

CENSUS 2011: IMPORTANT HEALTH RELATED MESSAGES

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ABSTRACT

Census is a massive exercise which aims to the mass enumeration along with collection of certain vital information of the target population. In most of the countries, it is done at the interval of 10 years. Data thus collected is of vital importance to see the impact of strategies undertaken in last 10 years and also for the planning and redesigning the strategies or the future.

Recently released data for Census 2011 for India contains ample of information which can be segregated right up to a village. In this article attempt has been made to track and analyze some important health related indicators such as population growth, rural urban ratio, sex ratios and literacy status (with gender specificity) and the change of these indicators since earlier census undertaken in 2001.

Key words: Census 2011, sex ratio, decadal growth rate, literacy status

Census is the mass enumeration of the entire population of a defined geographical area at a particular point of time. Census operations in India probably largest of its kind in the world began since 1865. First two censuses in 1865 & 1872 were conducted in non synchronous manner in different parts of country. From 1881 onwards, censuses are being undertaken uninterruptedly. Census done every tenth year gathers many social, political, economic and health indicators which are crucial for future planning and also for evaluating the interventions carried in the past. The provisional data of Census 2011 has been just released and it brings out several important health related information especially when this data is compared and analyzed with data of previous census.

Some of the important findings of Census 2011 are as follows.

1. Decline in population growth rate:

Decadal growth rate is the rate of addition of new persons in the population since last census. This growth rate has been on decline since 1971. Compared to earlier declines in

decadal growth rates from 24.8% (1961 - 71) to 24.6% (1971 - 81), 23.87% (1981 - 1991) and 21.54% (1991 - 2001), this time the decline is very evident as the decadal growth rate is 17.64% during 2001 - 2011. Annual exponential growth rate too has decreased from 1.97% during 1991 - 2001 to 1.64% in 2001 - 2011. The dent of 4 points in decadal growth rate (from 21.54 to 17.64) in decadal growth rate has shown a visible reduction in growth rates of so called BIMARU states. The decadal growth rates for 2001 - 2011 for states like UP, Madhya Pradesh, Haryana and Uttarakhand now stand within the range of 19 - 20%. It will be interesting to know that Kerala recorded a decadal growth rate of only 4.86% which is at par with developed countries. At the same time Nagaland is the only state which has shown a marginal **negative growth rate** of 0.47% in this decade which is seen in some developed or eastern European countries which are heading towards population stabilization. It is indeed a good sign that ever increasing population of our

country is now showing some sign of de acceleration of population growth. In accordance to this decline in growth rate, it is the first time that our country reported smaller increase in absolute addition of new persons (18.1 crores during 2001 – 2011 than 18.2 crores during 1991 – 2001). This is despite the fact that the base population in 2001 was much higher (102.8 crores) than in 1991 (84.6 crores). Proportion of 0 – 6 years population to total population – another indicator of recent fertility has also decreased since 2001 (15.9%) and now stands at 13.2%.

2. Ever increasing population and rural urban difference:

Due to continuous increase in population since 1911, the population density (number of persons per square kilometer) is on regular increase. It was 274 in 1991, increased to 324 in 2001 and is now 382 in 2011. Within the country it shows wide diversity in small states and union territories such as Delhi recorded highest population density of 11297 while the Arunachal Pradesh had the lowest (17). Increasing population along with migration of people to urban areas in quest of jobs results the tilting of urban rural balance. Urbanization is on increase. In 2001 census, the urban population was 27.8%. Growth in the two segments has also been different. While the rural population during 1991 – 2001 grew at the rate of 17.9% the urban population during grew faster at the rate of 31.2 %. Census 2011 places the proportion of urban population at 38.7%.

3. Improvement in Literacy:

Improvement in literacy in general and in women in particular has important bearings on health as a literate/ educated person is more amenable for health education and is more likely to avail health services. Literacy is a proportion calculated in the population (> 6 years of age) for the persons who are able to read and write. Literacy rate is increased from 65.4% in 2001 to 74% in 2011. The gains have been more impressive in women (54.2% in 2001 to 65.5% in 2011) than men (75.9% in 2001 to 82.1% in 2011). Overall improvement in literacy reduces the gender gap as well. In the Kerala where the overall literacy is 93.9% the difference in male and female literacy is also less being

only 4% as the literacy in male and females are 96.0% and 92.0% respectively. An indication of great strides being made in educating women perhaps could be the reason leading to decrease in proportion of 0 - 6 to total population to 13.2%, indicative of decrease in fertility in last 6 years.

4. Sex ratio in total and 0 – 6 years population:

Sex ratio is the number of females per 1000 males. Biologically this ratio should always be more than 1000, however, it depends up on selective migration (both inter and intra country), female feticide and differential health and social care norms (discriminating female population) and as a result this ratio is mostly adverse (being less than 1000). This ratio is calculated for total population, 0 – 6 years age population (referred as child sex ratio). Child sex ratio depends up on the selective contraceptive use; sex determination followed by female feticide but is largely uninfluenced by migration. The total sex ratio is the end product of migration, differential care and also the fertility experiences. In terms of total sex ratio the country is showing a progressive improvement from 927 (1991) to 933 (2001) to 940 (2011). Still the Kerala is the only large state in the country which has a sex ratio of more than 1000 (1084). A disturbing trend observed at the same time is the declining child sex ratio. It was 945 (1991) and decreased to 927 (2001) and 914 (2011). This is an area of concern because despite the campaigns by governments to save the girl child and rigorous implementation of PNMT act. Worst culprits are northern belt comprising of Punjab (846), Haryana (830), Delhi (866), J & K (859) and Chandigarh (867) followed by the states of Uttarakhand, Gujarat (886 each), Rajasthan and Maharashtra (883 each). Jhajjar (774 females) and Mahendragarh (778 females) two districts from Haryana have the distinction of recording lowest child sex ratio in the country. In fact within these 2 districts, there are villages which have the child sex ratio as low as 500. As mentioned earlier this adverse sex ratio in 0 – 6 years cannot be attributed to the migration and solely depends up on the fertility pattern of the community in last 6 years. It is worth noting here that the small states such as North Eastern states and so called “BIMARU states

showed a favorable sex ratio in this population. As a whole the diverse trends in sex ratio where the total sex ratio is improving but the 0 – 6 years sex ratio is decreasing is a challenge to all governmental agencies, social scientists, demographers, NGOs and the civil society. It may be noted that if a decline continues in the sex ratio of 0 – 6 years, soon it will start reflecting in overall sex ratio and it will be impossible to sustain or improve overall sex ratio. At the same time it is interesting to see that Gujarat has shown opposite trends. It showed a

marginal increase in sex ratio in 0 – 6 years from 883 (2001) to 886 (2011) while showed a decline in overall sex ratio from 920 (2001) to 918 (2011); both opposite to national trends.

Finally a paradox is seen with this census data where we see that the some of the states from Western India performing well on economic development or education do not do so well in area of health. It only emphasizes the need to share the fruits of development with the entire population and thereafter these developments should also reflect in the health improvement of people as well.