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Population Studies No. 119

STERILISATIONS IN KERALA (1968-69)
AN APPRAISAL

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Population Studies No.119

STERILIZATIONS IN KERALA (1033-39) - AN APPRAISAL

me report gives the demographic characteristics of persons sterilised during the year 1963-69. The report differs from similar reports of the carlier years. In the present report an attempt is made to analyse the educational status of the various religious groups of sterilised persons. Further the report also gives an appraisal of comulative achievement of sterilisations and its impact on the birth rate.

The report is prepared by Sri N.V. George,
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Bureau of Economics and Statistics, Trivandrum, Dated 3-17-1971.

(N.GOPALAKRISHNAN NAIR)



1. Introduction:

Sterilisation operation is considered as the most effective method of birth control. The perminent stoppage of pregnancies achieved by the operation is its greatest advantage over other hath methods. Temporary methods which require continued attention are not suitable for communies with poor living conditions and subsectional level. Storillisations, we, respectively and subsectionies are becoming increasingly popular in Kerala State. The Demographic Research Centre has been conducting studies on the characteristics of the sterilised persons from 1972 chwards. The present study is based on the data on persons who have undergone sterilisation during 1963-69 (April 1963 to March 1969). The data were collected by the District Statistical staff from the various institutions concerned with the family planning programme.

2. Objects:

In this paper an attempt is made to study the following.

i) Progress of sterilisation operations during the year

ii) Socio-economic and demographic characteristics of sterilised persons, namely, their age, sex, religion, education, income, occupation and number of children.

iii) Effect of the sterilisations achieved on the birth rate.

3. Limitations of the study:

All sterilisations conducted during the year were proposed to be covered for the purpose of the study. But data regarding only 71224 operations could be collected though 73840 operations were conducted during the year. The coverage is only about 95% in the case of vasectomies and 92% in the case of salpinjectomies, in the case of vasectomies and 92% in the case of salpinjectomies. Though it would appear from the above figures that only a small percentage of cases is not covered by the study. It say be noted that the coverage is very poor if the availability of data in the the coverage is very poor if the availability of data in the spect of individual characteristics is considered. For cortain itsms like occupation, educational standard and number of children born the information is not available an as much as 80% of the cases. The percentage of 'not recorded' cases under each obstructuration is given below.

CASES

<u>Characteristic</u>	Percentage of not recorded
 Age Number of children born Educational standard Religion Occupation Income Number of children living Number of children living in each sex 	2.7 32.6 35.7 10.4 33.5 19.0 13.9

PATOT.

The information on age is available in most of the cases. Religion and number of children living are two items on which information is available in more than 85% cases. The conclusions drawn are subject to this limitation of incomplete coverage.

4. Progress of sterilisation Operation:

The programme has gained considerable momentum during the year. The number of sterilisation operations conducted during 1968-65 with the figures for the two previous years are given below.

<u>Yoar</u>	Number of sterilisation Operations	Index of progress
1966-67	40274	100
1967-68	65155	162
1968-69	73040	183

The achievement during the year is nearly twice the achievement during 1966-67. Compared to the previous year also the achievement is much higher. Of the 73840 sterilisations conducted during 1968-69, 58775 were vasectomies and 15065 were salpinjectomies. Thus vasectomies accounted for about 80% sterilisation operations. The corresponding figures for the previous year was 82%. Though the number of vasectomies and tubectomies has increased during the year, the increase in the number of vasectomies is proportionately more.

The achievement works out to 3.62 sterilisation per 1000 population. According to 1961 population census figures, there are 146 married females in 15-44 610 group per 1000 population. On this basis it seems that the achievement of 3.62 sterilisations per 1000 population achieved in 1968-69 is quite inadequate to achieve substantial reduction in birth rate in the population.

