions or births as a major dependent variable. This economic framework

takes number of surviving children as a principle dependent variable. The basic rationale is that the couples are interested in having a particular number of surviving children, rather than conceptions or births.

#### SOCIAL PSYCHOLOGICAL MODEL :

Psychologists, social psychologists and social workers have entered the field of fertility and family planning relatively recently. The recent work of Pohlman (1969) and Fawcett (1970 and 1973) provides psychological perspectives in fertility and family planning. A model conceptualizing social psychological aspects of fertility has been described by Fawcett (1974) and Arnold (1975) which is depicted in Figure-V.

#### 1. Socio-Demographic Factors :

- i) Education
- ii) Urban experience
- iii) Age
- iv) Sex
- v) Wife's employment history
- vi) Wife's current employment
- vii) Age at marriage
- viii) Income
- ix) Parity

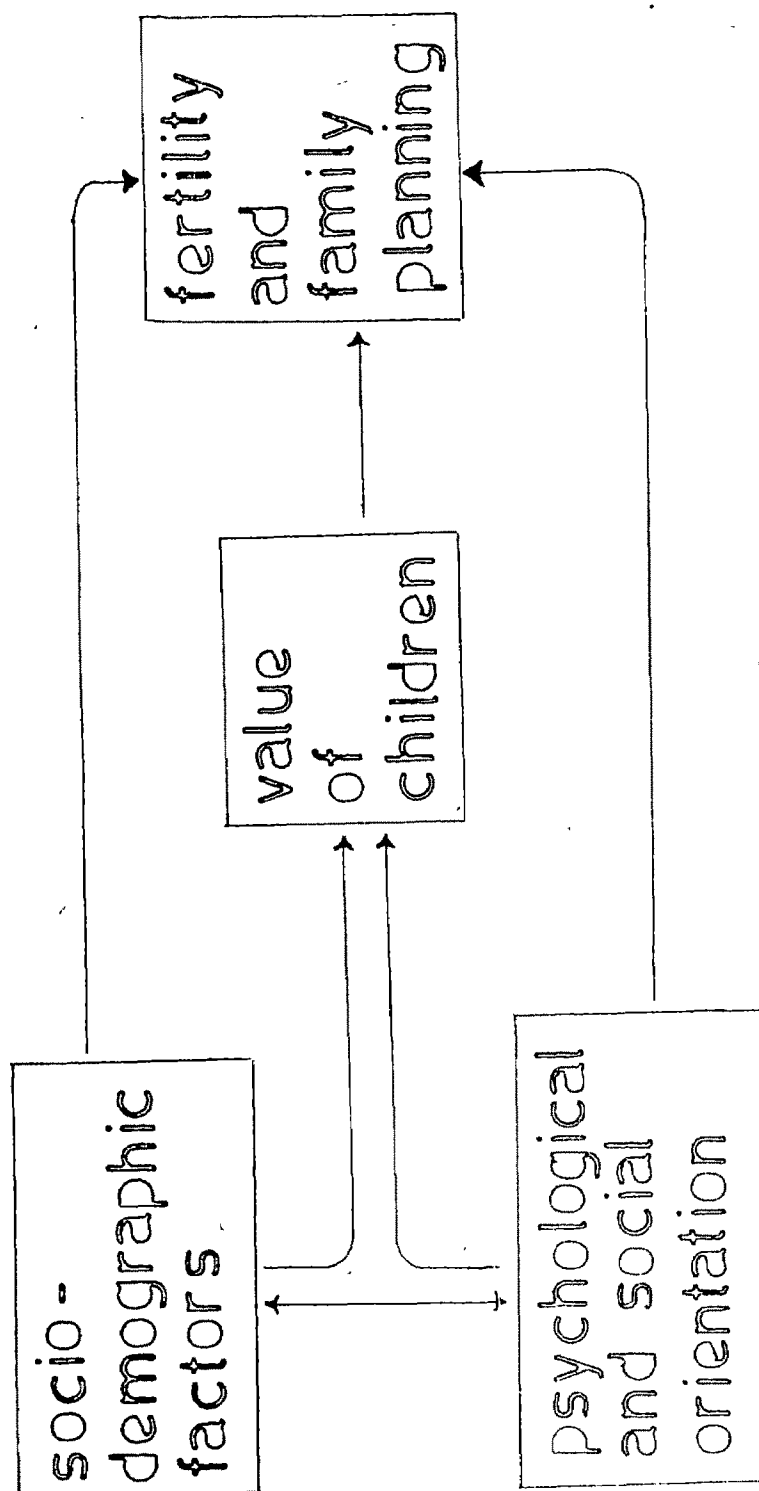


Figure V  
Conceptual Model for the Value of Children study by Arnold (1976)

2. Psychological and Social Orientation :

(i) Decision-mindedness (ii) Modernity (iii) Media exposures (iv) Small-family press (v) Childbearing press.

