Population Education in India: A Perspective

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1.1 Introduction

Population Education in India: Meaning

One of the formidable problems which stare us in the faces, is our rapid increasing population, which offsets every endeavour for development. A need is being felt for imparting factual knowledge about population dynamic, so that the younger generation may understand the nature and magnitude of the burden imposed by rapid population growth.

Our population is increasing annually at a rapid rate of 2.5 percent. India is next to China, has little less then three times the population of U.S.A., twenty-one times the population of Canada and more than six times the population of Japan. With the present growth rate the country’s population may reach the incredible figure of one-billion before the end of this century.

Meaning:

According to UNESCO, “Population Education is an educational programme which provides for a study of population situation of the family, the community, nation and world, with the purpose of developing in the students rational and responsible attitudes and behaviour towards that situation.”

The National Seminar on Population Education held in Bombay gives a comprehensive definition of population education. “It is essentially related to human resource development. It is not only concerned with population awareness but also with the developing values and attitudes which take care of the quality and quantity of population. It must explain to the students cause and effect relationship, so as to enable them to make rational decision on their own behaviour on population matters.”
Hence, we can conclude that population education is an exploration of knowledge and attitudes about population, family living, reproduction education and basic values. It means educating the students about large population or ever-increasing population.

1.2 Objectives:
The objectives of Population Education are:

1. To enable the students to understand that family size is controlled.

2. That population limitation can facilitate the development of a higher quality of life in the nation.

3. That a small family size can contribute materially to the quality of living for the individual family.

4. To enable the students to appreciate the fact that for preserving the health and welfare of the members of the family and to ensure good prospects for the younger generation, the Indian families of today and tomorrow should be small and compact.

5. To give accurate information to the students about the effect of changes in family size and in national population on the individual.

1.3 Problems:

1. Food Problem:
Due to tremendous increase in population, the food problem continues in-spite of the spectacular achievement of the green revolution. The quality of food consumed is also below nutritional level. The scientific and technological advancements are being neutralized by the increase in numbers.
2. Economical Problem:

There has been remarkable progress in both the industrial and agricultural sectors during the last five decades. But there is no increase in their per-capita consumptions. The increased facilities in various sectors of life do not keep pace with the needs of the growing population.

3. Younger Generation Problem:

The growing population is usually a problem relating to younger population. Almost half of the population of our country is less than 16 years of age. This young population requires a proportionately larger outlay for supporting the social services needed for it, like education, health, transport housing and other facilities. It is impossible for a developing country for providing all these amenities in requisite adequacy.

4. Environmental Problem:

Increasing number cannot subsist only on agriculture. They migrate to urban areas, big cities and industrial centres. Such a situation is creating problems like water and air pollution, transportation, shortage of housing, over-crowding schools, growth of slums. Growing population defies all efforts in planning for development and the country remains as backward as ever.

5. Educational Problem:

There are also some educational problems and difficulties due to over population.

These are:

(a) Too many pupils at all levels.

(b) Poor building, furniture and equipment’s.

(c) Wastage and stagnation.
(d) Poor-staff.

(e) Unemployment

(f) Poor quality of education.

(g) Student indiscipline and other allied problems at various stages of education.

Hence, Population Education needs to be given top priority. The situation is so grim that something needs to be done quick at grassroots level. The younger generation needs to be informed. They need to be properly educated for leading a planned adult life. A country, where 50% of the population is below 18 years, marriage is almost universal, where literacy rate is just 30%, where the standard of living is low and unemployment has taken on dangerous proportions. Population Education seems to be most relevant.

1.4 Role of Education:

Education has a great motivational force to perform for controlling over population. Suitable educational measures need to adopted to promote desirable changes.

1. Community forums and voluntary organisations should discuss the drawbacks of large families and the merits of small families.

2. Children in the elementary stage should also be taught through their courses of study, the merits of small family and demerits of large family and should develop favourable attitude and appreciation for having a small family when they become adults.

3. Boys and girls at the secondary stage should be given the knowledge in a scientific way about the reproductive biology system and the sex-hygiene.

4. Parent-teacher associations can also take the responsibility of educating the families.
5. Schools should assume the responsibility of educating the community and the families and should collaborate with other agencies for the education of the masses for having small families.

1.5 Programmes:

Realizing the potential of education in tackling the problems of growing rate of population, the Ministry launched a Population Education Programme with effect from 1980 designed to introduce Population Education in the formal education system. The duration of the programme will be five years (1980-85).

The underlying object of the programme is to create in the younger generation, an adequate awareness of the population problems and realization in this regard of its responsibilities towards the nation. The programme has been sponsored by the Govt. of India, NCERT with UNESCO support to 143 million school children in primary, secondary and higher secondary schools in the country.

The activities of the programme may be divided in the following heads.