5. Age and sex composition of sterilized persons:

The distribution of sterilised persons accoring to age and sex is given below:

Table 1

Distribution of sterilised persons according to age and sex

	Males		Fem	ales	
Age group	Number Percentage	Percentage distribu- tion of married males 20-54 61 census)		a ge	Percent- age dis- tribution of married females 15-44 S61 census)
1. 15-19 2. 20-24 3. 25-29 4. 30-34 5. 35-39	389 0.7 5819 10-4 12141 21.8 15410 27.6	6.0 15.6 18.7 19.8	31 1871 4855 4018 2325		8.5 29.01 23.3 18.7 16.5



1.	2	3 `	4	5	6	7
6. 40-44	11465	20•6	15.0	363	2.7	11.0
7. 45 and above	10519	18.9		45- 73 54 years)	0.5	• • .
B. Not re- corded	1687	• •		258	• •	••
9. Total	57430	100.0	100.0	13794	100.0	100.0

About 50% of the males sterilised belong to the age group 30-39 years. In the case of females the two age groups of 25-29 years and 30-34 years account for about 66% of the sterilisations. A comparison with the previous year's figures reveals that there is not much change during the year in the age composition of the sterilised persons.

The percentage distribution of married males in 20-54 years in Kerala according to 1961 census is also given in the above table for the sake of comparison. The males coming for vasectomy are mainly from this age group. It is noted that the percentage of males in the age groups below 30 years and above 45 years undergoing sterilisation are less than the percentages of married males in the corresponding age groups in the general population. In the other age groups percentages of males accepting sterilisation exceed the corresponding percentages in the general population. This shows that few males undergo the sterilisation operation in the early years of married life and after 45 years of age.

In the case of females also this characteristic is noticed. Here comparison is made with the distribution of married females in reproductive age group of 15-44. Females in age groups below 25 years and above 40 years accept sterilisation rarely.

The median age at the time of sterilisation is 37.6 years for males and 30.5 years for females. The corresponding figures for 1967-68 were 38.1 years and 33.8 years. There is thus a favourable shift in favour of early adoption of sterilipsation.

6. Religious composition of sterilised persons

Difference in the rate of acceptance of sterilisation by various religious groups has been noticed in the studies conducted in the previous years. This position is more or less the same during the year 1968-1969 also.

According to 1961 census figures 61% of the population are Hindus, 21% Christians and 18% Mušiims in the State. The distribution of sterilised persons during the year 1968-69 according to religion shows that 73% of them are Hindus, 18% Christians and about 9% Muslims. This reveals that Muslims and Christians do not adopt sterilisation as readily as the Hindus, and that the Muslims

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seem to be comparatively the most reluctant group to undergo sterilisation operation. It may however be noted that, a comparison of the figures during the years 1967-68 and 1963-69 s shows a slight increase in the percentage of Muslims accepting sterilisation, the percentages being 7.4 during 1967-68 and 8.6 during 1968-69.

of family planning among the creit that the differential acceptance factors, due to the difference in the levels of educational attainments of the population in the different religions. The educational attainment of sterilised persons in each religious group is also given in Table 2 below.

<u>Table 2</u>

<u>Distribution of sterilised persons according to religion</u>

and educational status.

	*14 1 1 1	77. 3	17.	Chris	lat tion	a Mu	slims	Note	າກອດຕ	T' -	·= Oth	ers; Te	tal
	Educational Status	Hindu	LIS	PULT	S (L41)	,;; I10	معتبا ها ها دي		acd	•			
		No.	%	No.	T.	No.	. 40	No.	9/2		. %	No.	%
	1. Illiterate	6847	.21.L	1191	13.6	1.456	39,0	3.63	20 ₄ .1	To.	5271	9673	21.1
	2. Literate below primary											20016	43.
	3. Above primary below middle	7643	23.5	2115	24.2	751	20-1	144	18.2	5	15.6	10658	23.
	4. Above middle below matric	1.605	4.9	502	5.7	120	3.2	48	6.0	۰ •	• •	2275	5.0
	5. Matric and abo	ve <u>∏</u> 5°37	4.9	482	5.5	112	3.0	30	3.8	••		221.1	4.
	6. Literacy stan- dard not specified 7. Not recorded	740 14130	2.3	147 2833	1.7	67 1781	1.8	5 6633	0.7		• •	959 25432	
-	Total	46607	100.0) I638	3100.0	551.6	100.0	742	1.00	03	2 m.o	71.224	100.
	Percentage	73.1		18		8.		• 0			0.1	100.0	

