



# DECLINING FERTILITY IN INDIA: BOON OR BANE

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## ABSTRACT

Total fertility rate in India has come down steeply over the past few decades owing to various factors including obesity, stress, smoking, and environmental pollution are contributing to the declining fertility rates in India. India's fertility numbers fell from nearly 6.2 in 1950 to just fewer than 2 in 2021. Falling fertility rates have left India staring at the spectre of looming demographic challenges which have caused big problems for other Asian powerhouses like China and Japan. India direly and instantaneously needs to take proactive measures to counter the impact of declining fertility rates. India's declining fertility rates are inking to a demographic shift with long-term socio-economic implications. Proactive policies addressing economic, healthcare and social challenges are crucial to adapting to this transformation. Learning from global experiences and focusing on sustainable development, it is suggested that India should navigate these challenges effectively. The present appraises the fertility, declining fertility rates, reasons, suggestions for improvement etc.

**Key Words: Fertility, Declining, reasons, suggestions**

## INTRODUCTION

Total Fertility rate (TFR) is one of the immensely important factors in population growth. It has declined from 2.2 (reported in 2015-16) to 2.0 at the all- India level, according to the latest National Family Health Survey of India OR NFHS- 5 (phase 2) released by Union Health Ministry. The TFR is 1.6 in urban areas, 2.1 in rural area and at all India it is 2.0. The NFHS-5 (National Family Health Survey) for 2019-2021 conducted in around 6.1 lakh sample households from 707 districts of the country, covering 7, 24,115 women and 1, 01,839 men for providing disaggregated estimates up to the district level. There are 1,020 women per 1,000 men in India according to the recently released Fifth Edition (NFHS-5). Such a sex ratio has not been recorded in any of the previous four editions of the NFHS.

A comprehensive demographic analysis of global fertility in 204 countries and territories from 1950-2021 has found that fertility is declining globally and that future fertility rates will continue to decline around the world, remaining low even under successful implementations of pro-natal policies. Total fertility rate in India has come down steeply over the past few decades, India's fertility numbers fell from nearly 6.2 in 1950 to just fewer than 2 in 2021. As per policymakers' calculations, these rates stand to fall further to 1.29 by 2050, before touching a worrying level of 1.04 by 2100. This is broadly in tune with falling global fertility rates -- which came down from 4.5 in 1950 to 2.2 in 2021. The global figure is seen sliding to 1.8 in 2050 and 1.6 in 2100 (**Economic Times, 2024**).

The Global Burden of Diseases, Injuries, and Risk Factors Study (GBD) 2021, noted that India has moved from a fertility rate of 6.18 in the 1950s to a Total Fertility Rate (TFR) of 1.9 in 2021. This was below the replacement fertility level of 2.1 (which is the average number of children a woman should have to replace herself and her generation, for population stability). The GBD study projected that the TFR could fall further to 1.04 — barely one child per woman — by 2100. India's fertility rate has fallen substantially - from 5.7 births per woman in 1950 to the current rate of two. Fertility rates have fallen below the replacement level of two births per woman in 17 of the 29 states and territories. The Global Burden of Diseases, Injuries and Risk Factors Study (GBD) 2021, noted that India has moved from a fertility rate of 6.18 in 1950s to a Total Fertility Rate (TFR) of 1.9 in 2021 (**The Hindu, 2025**).

### **TOTAL FERTILITY RATE (TFR)**

**Total fertility rate (TFR)** is the average number of children born to a woman in her reproductive years (15-49 years). The total fertility rate (TFR) is an important factor in determining the population growth and demographic stability of a country.

### **Replacement Level Fertility**

Replacement level fertility is the level of fertility at which a population exactly replaces itself from one generation to the next, i.e. the level of fertility needed to keep the population the same from generation to generation. The Replacement Level Fertility rate is 2.1 but not 2. The TFR of 2.1 ensures the replacement of the woman and her partner. Another 0.1 children per woman are included to counteract infant mortality.

### **UN PROJECTION OF HUMAN POPULATION**

United Nations (UN) projects that the global human population may increase from 7.8 billion in 2020 to 10.9 billion by 2100. A 40 per cent population increase would have a strong impact on economies, food production, environment and global climate. Based on these observations and the ongoing global decline in TFR, the United Nations through its medium projection model has predicted that TFR around the world will converge to near replacement level (2.1) during the decades up to 2100. Nevertheless, it is top-notch important for understanding the causes of population growth for aspects of international and national planning for the future.

### **KEY INDICATORS FOR INDIA IN NFHS-5**

The key indicators for determining the fertility rates in India are listed below. These indicators were made use to compile the data in NFHS-5.