3. Value of Children :

Satisfactions (Positive Values)

- i) Emotional Benefits : Happiness, love, companionship and fun; also viewed in reverse as relief from strain, avoidance of boredom or loneliness.
- ii) Economic Benefits and Security: Benefits are derived from children's help in the house, business, or farm, from care of siblings, and from sharing of income; old age security for the parents, including psychological security, is often a distinctive aspect of this value.
- iii) Self-enrichment and Development : Learning from the experience of child-rearing, becoming more responsible and mature; incentive and goals in life; being viewed as an adult, a grown woman or man; self-fulfilment; feeling of competence as a parent.
- iv) Identification with children: Pleasure from watching growth and development of children; pride in children's accomplishments; reflection of self in children.



- v) Family Cohesiveness and Continuity: Children as a bond between husband and wife; fulfilment of marriage; completeness of family life; continuity of family name and traditions; to produce heirs; to have future grand children.

Large Family Values :

- vi) Sibling Relationships : Desire for another child to provide companionship for existing children; to enrich the lives of children.
- vii) Sex Preferences : Specific desire for a son or daughter; desire for a certain combination of sexes among children.
- viii) Child survival : Concern that existing children may die; need for more children to have enough survive to adulthood.

Costs (Negative Values ) :

- i) Emotional costs : General emotional strain : concern about discipline and moral behavior of children; worry over health; noise and disorder in household; children as nuisance.
- ii) Economic Costs : Expenses of child-rearing; educational costs.

iii) Restriction or Opportunity Cost : Lack of flexibility and freedom; restriction on social life, recreation, travel; mobility; no time for personal needs and desires.

iv) Physical demands; Extra housework; caring for children; loss of sleep; general weariness.

v) Family costs : Less time with spouse; disagreements over rearing of children; loss of spouse's affection.

Small Family Values :

vi) Maternal health: Concern that too many pregnancies, or pregnancy beyond a certain age, is bad for the mother's health.

viii) Social Costs : Concern about overpopulation, that another child would be a burden to society.

4. Fertility and Family Planning :

1. Birth Control :

(i) Knowledge (ii) Attitude (iii) Use.

2. Family Size :

(i) Actual (ii) Desired (iii) Ideal.

Cost versus satisfaction (benefit), are two basic dimensions of value of children. Analogous to economic theory of household choice, it is assumed here that parents

consciously consider social, emotional and economic costs and satisfactions in deciding to have some specific number of children. This may sound too unemotional and mechanical, however, as an analytical concept the value of children has been found useful in analysing motives for producing children and factors that support these motives.

The fifteen categories described above represents the findings from a recent comparative study (Arnold, 1975) conducted in Japan, Republic of Korea, Taiwan, Philippines, Thailand and Hawaii (U.S.A.).

It should be noted, however, that in all countries, the best predicted dependent variable is number of living children. This is mainly attributable to the strong effect of socio-demographic factors.

#### MODELS FROM COMMUNICATION RESEARCH :

Communication field is an applied field in the sense that it utilizes social science knowledge of attitudinal and behavioural change in achieving its goals. Definition of communication, as a "process by which an idea is transferred from a source to a receiver with the intent to change his behaviour (Rogers, 1973);" exemplifies this point.