It is seen that among sterilised persons Muslims have the lowest educational attainment and christians have the highest educational attainment. The percentage of illiterates among christians is only 14 while the corresponding percentage is 39 among Muslims. Since is only 14 while the educational attainment among the various religious information on the educational attainment among the various religious groups in the general population is not available, it has not been possible to judge how far the educational attainment is correlated with the acceptance of sterilisation by the various religious groups. But a comparison of the distribution of the population of Kerala in 20-59 comparison of the distribution of the population of sterilised persons years according to educational status with that of sterilised persons shows that sterilisation is more popular among educated persons. The percentage of literates among persons in 20-59 age group is 5.7 in the general population whereas there are 79% literates among sterilised persons. The comparatively lower acceptance of sterilisation among the persons. The comparatively lower acceptance of sterilisation among the Muslims may thus be attributed to their lower educational status.



7. Occupation:

The distribution of sterilised persons according to occupation is given in the following table.

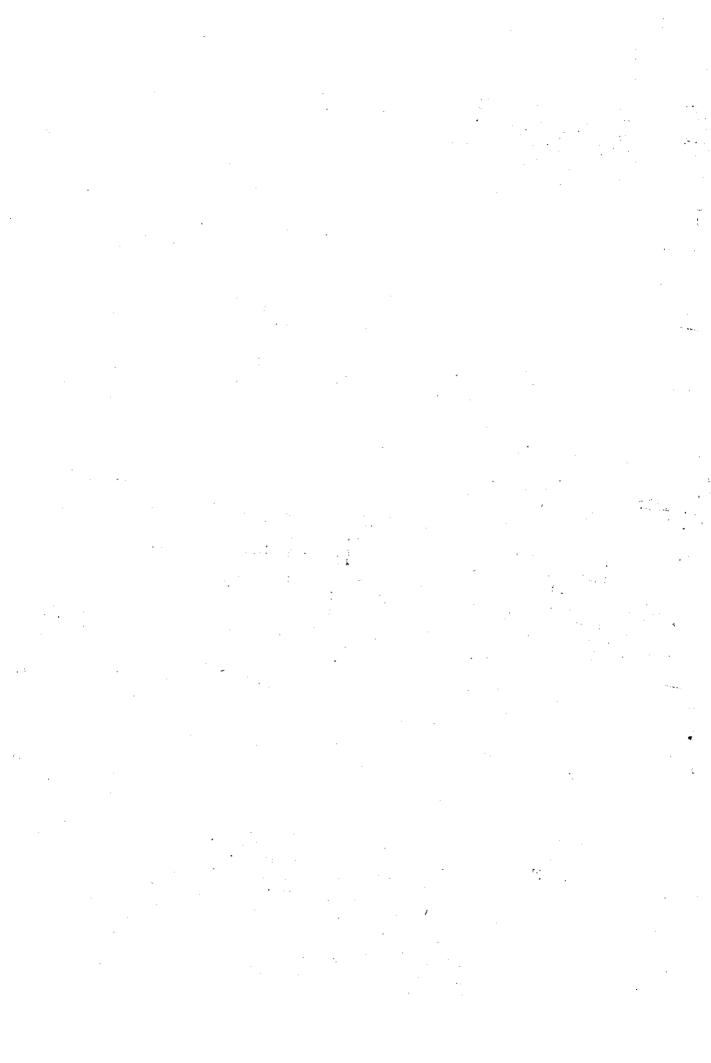
Table 3
Distribution of sterilised persons according to occupation

		ale			Female		Total	
Occupatio	n No). F	orcentage	No.	Percentage	No.	Percenta	nge
1. Agricul labour	39	981	9,6	438	7.6	4419	9.3	
2. Other u work 3. Skilled	_	394 566	54.0 13.4	2620 547	45.5 9.5	25024 6113	52.8 12.9	
4. Profess work		543	1.3	191	3.3	734	1.6	
5. Cultiva and far	mers 3	577	8.6	504	8.7	4081	8.6	,
6. Traders busines 7. Clerica 8. Others 9. No occu 10. Not rec	smen 1 1 work 3 pation orded 15	956 411 067 63 872 430	4.7 0.9 7.4 0.1	321 151 639 366 8007 13794	5.5 2.6 11.0 6.3	2277 562 3706 429 23879 71224	4.8 1.2 7.9 0.9	•