1. Population and Household Profile
2. Characteristics of Adults (age 15-49 years)
3. Marriage and Fertility
4. Infant and Child Mortality Rates (per 1,000 live births)
5. Current Use of Family Planning Methods (currently married women age 15–49 years)
6. Unmet Need for Family Planning (currently married women age 15–49 years)
7. Quality of Family Planning Services
8. Maternal and Child Health–Maternity Care

9. Delivery Care (for births in the 5 years before the survey)
10. Child Vaccinations and Vitamin A Supplementation
11. Treatment of Childhood Diseases (children under age 5 years)
12. Child Feeding Practices and Nutritional Status of Children
13. Nutritional Status of Adults (age 15-49 years)
14. Anaemia among Children and Adults
15. Blood Sugar Level among Adults (age 15 years and above)
16. Hypertension among Adults (age 15 years and above)
17. Screening for Cancer among Adults (age 30-49 years)
18. Knowledge of HIV/AIDS among Adults (age 15-49 years)
19. Women's Empowerment (women age 15-49 years)
20. Gender-Based Violence (age 18-49 years)
21. Tobacco Use and Alcohol Consumption among Adults (age 15 years and above)

## **TOTAL FERTILITY RATE IN INDIA**

According to the United Nations' population division, countries experiencing below replacement fertility (lower than 2.1 children per woman) indicate that a generation is not producing enough children to replace itself, eventually leading to a reduction in population. Total Fertility Rate of 2.0 indicates the stability of the population in the long-term for a country. It means two parents are being replaced by two children in the future. India is still not expected to see a fall in population for another 30-40 years since more than 30 per cent of the population is between ages of 10 and 30 and is likely to have children over the next two decades. According to estimates for 2024, India—the most populated country in the world by 2024, currently ranks 101st globally with a total fertility rate (TFR) of 2.03 children per woman.

### **Mortality rates**

Infant and child mortality rates have improved since the previous round. The steepest fall has been recorded in the mortality rate of children under 5 – from 49.7 to 41.9 deaths per 1,000 live births.

### **Vaccination rates**

Vaccination rates have improved since NFHS-4. The fraction of fully vaccinated children between the ages of 12 and 23 months has gone up from 62 to 76 per cent, along with the rates of partial vaccination.

### **Childhood diseases**

'Childhood diseases' present a more mixed picture. While the prevalence of diarrhoea in the two weeks preceding the survey dipped slightly in NFHS-5, the fraction of children receiving ORS and zinc for diarrhoea has gone up substantially.

### **Child-feeding practices**

Children's feeding practices have largely improved – except for the percentage of children younger than 3 years who were breastfed within an hour of birth and also remain unchanged from NFHS-4. The largest

improvement is in the percentage of children who were exclusively breastfed when under six months—from 55 in NFHS-4 to 64 per cent in NFHS-5.

### Nutritional Status

The NFHS-5 data shows that the percentage of children with stunted (low height-for-age), wasted (low weight-for-height) and underweight (low weight-for-age) has gone down. There is a slight increase in the percentage of severely wasted and overweight children. The more alarming thing is the 8 percentage points rise in the fraction of children suffering from anaemia – from 59 per cent in NFHS-4 to 67 per cent in NFHS-5. While there has been some progress, India is not making as much progress as it should have towards SDG 2.2 – since the percentage of stunted, wasted, underweight, and anaemic children in India is 36 per cent, 19 per cent, 32 per cent and 67 per cent respectively.

### REASONS FOR DECLINING FERTILITY RATES

Improvements in maternal and child health services have also contributed to declining fertility rates. Better access to prenatal medical care, skilled birth attendants and post-natal care has reduced infant and maternal mortality rates, which have encouraged couples to have fewer children. Many factors like education, economy (Gross Domestic Product), religious beliefs, contraceptive prevalence rate (CPR), the strength of family planning programs etc. influenced the fertility rates of a country. These factors played a pivotal role in the current decline in the fertility rate in India and these factors are listed below:

1. Higher level of education among females
2. Increased mobility
3. Late marriages
4. Financial independence
5. Better access to family planning methods/ high contraceptive prevalence rate
6. The declining infant mortality rate
7. The declining neonatal mortality rate

### Factors Affecting Fertility

- ❖ Age.
- ❖ Previous Pregnancy
- ❖ Duration of sub-fertility
- ❖ Timing and Frequency of Sexual Intercourse.
- ❖ Lifestyle Factors.
- ❖ Weight.
- ❖ Smoking.
- ❖ Caffeine