1. Curriculum and instructional development.

2. Training programmes.

3. Evaluation and research.

The Ministry of Education was the implementing agency. At the state level the programme is being implemented by the State Govt. According to the approved plan. The NCERT provides technical assistance. A National Steering Committee has been set up under the chairmanship of Secretary, with overall authorities for coordination as well as implementation of the programme.
In the context of becoming socialised for adult citizenship roles, each student can be made familiar with programme in family planning. Hence, the population control programmes must be universally accepted in the interest of the family and the nation. The aim of the Family planning is to make family life and the life of the children happier, richer, more prosperous and more progressive.

We should realize that family size is controllable and that it can facilitate the development of a higher quality of life in the nation and that a small family can contribute to the quality of living for the individual family. Hence, Education should make people aware of the high rate of growth of population and then warn them of the evil effects. Then the education will be to give the concept of a small family and how in small families resources of family are shared by a small number, who can live in peace and happiness.

Population Education programme is a scheme in the central sector of Ministry of Education and played an important role. It has been developed in collaboration with the United Nations Funds for Population Activities (UNFPA) and with the active involvement of the Ministry of Health and Family Welfare.

In the year 1994, there was an International Conference on population and Development which was held at Cairo. This was the third International Conference which has adopted a Programme of Action in the period of two decades. A 175 odd-countries including India participated in the conference. The 112 page documents adopted by the Conference have set 3 main goals before all national governments.

These are education specially for girls, reduction in infant and maternal mortality and universal access to family planning and health services. Addressing the conference, the leader of the Indian delegation and the Union Minister of Health and family welfare, Mr. B. Shankarananda set the tone of India’s stand.
He called upon the world community to stop the arms race, so that adequate funds could be made available for health services. He said, “we together have the will and ability to make this world a healthy and happy home for our future generation. Let not posterity accuse us of having failed or faltered in our attempt to provide health for all.” Cairo conference has laid down the population policy on the broad tenets that education is the key investment that the countries should make and population policy should be broader than this planning.

The role of teachers in population education is significant, and the implementation of this responsibility changes the task of the instructor, making him responsible for orienting the instructional program to meet the needs of society; carrying community experience into the total school program and classroom; and creating social support for the program. The success of population education depends on the school climate, and if teachers are not adequately motivated and involved, programs can be obstructed.

The task of education is to assist the increasing number of children in meeting the challenges and demands arising from changing social situations. Population education is an important entity among the subject areas of the school curriculum which is primarily concerned with the well-being of both individuals and the society; the goal is to help each student accept the small family norm as a way of life. The population concept can be easily integrated with the relevant topics in almost all school subjects.

**Argument: There is a demand from both students and parents for education about family life, reproductive health, and population issues**

In a UNFPA essay contest, adolescents from all over the world expressed their support for responsible reproductive health programs. They highlighted the lack of equality between the sexes and argued the need for the following: better information regarding the joys and dangers of sexual relationships, accurate information about AIDS and other STI, access to advice relating to early marriage, greater male involvement in family responsibility, and support and guidance as they make their transition to adulthood (Popnews, 1996). Students in Ugandan schools listed the
following topics as priorities for learning about sexual development: girl-boy relationships, bodily changes during puberty, dealing with parents, and HIV and STI (Watson, 1998). A Youth Counselling Centre in Asmara, Eritrea, funded jointly by UNFPA and Norway’s Save the Children Fund, was packed with children and young adults only six weeks after it opened in early November 1996. The Centre provided adolescent counselling on sexual health and STI/AIDS, and advice on reproductive health and family planning (UNFPA, 1999a). A national poll in the United States found that 89% of public school parents feel that public high schools should include education about family life and reproductive health in their curriculum (Rose & Gallup, 1998). A study in Germany showed that, although some parents discussed sexuality with their children, 90% of the parents would like the schools to provide such instruction (Rehman & Lehmann, 1998). Data from 34 case studies in developing countries revealed that young people wanted much more explicit focus on sexuality in the school curriculum, preferably provided by health providers (Brown et al., 2000).

**Argument: Schools are strategic entry points for addressing family life, reproductive health, and population education**