Information on occupation is recorded in the case of only two-thirds of the persons. Among them, a substantial percentage belong to the category 'other unskilled work' which consists of coolies and similar categories. The other categories which contribute near about 10% are skilled work and agricultural labour. A similar trend was seen in 1967-68 with a shift in favour of skilled workers and agricultural labourers. A comparison of the occupational workers and agricultural labourers. A comparison of the occupational composition of the sterilised persons with the distribution of workers in the general population according to 1961 census, given below, will indicate to some extent the groups among whom sterilisation is relatively more popular.

Table 4
Percentage distribution of workers in Kerala according to 1961 census

	Males	Females	Total
1. Agricultural labour 2. Cultivator 3. Trade and commerce	22.91	16.25	20.92
	13.10	27.42	17.38
	7.56	1.41	5.72
4. Mining, quarrying, livesto forestry, fishing etc. 5. Household industry	ck, 10.10 4.78	5.27 17.82	8.66 8.68
6. Manufacturing other than household industry 7. Construction	9.96	8.11	9.40
	1.71	0.18	1.26
8. Transport, storage communication 9. Other services Total	3.67	0.45	2.71
	26.21	23.09	25.27
	100.00	100.00	100.00



7. Occupation:

The distribution of sterilised persons according to occupation is given in the following table.

Table 3
Distribution of sterilised persons according to occupation

	1	Male		Female			Total	
U (cupation	No.	Porcentage	No.	Percentage	No.	Percentage	
1.	Agricultural labour	3981	9.6	438	7.6	4419	e . 3	
2. 3.	Other unskille work Skilled work	ed 22394 5566	54.0 13.4	2630 547	45.5 9.5	25024 6113	52.8 12.9	
4. 5	Professional work Cultivators	543	1.3	191	3.3	734	1.6	
	and farmers	3577	8.6	504	8.7	4081	8.6	
7. 8.	Traders and businessmen Clerical work Others No occupation Not recorded Total	1956 411 3067 63 1.5872 57430	4.7 0.9 7.4 0.1	321 151 639 366 8007 13794	5.5 2.6 11.0 6.3	2277 562 3706 429 23879 71224	4.8 1.2 7.9 0.9	

Information on occupation is recorded in the case of only two-thirds of the persons. Among them, a substantial percentage belong to the category 'other unskilled work' which consists of coolies and similar categories. The other categories which contribute near about 10% are skilled work and agricultural labour. A similar trend was seen in 1967-68 with a shift in favour of skilled workers and agricultural labourers. A comparison of the occupational composition of the sterilised persons with the distribution of workers in the general population according to 1961 census, given below, will indicate to some extent the groups among whom sterilisation is relatively more popular.

Table 4
Percentage distribution of workers in Kerala according to 1961 census

Category	Males	Females	Total
1. Agricultural l 2. Cultivator 3. Trade and comm	13.10	16.25 27.42 1.41	20.92 17.38 5.72
4. Mining, quarry forestry, fish Household indu	ring, live stock, ning etc. 10.10 astry 4.78	5.27 17.82	8.66 8.68
6. Manufacturing household indu	other than stry 9.96 1.71	8.11 0.18	9.40 1.26
8. Transport, sto communication 9. Other services	5.01	0.45 23.09 100.00	2.71 25.27 100.00



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A full scale comparison of the figures in tables 3 and 4 is not possible in view of the difference in the categories adopted for calssification. Only three categories namely, cultivators agricultural labour and trade and commerce are comparable in the two tables. Cultivators seem to be not sufficiently motivated to adopt sterilisation as seen from the fact that against 21% of cultivators present in the general population, there are hardly 5% cultivators among the storilised persons.