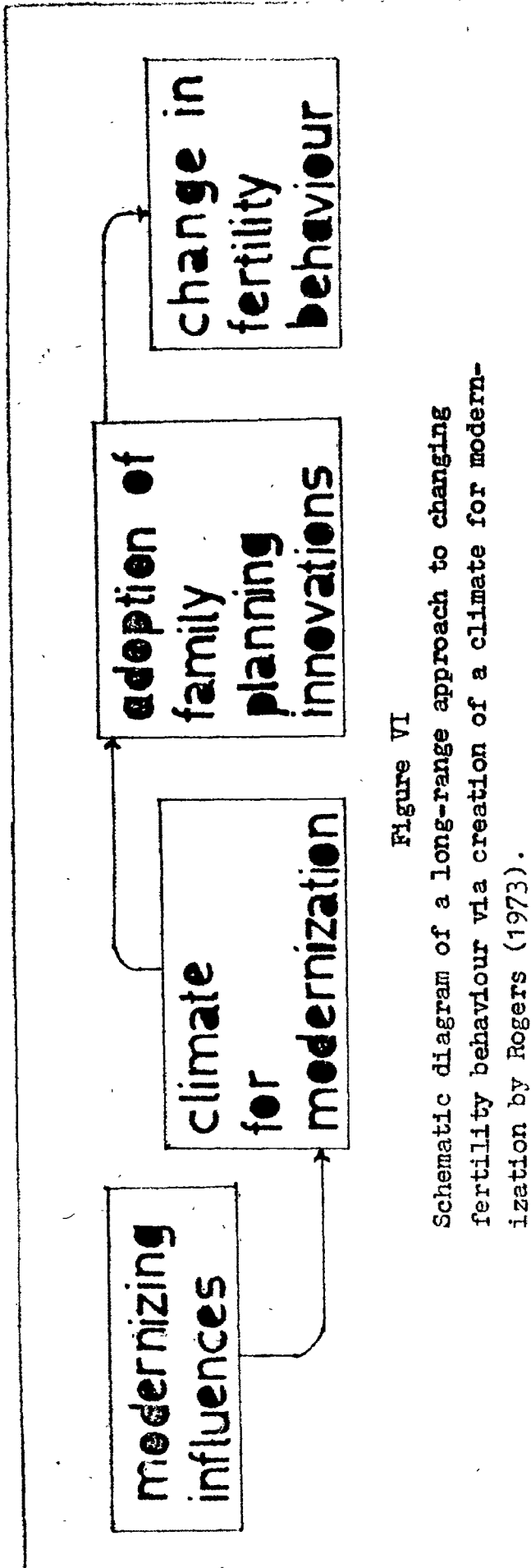


Figure VI

Schematic diagram of a long-range approach to changing fertility behaviour via creation of a climate for modernization by Rogers (1973).

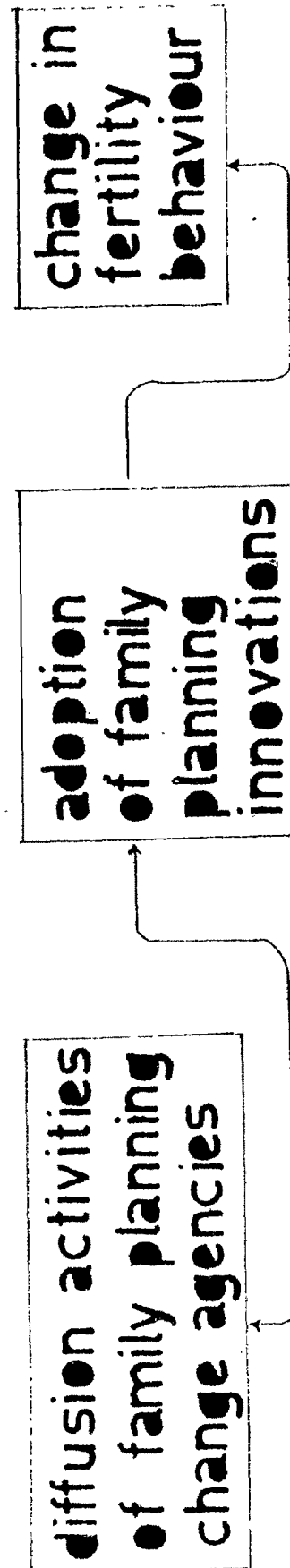


Figure VII

Schematic diagram of a relatively short-range approach to changing fertility behaviour by diffusion activities of family planning change agencies by Rogers (1973).

Based on the knowledge derived from social sciences and communication research, Rogers provides two models of diffusion of innovations, which are given in Figures VI and VII.

1. Modernizing Influences :

- i) Industrialization
- ii) Urbanization (migration and urban contact)
- iii) Exposure to mass media (and other) Communication Channels.

2. Climate for Modernization :

- i) Active information seeking
- ii) Favourable attitude toward change
- iii) Higher aspirations
- iv) Perceived self-control rather than fatalism and perceived other control.

3. Diffusion Activities of Family Planning Change Agencies:

- i) Mass media messages about family planning innovations
- ii) Interpersonal communication messages from change agents, change agent aides, opinion leaders, and peers about family planning innovations.

