

CHAPTER-II

NATURE OF FAMILY PLANNING

Demography not only studies population size, its composition, mortality, fertility, migration, distribution of population, social, economical and biological determinants, the consequences of population change but in addition to it, it gives more emphasis on family planning and family welfare.

The concept of family planning is explained from various aspects of life. In a simple language planned parenthood is called as family planning. The more meaningful definition of family planning can be made as, it is a means to control of reproduction by which people can give births to children when they are desired and prevent their procreation when they are not desired.

According to Margaret Sanger, "Family planning is a conscious means to control the birth rate which prevents conception."¹ But contraception and birth control terms are generally used for conscious responsible control of conception. However contraception means against conception or interference with conception.

1. Margaret Sanger, 'The History of the Birth Control Movement in the English Speaking World', p. 8.

According to Boyd, R.H., "The proper purpose of contraception is not to prevent family, but to limit children to reasonable numbers and to space out their arrival in a manner most suited to the health and wealth of the mothers."²

According to World Health Organization, "Family planning as a way of thinking that is adopted voluntarily, upon the basis of knowledge, attitudes and responsible decisions by individuals and couples, in order to promote health and welfare of the family group and thus contribute effectively to the social development of the country."³

The word 'Family Welfare' was made popular in place of 'Family Planning' by Janata Government in 1977. Hence family planning and family welfare are synonymous to each other. But the concept of family welfare is more wider than family planning.

OBJECTIVES OF FAMILY PLANNING :

The objectives of family planning are multi dimensional. Family welfare is one of the basic objective of family planning. Even to a greater extent we can say family welfare is a part and parcel of family planning. The objectives of family planning can be stated as follows :

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2. Boyd, R.H., 'Controlled Parenthood - A Practical Handbook on Birth Control', p. 7.
 3. World Health Organization (Technical Report Series No. 483).

- 1) Family planning gives more emphasis on proper spacing and limitations of birth.
- 2) It gives advice on sterility.
- 3) It gives education for planned parenthood.
- 4) It gives emphasis on screening for pathological conditions related to the reproductive system.
- 5) It concentrates on genetic counselling.
- 6) Family planning gives importance to pre-marital consultation and examination.
- 7) It carries out pregnancy tests.
- 8) It emphasises on marriage counselling.
- 9) Family planning gives importance to preparation of couple for the arrival of their first child.
- 10) It gives education in home economics and nutrition.
- 11) It gives advice in providing adoption services.
- 12) It gives emphasis on sex education.
- 13) It gives knowledge about various contraceptives of birth control.
- 14) It evaluates the progress made in motives, attitudes, knowledge and acceptance of family planning.

Demographic study examines the levels and patterns of fertility, the influence of social, economic and cultural factors,

such as religion, educational attainment of wife and husband, economic status, residence background, age at marriage, induced abortion, family size, child spacing and the knowledge, attitude and practice of family planning. Demographic study also attempts to examine the influence of relevant aspects of the social and economic system on the societal norms. It also throws light on fertility differentials and practice of contraception.

The family planning programme in India depends for its success on voluntary acceptance by the people, through a process of motivation and education. Govind Narain⁴ explained the philosophy behind family planning in his book 'India : The Family Planning Programme since 1965' as follows :

- a) The community must be prepared to feel the need for the services in order that those may be accepted when provided.
- b) Parents alone must decide the number of children they wish to have.
- c) People should be approached through the media they respect and through their recognised and trusted leaders.
- d) The services should be made available to the people as near to their homes as possible.

4. Quoted by Agarwal S.N., 'India's Population Problems' (IIIrd edition), p. 215.



e) The services will have greater relevance and effectiveness if they are made an integral part of medical and public health services, especially of the mother and child health programme.

In order to make people family planning minded it is necessary not only to inform them about methods, facilities and incentives, but also to instil into them the merits birth control. But there are so many reasons for this thwarted progress e.g. lack of interest, fissiparous tendencies like casteism, religiosity, regionalism etc. India's family planning schemes are doubtless ambitious.

After realising the seriousness of the India's population problem, the family planning programme in India was adopted as an official programme in the early 1950's. The national population policy was adopted to take welfare schemes in public health and child welfare. After every five years Government of India decided to form ambitious five years plans which are linked not only with economic progress but with family planning programme e.g. crash programmes to ease unemployment, housing schemes to provide living accommodation, public health schemes, child welfare, family welfare etc. The national policy has clearly defined family planning to be at the very centre of planned development. Family planning has to be undertaken, not merely as a major development programme but as a nation-wide

movement which embodies a basic attitude towards a better life for the individual, the family and the community. Family planning has been incorporated into general health programme and has become a regular part of the functioning of health centres and child maternity clinics. Mass communication and total mobilisation of resources have become significant features of family planning programme in India. Earlier, the population policy of India was equated with the family planning policy. But a major departure from this approach was made, when on 26th April 1976, the Minister of Health and Family Planning Dr. Karan Singh,⁵ declared the new National Population Policy of India. This policy statement takes into account the complex relationships between the social, economical and political aspects of the population problem and defines the way in which the family planning programme could be pushed ahead with due attention given to the various facets of the problem. He said, "we are facing a population explosion of crisis which has largely diluted the fruits of the remarkable economic progress that we have made over last two decades. If the future of the nation is to be secured and the goal of removing poverty is to be attained, the population problem will have to be treated as a top national priority and commitments."

5. Quoted by Agarwal, S.N. "India's Population Problems" (IIIrd Edition), pp. 233-234.

The national family planning programme is medically and not demographically, oriented. The possible contribution of social sciences in general and demography in particular must be assessed in the light present context. Taylor, C.E.⁶ has outlined five developmental stages in the organisation of a programme in his book 'Five Stages in a Practical Population Policy' as follows :

- 1) A direct response to the existing demand in countries or social groups, where family planning is not readily available.
- 2) Provision of good quality^t technical services and convenient administrative organisation.
- 3) Stimulating family planning motivation by caring for the health of mothers and children.
- 4) Development of methods to alter the views of the family on its own economic prospects and its understanding of financial implications of more children.
- 5) Modification of socio-cultural factors in motivation - removal or by passing of cultural blocks and strengthening mechanism to facilitate social change.

A major problem of the family planning programme in India is to effect a change in favour of controlling family size at the

6. As quoted by Jain S.P., 'Demography' - A Status Study on Population Research in India, Vol. II, p. 12.

personal level. An important area of research, very much neglected in India at present, is the study of social and psychological consequences of the use of family planning methods. It is indeed hoped that it will receive due attention for developing a strategy of change, for which it is necessary to understand the societal structure. Rawlet, H.M.⁷ feels that "the family planning movement has overstressed the independent contribution of fertility reduction and has tended to under-play conditions such as improved health, lowered mortality and altered opportunity structure, which enable these contributions to be made."