In respect of the category of agricultural labour in table 4, comparison with table 3 has to be made, taking together the two categories, namely, agricultural labour and other unskilled workers Linclude coolies who are mostly agricultural labourers. On the basis of this comparison, it may be seen that the proportion of agricultural labour among the sterilised persons is about three and a half times their proportion in the general population. Incentives given for sterilisation may be the main reason to attract larger percentage of persons in this category.

8. Income:

Another economic characteristic worth examining about the sterilised persons is the information on their intime information on they mentally income is usually collected. But there are limitations regarding the income data, due to the inaccuracy of the income figures furnished by the informants; and due to the larger number of 'not recorded' cases. The data on income have not been recorded during the year under report in 15% of the cases. following table gives the distribution of sterilised persons according to monthly income.

Table 5 Distribution of sterilised persons according to income

Monthly		Males		Females		Tota1		
income	No.	Percentage	No.	Percentage	No.	Percentage		
Below Rs.50/-	8932	18.6	2167	22.6	11099	19.2		
Rs.50~99	32644	° 67.8	5645	59.0	38289	66.4		
Rs.100-149	4273	2.1	858	3,8	ezzg	δ•0		
Rs.150-199 Rs.200 and above	1241 940	2.6 1.9	408 495	4.3 5.2	1649 1435	2.9 2.5		
Not recorded Total	£300 57430	100.0	4226 13794	100.0	13526 71224	100.0		

As in previous years, a very large percentage of the sterilised persons belong to the monthly income group of below Rs.100/-. The percentage is 86% during the year compared to 89% during 1967-68. This suggests that the financial incentive contiduring 1967-68. nues to exert a strong influence on the adopters of sterilisation operation. The popularity of sterilisation among lower income groups is also selective i.e. in the lower income groups themselves more literates adopt sterilisation,

S. Number of children:

The number of children born to sterilised persons and the number of children living in each sex at the time of sterilisation are two important aspects to the study. While the former gives



an idea of the parity, the latter gives information about the family size desired by the couple accepting sterilisation. Tables 6,7,8 and 2 give the distribution of sterilised persons according to the number of children born, total number of children living and the number of children living in each sex.

Table 6

Distribution of sterilised persons according to number of children born.

Number of		Males		Females	T_{\leq}	otal
children bor	n No.	Percentage	No.	Percentag	ge No.	Percentage
. 0	2	0.0	2	0.0	4	0.0
1	272	0.7	54	0.8	326	0.7
· 2	6628	16.1	624	9.1	7252	15.1
· 2 3	10309	25.0	1.640	22.9	11949	24.9
4	8892	21.6	1767	25.8	10659	22.2
4 5	6547	15,9	1212	17.7	7759	16.2
3	4370	10.6	761	11.1	513l	10.7
7	12327	5.7	416	6,1	2743	5.7
8	1124	2.7	214	3.1	1338	2.8
9	422	1.0	97	1.4	519	1.1
10	188	0.5	46	0.6	234	0.4
Above 10	25	0.2	26	0.4	111	0.2
Not recorded	116264	• •	6935	• •	23199	• •
Total	57430	100.0	13794	100.0	71224	100.0

Table 7
Distribution of sterilised persons according to number of Children living.

Numbe		Ma	les		Females	Total	
child: livin		Number	Percentage	Number	Percentage	Number	Percentage
0 1 2 3 4 5 6 7 8 9 10 above Not re		4 416 9511 13649 11091 7690 4729 2300 933 31,2 102 38 6655	0.0 0.8 18.8 26.9 21.8 15.2 9.3 4,5 1.8 0.6 0.2 0.1	2 225 1318 2701 2610 1751 1036 517 228 105 25 14 3262	0.0 2.1 12.6 25.7 24.8 16.6 9.8 4.9 2.2 1.0 0.2 0.1	6 641 10829 16350 13701 9441 5765 2817 1161 417 127 52 9917	0.0 1.0 17.7 26.7 22.3 15.4 9.4 4.6 1.9 0.7 0.2 0.1
	Total-	57430	100.0	13794	100.0	71224	100.0



Table 8

Distribution of sterilised males according to number of children living in each sex.