Concepts used - Explanation of Key Terms :

Rogers explains the concepts which he has used in these two models. His definition of Modernization and Development

was presented earlier. Other concepts are explained as follows :

#### Adoption of Innovation :

"We see the adoption of innovations at the heart of modernization and development. An innovation is an idea, practice, or object perceived as new by an individual. The adoption of an innovation is one indicant of a changing life style, whether the new idea is in agriculture, health, family planning, or politics. Adoption is a kind of "hard data" about modernization in that it is a behavioural, rather than a cognitive or attitudinal, change. The real test of whether an individual has accepted "A more complex, technologically advanced, and rapidly changing style of life" is the adoption of innovations. Thus the best indicators of modernization are the planting of IR-8 rice variety, getting vaccinated, adopting an IUD, and behaviors demonstrating the adoption of other innovations.

#### Climate for Modernization :

We define the climate for modernization as that combination of an individual's knowledge, attitudes and beliefs, and behaviour that constitutes a favourable mental set towards changes. An individual who possesses the climate for modernization is characterized by :

1. An active search for knowledge about new ideas. He recognizes that his environment is changing, and that it is important for him to seek understanding of these changes, rather than relying on traditional means of coping with problems.
2. A favourable attitude toward change. He is interested in innovations and does not reject new ideas simply because they are new.
3. Higher aspirations. He desires more than he has, whether it is his level of living, or his children's educational or occupational attainment. He is thus frustrated by a present imbalance of "wants" to "gets" and this dissatisfaction impels him toward change.
4. Perceived self-control. He believes that he can control his future, rather than that it lies in the hands of others or that it is determined by Fate. Such belief in self-control is necessary for the individual to favourably consider the adoption of new ideas as a likely means for improvement of his life situation. He must feel a sense of efficacy, that he has control over his environment.

We think of the climate for modernization as laying a fertile field for innovations, as creating a longing for them,

as a prerequisite receptivity to new ideas. But the climate for modernization is not exactly synonymous with the adoption of innovations."

Presentation of these models reminds us of some social scientists (e.g. Loeb, 1960), who have tried to differentiate between these types of conceptual models (as problem solving devices) and theory (as a dynamic, processual and hypotheses producing system). But there seems to be a very thin demarketing line. For our practical purpose, review of these conceptual models on fertility and family planning should help us to see major theoretical orientations as well as spatial-temporal and causal-interactive relationships between explicit concepts. This review also helps us to see the complexities of reproductive behaviour and the struggle of social sciences to clarify the causal mechanisms. Realising the complexities of these interrelationships, WHO (1976) report admitted that social, psychological, economic and cultural factors impinge on all aspects of human reproduction; and in these complex interrelationships it is difficult to establish clear causal relationship.

Now, let us try to review some of the research efforts, more specifically on communication research, which were based on these models. The review, in turn, will help us to formulate a social work relevant research in the field of family planning.



### Review of Family Planning Communication Research :

Knowledge accumulated through family planning research on the factors which play a major role in the process of adoption of innovation, is available from the reviews and syntheses of Freedman (1961 and 1974); Dubey (1969a and 1969b); Kapil (1969); Pohlman (1969); Fawcett (1970 and 1973); Chowdhary (1970); Malhotra (1970); Kar (1970 and 1975); Mauldin, et al (1971); Rosario (1971); Ross (1972); Rogers (1973); ESCAP (1974); Pareek and Rao (1974) and Jain (1975). One of the major contributions of these numerous bibliographies, reviews and syntheses is that it confirms the importance of five basic group of factors which play a major role in the process of adoption of innovations. They are : characteristics of innovation; characteristics of change agents/agencies; channels, content and process of communication; norms and values of the social system in which the innovation is being introduced; and the characteristics of target groups of clients.

Of these factors, Williams (1970) felt that perhaps no single variable or set of variables is regarded as being more crucial than those which together make up the characteristics of the individuals who are potential receivers of innovation. In almost no case is it possible to predict the success or failure of a new idea or artifact unless something is known

about the audience toward whom it is being directed (p.22). In the same spirit, Rogers (1973) comments that KAP (Knowledge, Attitudes and Practice of family planning innovations) studies are by far the most frequent class of any kind of social science investigation in the past ten years. One of the purpose of KAP studies is to (treat audience as a focal point to) provide reliable information about audience. This information equips family planning officials to mount more effective communication campaigns.