Schools have the potential to reach a large portion of the world’s children and adolescents. More children than ever attend school. In the developing world, where the last 30 years have seen an impressive improvement in enrolment rates, more than 70% of children currently complete at least four years of school (UNICEF, 1996a). Between 1985 and 1995, the global gap in school enrolment between boys and girls narrowed in developing countries because of efforts to enrol more girls (Cooper, 1999). Those gains are now threatened by the devastating effects of the HIV/AIDS pandemic and by attrition, especially among girls. Still, with more children than ever in schools, schools are an efficient way to reach school-aged youth as well as teachers and staff. Children who attend school can also be involved in school-based activities that include outreach to family and community members and out-of-school children. Since schools are part of the communities where they are located, they are in a good position to have insights into how best to address these issues in a culturally appropriate and acceptable way (Rice, 1999). During the critical developmental period of adolescence, schools have the opportunity to improve children’s health, self-esteem, life skills, and behaviour with interventions to promote health and prevent diseases (WHO, 1996). Many young people initiate sexual intercourse while they are enrolled in school (Weiss et al., 1996). Schools have the opportunity to address young people before they initiate sexual and other risk behaviours. Educating adolescents at this key juncture in their lives can lay the groundwork for a lifetime of healthy habits since it is often more difficult to change established habits than it is to create good habits initially (Kirby, 1994). How reproductive health is addressed in childhood will set the stage for how the population will deal with many health issues in years to come (Rice, 1995). Teachers can play an important role in influencing health. The president of Education International, a world trade union for the education sector representing more than 23 million teachers in 148 countries and territories, points out that “teachers are absolutely critical, not only to the development of individuals but to the development of nations as well. Teaching, more than any other profession, influences who we are and influences societies in which we live” (Education International, 1997). 2.2.2 Argument: Schooling is a cost-effective means of improving the health of the current and next generation of young people. Research has shown that “women with more education stay healthier and raise better-nourished, healthier and better-educated children” (Cooper, 1999). Education has been found to expand choices for men and especially women (Jejeebhoy, 1995). In most areas, women
who attain more formal education are more likely to delay childbearing and marriage than their peers with little or no schooling (McCauley et al., 1995). Cross-country studies have shown that an extra year of schooling for girls reduces fertility rates by 5–10% (UNICEF, 1996b). Compared with various public health approaches, school health approaches that provide safe and low-cost health interventions, such as screening and health education, have been identified by the World Bank as one of the most cost-effective investments a nation can make to improve health (World Bank, 1993).

2.2.3 Argument: Schools can encourage and support parents and families to communicate with their children about family life, reproductive health, and population issues. Many parents either lack knowledge about sexual matters or are afraid to discuss them with their children (DeBouck & Rees, 2001; Oikeh, 1981). Intergenerational studies have found that when there is communication between parents and children regarding reproductive health issues, it is often limited to threats and warnings without explanations (Wilson, Mparadzi & Lavelle, 1992). A study in Germany found that among parents, 90% of mothers and 80% of fathers believed that they knew the most favourable time for conception; however, only 78% of mothers and 67% of fathers actually knew the correct information (Kluge, 1994). Schools may offer classes or brochures directly to parents to help them become more effective in addressing reproductive health and population issues with their children, including questions related to sexual orientation and related depression. Schools may also give homework assignments that students have to complete with their parents and that may lead to increased family communication about family life and reproductive health issues (UNESCO/UNFPA, 1998b).

Argument: Openness about family life, reproductive health, and population education reduces risk factors

In a comprehensive UNAIDS review of sexual health education, five comparison studies indicated that “when and where there was an open and liberal policy as well as the provision of sexual health education and related services (e.g., family planning), there were lower pregnancy, birth, abortion, and STI rates” (UNAIDS, 1997, p. 17). A 37-country comparison study found that countries that address young people’s sexual health in a frank, open, and supportive manner experienced fewer of the negative consequences of sexual activity, yet did not see greater sexual involvement. The study concluded that “increasing the legitimacy and availability of contraception and sexual health education (in its broadest sense) is likely to result in declining adolescent pregnancy rates” (Jones et al., 1985, p. 61). In Uganda, the Straight Talk Foundation has produced and distributed nation-wide a newspaper that addresses adolescent concerns about sexual and reproductive health. Counsellors and clinicians visiting schools allow students to ask them questions directly. Recent studies in Uganda indicate that young people are adopting safer sex practices and waiting longer to initiate sexual activity than they did a decade ago (Gender-Aids, 1999). There has been little or no backlash to the Straight Talk newspaper, despite its matter-of-fact approach to sexual health. Straight Talk has used research from elsewhere in the world to reassure adults that reproductive health education does not increase adolescent sexual activity (Watson, 1999). The youth in France, Germany, and the Netherlands experience an open, matter-of-fact approach to sexuality education. When compared to youth in the United States, who experience a more restricted approach to sexuality education, the former initiate sexual intercourse later, report more use of effective contraception methods, and have significantly lower rates of births, abortions, and sexually transmitted diseases than do their American counterparts (Berne & Huberman, 1999).
Conclusion

Hence, Population Education needs to be given top priority. The situation is so grim that something needs to be done quick at grassroots level. The younger generation needs to be informed. They need to be properly educated for leading a planned adult life. A country, where 50% of the population is below 18 years, marriage is almost universal, where literacy rate is just 30%, where the standard of living is low and unemployment has taken on dangerous proportions. Population Education seems to be most relevant.

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