	Number of male children living	0	1	Number 12	of g	female 4		en 1	iving Above 6	Not recor	Total	%
	O 1 2 3 4 5 6 Above 6 Not recorded Total Percentage	582 203 81 21	123 6019 5911 12666 1224 422 133 45 16543 34.2	2611 1138 384 124 34 14833	2212 1544 674 195 54 15	964 949 556 266 87 20 4 3255	151 363 298 162 69 26 12 1	50 108 76 40 17 4 4 2 201 0.6	. 84	8932 8932	2838 14679 16112 5026 3971 1322 428 122 8932 57430 100.0	5.9 30.3 33.2 18.6 8.2 2.7 0.9 0.2

Table 9
Distribution of sterilised females according to number of children living in each sex

Number of male	Number of female children living								Total	%	
children living	0	1	2	3	4	5	6	eveda 6	Not re- corded		
0 1 2 3 4 5 6 25ove 6 Not recorded Total Percentage	2 43 173 209 107 44 10 15 	29 507 968 557 213 68 34 10 2386 30.6	658 896 530 223 78 24 7	384 279 105 35 15 3			14 16 15 10 5 2 2 64 9 0.8	1 12 3 4 3 1 1 25 0,3	6003 6003	397 1888 2661 1713 739 261 94 38 6003 13794	-

According to Table 6 about 41% of the persons are from the 3rd or lower parities. There are 4 persons who have adopted sterilisation without any children, More than 300 persons have 10 or more children born. The average number of children born for sterilised persons is



11. Cumulative achievement of sterilisation and its impact.

Though the characteristics of persons sterilised were studied upto 1968-69, the achievement figures are available upto the end of 1970. Table 10 gives the yearly achievements.

Table 10
Number of sterilisations conducted each year from 1957

Year	Number of male steri- lisations	Number of female sterilisations	Total	
1957 1958 1959 1960 1961 1962 1963 1964 1965 1966 1966 1967 1968 1969	521 1633 4132 3079 3578 4182 10395 17938 36102 33251 49489 64081 41867 49624	158 1507 2236 1953 2939 2916 2830 3936 6532 6147 10504 14066 17645 19860	679 3140 6263 5032 6517 7058 13225 21504 42634 35358 55593 78147 59512 69484	_
Total	31.9872	93259	413131	

The figures show that the steady progress in the programme till 1968 was intrrupted by a slight decline during 1966. In 1969 also the number of sterilisations has declined. In 1970 it has again increased though not to the 1968 level,

The impact of these operations can be measured in two ways. First, by finding out the number of births prevented by these sterilisations over the years. Secondly by the decline in birth rate. For finding out the number of births saved, the method developed by Sri S.P.Jain can be used. The method is the calculation of births that will occur to the sterilised females and wives of sterilised males on the basis of their age distribution and ago specific marital fertility rate. In the subsequent years, the number of survivers are found out by joint survival ratios. The total number of births saved till 1970 is estimated by the above method to be 2.26 lakhs.

According to the Government of India estimates 1.7 births will be prevented per sterilisation over a period of 1.0 years. Hence the number of births saved till 1980 by the sterilisations from 1957 to 1970 will be 7.02 lakhs. This excludes the impact of sterilisations that will be done after the year 1970.

12. Summary:

The study has provided the following main findings:-

The median age at the time of sterilisation is found to be 37.6 years for males and 30.5 years for females. These figures show a slight decrease compared to the previous year.

There is a slight increase in the percentage of Muslims among sterilised persons as compared to the percentages in the year 1967-68. But still the percentage is very low when compared to their percentage in the general population.

The illiterates are comparatively fewer among persons adopting sterilisation.

Large percentage of the sterilised persons belong to low income groups.

There is a shift in favour of early sterilisations i.e. compared to the previous year, more persons adopt sterilisation when they have 3 or less living children.

The sterilisations conducted in 1968-69 is estimated to have resulted in the saving of 16385 births during the 1st one year and 125528 births in the course of next 10 years.

A reduction of 2.3% in birth rate is estimated as a result of these sterilisations.