Commenting further, he mentions technical and methodological short-comings of these studies and suggests ways of improving them. He considers the selection of variables as more important and in need of urgent amelioration. Instead of stereotyped, static demographic variables, he urges for inclusion of social-psychological variables which are dynamic and manipulable; leading to direct implications for family planning communication strategies (pp.379-88). Jain (1975) seems to support this observation. In his suggestion for reconstructing the priorities for demographic research, he gave the very first place to macro studies of role of beliefs, value system and behavioural predisposition to fertility. He specified the need for studying variables like traditionalism, rationality, etc. Pareek and Rao (1974), after reviewing

research studies upto the end of 1973, criticized that :

"A thorough review of literature indicated that a negligible amount of research has been reported on the motivation, values and other personality variables (p.33)."

In view of this, among the topics suggested for further research, they emphasized relationship of level of aspiration and modernization with the adoption of contraception and fertility (p.192).

Studies on Individual Modernity and F.P. :

While this overview stresses the limited number of available studies on social psychological variables like individual modernity (i.e. individual with modern attitudes and behaviour) in relation to family planning; we do not wish to imply that nothing has been done in this regard. ESCAP (1974) report mentions a study by Chung et al. from Republic of Korea in which value orientations and modern attitudes were focal independent variables which were shown to be significantly correlated with fertility and family planning behaviour and attitudes (p.32), Fawcett (1970) has reviewed two cross-national studies on modernity and family planning. Among them, Williamson's study used data of Argentina, Chile, East Pakistan

(Bangladesh), India and Nigeria. He concludes that subjective efficacy and ideal family size function more as independent determinants than as intervening variables in predicting favourability toward birth control. The second study of Kalh, was conducted in Brazil and Mexico. Modernism was treated as an independent variable to predict ideal family size. A consistent inverse relationship between degree of modernism and size of ideal family was shown for most occupational groups, but only few of the differences were statistically significant (pp.70-71). Kar (1968) reports the results of his two exploratory studies (In India and U.S.A.) of lower socioeconomic strata respondents. He observed that in both the countries, users and non-users of family planning methods were significantly different in terms of value orientations and level of aspirations. Pareek and Kothandapani analyzed data collected by A.K. Singh on modernization and attitude toward family size and family planning, from a total sample of 1300, in the "tribal belt" of Bihar. The results revealed that lack of fatalism, education and overall modernization accounted for about 10 per cent of the variation in preference for a small family.

This review suggests that there are very few studies on the phenomenon of individual modernity in relation to family

planning and it started receiving relatively more attention during late sixties and early seventies. Within this small number of studies; there is an important variation in terms of conceptualization, nature of dependent variables, procedures used for sampling, data collection and data analysis. Though one may expect this kind of variation during the earlier stage of the development of the field, however, this is a hindrance in terms of pulling the results together for a coherent theoretical and policy formulation. Take for example, the nature of variables used in these studies. Favourability toward birth control and ideal family size were used as major dependent variables in the two studies mentioned by Fawcett (1970). Similarly, the study mentioned by Pareek and Rao (1974) had used preference for a small family as a dependent variable. Basically, these are attitudinal variables.

In other words, major hypothesis tested by these studies is that the modern attitudes of the individuals lead them to favourable attitude toward low fertility and family planning. As it can be seen, correlating two attitudes without linking them to behavior has limited programmatic value. This is so, because our experience with KAP studies have shown a huge gap between knowledge-attitude on one side and practice on the other. If we go one step further, even practice of contraception

does not necessarily mean that all contraceptors start using it at an early stage of reproduction and they end up with a small family. Thus, from the programmatic stand-point, while selecting the dependent variable, the importance of family size and spacing should be kept in mind.

Selection of population in these studies, is another area which needs to be commented upon. It is generally agreed that the selection of couples in reproductive age groups and the "relevant others" of the couples; are two most appropriate groups for programmatic purpose. Second, but equally important criterion for selection of population, is the organization with which the respondents are linked. This is so because, findings of the small surveys can be most fruitfully used by the organization which have relatively longer and stronger links with the respondents. These two criteria have not been observed in these studies.

In light of this, we were attracted by Williams' (1970) review of studies on traditionalism and diffusion of agricultural innovations as well as his own study on traditionalism and family planning. He concludes that :

"It appears that the adoption of family planning is a process that closely resembles the adoption of other practices and ideas. Those who are most modern in

behaviour and outlook will lead the way in acceptance. A large middle group of less modern persons are unlikely to be innovative, but they are persuadable. Finally, those who are most traditional in outlook and behaviour will neither be innovative nor easily persuaded to alter their behaviour. The success or failure of any new idea or innovation in a particular setting will depend to large extent on the relative prevalence of these three categories of persons (p.107)."