### Son Preference

India's traditional patriarchal institutions strongly have perception that sons are more valued than daughters for at least two well-documented reasons. First, the economic utility of sons is greater because they provide more financial and emotional fillip to parents in their old age. Second, a socio-cultural logic that rests

on traditional religious beliefs, patrilineal family structure and dowry systems accords preferential treatment to sons over daughters. In high-fertility societies with low contraceptive prevalence, a strong son preference does not always result in higher fertility because couples continue to have many children despite the sex composition of their existing children (**Bongaarts, 2013**). Thus, most couples attain the one or two sons they desire by chance. There is a substantial effect of son preference because the TFR and DFS are declining, contraceptive use is increasing, and more couples can be expected to reach DFS without a son (or sons). In fact, estimates from the 2001 census show unusually high sex ratios among young children under age seven due to sex-selective abortions and excess female mortality in Punjab and Haryana in the north and Gujarat in the west (**Arnold et al., 2002**).

### **Educational opportunities**

Increased education of women leads to improved contraception use, child health and workforce participation, consequently lowering fertility rates.

### **Family Planning (FP)**

Government-led FP initiatives enable couples to decide on child number and spacing resulting in declining TFR

### **Delayed Marriage**

The average age of the first pregnancy has dropped from the mid-20s to late 30s due to delays in the age of marriage.

### **Infertility**

The TFR rate faces a sharp decline due to rising concern over lifestyle factors like obesity, stress, smoking and increased pollution leading to infertility among couples. The general fertility rate in India has fallen 20 per cent in 10 years, with nearly 30 million people affected by infertility.

### **Child Mortality**

With improvements in child health services and immunisation programmes, child mortality rates have declined, further leading to a decline in TFR.

## **IMPACT OF DECLINING TFR**

### **Positive Impact**

#### **Resources Mobilisation**

A falling fertility rate will lead to lower pressure on land, water and other resources and would contribute to achieving environmental goals.

#### **Educational Efficiency**

Declining TFR could improve educational outcomes without additional resources and would contribute to achieving environmental goals.

## **Negative Impact**

### **Increase in Dependency Ratio**

Sustained low fertility will produce a contracting population with fewer young people relative to older people as noted in China, Japan etc., leading to an increase in the dependency ration.

### **Physical Challenges**

A decreased working-age population, along with increase in spending on social security, pensions, geriatric care etc. would put pressure on the fiscal resources of India.

### **Labour Forces**

Lower TFR can adversely affect economic productivity and growth due to a shortage of skilled workers, further leading to labour market imbalances and potential economic stagnation.

### **Migration**

Declining fertility rates can impact migration patterns. Countries with ageing populations may attract immigrants to address workforce shortages, fostering diversity and immigration policy tensions

### **Shifting Family Dynamics**

Decreasing family size can disrupt traditional support systems like grandparental childcare, potentially increasing elder loneliness, psychological issues etc. due to the rise in nuclear families.

## **WAY AHEAD**

### **Enhancing support**

Governments and businesses should focus on childcare support, provide tax subsidies, improve parental leave entitlements etc. to make child-bearing affordable for the working parents.

### **Gender Equity**

For women to be able to manage careers with motherhood, it would be crucial for men to take greater responsibility for household and care work.

### **Economic Policies**

To combat potential threats to public health, economic policies stimulating growth and job creation, alongside social security and pension reforms will be essential in mitigating the impacts of declining fertility rates.

### **Skill Enhancement**

To make sure that an ageing population does not become an economic disaster, the working-age population, regardless of its size, and age, should be equipped with the necessary skills to boost their productivity.

The low fertility rates in India eventually will lead to a decline in population like in developed countries such as Japan, Germany and Russia. Hence, the focus on limiting the family size can be reduced. The need of the hour now is to divert the attention to other matters like:

- ❖ Better employment opportunities so that the limited working population will be skilled in the future.
- ❖ Formulate policies to take care of higher medical costs as the population ages and productivity shrinks.
- ❖ Provide an affordable social security system that provides pensions to the elderly and takes care of their daily needs and medical expenses.
- ❖ States with higher fertility rates need to keep working on improving schooling, income levels, and reducing infant and neonatal mortality rates.

## CONCLUSION

Fertility is reduced in the face of intense son preference which leads women and couples to selectively allow foetuses that carry sons to term. On the other hand, if women have additional births in the pursuit of sons, then fertility will be increased. The future of India's fertility decline, particularly to replacement levels, will depend heavily upon the magnitude of decline in the large northern states. The combination of declining fertility rates and longer life expectancies presents a complex situation, necessitating provisions for social security and healthcare for the increasing elderly population. There is also a need to generate employment opportunities that effectively utilize the skills of this demographic. India braces for a surge in its senior citizen population, policymakers face additional challenges in managing social security programs and healthcare infrastructure, experts have cautioned.

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