

Book Review

Population, Fertility, and Family Planning: Contraceptive Method Mix in Asian Countries by Aditi Kundu and Bhaswati Das, Rawat Publication, New Delhi, 2019, pp. 248, ISBN: 978-81-316-1097-8, Rs. 975.

Discussions on growing population and its associated problems gained popularity with the academic concept of 'overpopulation' by Malthus in 18th century Europe. Following Malthus' book '*An Essay on the Principle of Population as it affects the Future Improvements of the Society*', the Neo-Malthusian League proposed contraceptives for controlling population. Thereafter, discussions around the control and regulation of population, the use of contraceptives, checking the rising population and introduction of family planning programme started gaining ground. While family planning and its associated practices were an outcome of social spontaneity in the developed parts of the world, in the developing countries the government had to take initiatives so as to ensure development in respective countries. In India, the government was mainly responsible for initiating family planning. In 1951, India was the first country in the world to have state-sponsored family planning programme with the aim to lower fertility rates and slow population growth as a means to boost economic development. The programme was associated with a series of five year plans and aimed at economic growth and restructuring which was carried out over a period of 28 years. Currently, India is at a juncture wherein it is approaching replacement level fertility, however population still continues to be a challenge for not only the country but also for the subcontinent as a whole. In 2017, IMF issued a statement wherein ageing and productivity decline were singled out as the major challenges in front of Asia in terms of its economic growth and development. The post dividend economies such as China, Japan, South Korea and Hong Kong were said to be reaching the highest old-age dependency ratios globally by 2050. Population numbers and economic growth have therefore been intrinsically linked and continue to function in the same manner and it is in light of these circumstances and interconnections, the book provides an extremely valuable and comprehensive insight into the history and politics of family planning through the lens of contraceptive methods mix.

The book starts by looking into the history of contraceptives across the globe with special focus on the Asian story. It touches upon issues concerning the rise of the birth control movement, its relation to development (both in the developed and the developing world), the initiation of the family planning programs and the variation in contraceptive methods mix according to the socio-cultural factors prevalent in the region or country. This is followed by an explanatory framework of the study with a brief background on the region considered under study, the data source and the methodology, the technical definitions considered, the statistical functions and a detailed account of the variations in contraceptive methods mix across the geographical regions, method types and fertility rates. Towards the end of the second chapter, the countries under consideration have been categorized into three groups with justifications behind the same.

The first group of countries i.e. countries which have achieved replacement level TFR of 2.1 include 13 countries from low fertility to high fertility. An intra-group comparison of the countries broadly points towards the fact that the nature of family planning and population

policies adopted by the government of the respective countries has a very important role to play in determining the contraceptive method mix that is opted by the particular country. Countries wherein state intervention in family planning is limited have generally been seen to adopt traditional methods as their chosen contraceptives since modern methods of contraception are rather costly in these countries. In addition to this, Buddhist-majority countries generally perform better when it comes to family planning as evident in the case of Thailand and other East Asian countries. Japan and South Korea however have also had a very long history of family planning coupled with rapid industrialization and development which has been largely successful in bringing down the TFR of these countries drastically. The Japan story has also been called rather unique in the book since Japan was one of the first countries to popularize the use of condoms among its army-men and ever since then the 'condom-culture' is so deeply-rooted in the Japanese psyche that nearly three-fourths of the methods mix of this country is still dominated by the same. However, the authors strongly maintain that the historicity of any country should be taken under consideration before generalizing the fertility outcomes of the countries under question.

The second group includes countries in transition i.e. countries with a moderate level fertility rate ranging from 2.2 to 2.9. There are 15 countries which have been classified under this group and the family planning policies and contraceptive methods mix with a focus on the population policies in recent times have been dealt with in great details. Following from the third chapter, this chapter also maintains that government interventions (or the lack thereof) determined by the historicity and as well as the aims and the objectives of the country's family planning programmes are largely deterministic of the method mix that prevails in the country. However, the success and failure of the government policies largely depends on the cultural fabric of the land like people's response with vasectomy in India and IUDs in Cambodia.

The countries constituting the third group have a very high fertility rate of 3 and above. There are about 10 countries falling within this group. The state's concern and role with regards to family planning is rather limited in such countries owing to underdevelopment, instability and religious fundamentalism. However, it was generally observed that there lies a higher prevalence of hormonal contraceptives, more dominantly oral pills followed by IUDs. Some of the reasons put forward in this regard would be disproportional knowledge of a single method, disproportional availability of a single method, government incentives provided to promote a single method and in some cases, exclusion of a method due to one reason or the other. In addition to this, perceived inferiority and male dislike of condoms (like in the case of Maldives) have also promoted hormonal methods in the region. Service delivery by institutions such as the UNFPA and the UNSAID which often depend on distributable contraceptives is also said to be responsible for the prevalence of a particular method.

Towards the end, the book provides a detailed and a comprehensive account of the contraceptive method mix of the countries in Asia by linking it to the family planning programmes and the population policies pursued by the state in the past as well as in the present. It is perhaps the first of kind, given that fertility and family planning in the Asian context have been rarely explored and more so with regard to the historicity of the countries concerned and the role of the state. The book provides significant insights and background on the subject with precise country-specific details. However, if one is to look at the dynamics of family planning

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and contraceptive methods mix, perhaps the aspect of gender and especially women's status and autonomy cannot be ignored altogether. Development, technology and the role of the state aside, a lot of the family planning practices are determined by the position that is accorded to women within the family and in the society at large. In fact given the robust categorization that the authors have adopted, it would have been far easier (at the risk of ignoring heterogeneities within the group itself) to generate a broader generalization of the manner in which women are treated in such societies and hence its effect in determining the contraceptive methods mix in the country. Even though the authors touch upon such issues while narrating the bigger story, such that the male dislike for condoms and hence the popularization of hormonal methods in Maldives or the criminalization of abortion and the lack of bodily autonomy in case of women in such countries, a far more nuanced explanation, taking into consideration the gendered aspect of family planning and contraceptive use would have made the study more comprehensive.

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