Introduction

The current population of India is 1,394,642,466 as on August 1, 2021, and according to the current growth rate, India will surpass China by 2030.[1] An increased population is always a major problem for developing countries such as India because it affects all parameters of a country, especially health and economy. Recently, the Government of Uttar Pradesh (UP) unveiled the draft bill of the UP Population Policy (2021–2030) on World Population Day to bring down the gross fertility rate and stabilization of the population. The history of the two-child norm in India has shown that different state governments had tried to implement it at different timelines during the past 20 years. Global evidence suggests that Vietnam and Bangladesh have stabilized their population and control birth rate despite not having two-child policies. Moreover, sex-selective abortion, preference for male children, denying the paternity of female children, pre-natal sex determination, and violence against women for giving birth to girl children will be on rise. Female literacy, empowerment, and addressing unmet needs of contraceptives are the time-tested solutions for population control rather than raising a new social problem with a “two-child policy” bill/act.

History of the Two-Child Policy in the World

A two-child policy has previously been used in several countries including Iran, Singapore, and Vietnam. In British Hong Kong in the 1970s, citizens were also highly encouraged to have two children as a limit (although it was not mandated by law), and it was used as part of the region’s family planning strategies. At that time, a campaign was launched, that is, the “Two is enough” campaign, which reduced the general birth rate through educational means. The total fertility rate in Hong Kong is currently 1.04 children per woman, one of the lowest in the world. From 2016 to 2021, it was implemented in China, replacing the country’s previous one-child policy, until it was replaced with a three-child policy to mitigate the country’s falling birth rates.[3] Recently, Bangladesh has announced two-child policies in 2019.[3]

History of the Two-Child Policy in India

The history of the two-child norm in India has shown that different state governments had tried to implement it at different times.

Abstract

Recently, the Government of Uttar Pradesh (UP) unveiled a draft bill of the UP Population Policy (2021–2030) on World Population Day to bring down the gross fertility rate and stabilization of the population. The history of the two-child norm in India has shown that different state governments had tried to implement it at different timelines during the past 20 years. Global evidence suggests that Vietnam and Bangladesh have stabilized their population and control birth rate despite not having two-child policies. Moreover, sex-selective abortion, preference for male children, denying the paternity of female children, pre-natal sex determination, and violence against women for giving birth to girl children will be on rise. Female literacy, empowerment, and addressing unmet needs of contraceptives are the time-tested solutions for population control rather than raising a new social problem with a “two-child policy” bill/act.

Keywords: Two-child norm, population policy, sex-selective abortion, unmet needs of contraception

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timelines during the past 20 years (e.g., Madhya Pradesh in 2001, Telengana and Andhra Pradesh, Gujarat in 2005, Maharashtra, Uttarakhand, Odisha, Bihar, Assam, etc.). The objective of this two-child norm was to relate it with different government welfare schemes and participation in the legislative election. However, it has been challenged in the court of law at different times.[4,5]  

**UP Two-Child Policy**

The Uttar Pradesh State Law Commission has released a draft of the proposed population control bill, which also has similar objectives and implementation strategies which have been implemented/tried to be implemented by different states.[6,7]  

**Salient Features of the Bill (Two-Child Norm)**

**Incentives**

1. Certain benefits for government servants (e.g., additional increment, subsidy, soft loan, certain rebates, extra leaves, etc.).
2. Benefits for the general public (soft loan, rebates, etc.).
3. Below Poverty Line (BPL) couples (cash incentives).

**Disincentives**

1. Debarring from the benefits of government-sponsored welfare schemes/subsidy.
2. Limit of ration card up to four.
3. Bar on contesting local body elections.
4. Bar on applying/promotion of government jobs.

Duties/activities will be focused/conducted by the government for the society in relation to population stabilization under the bill.

a. Distributions/encouragement/awareness generation related with contraceptive devices/services through health care providers/non-governmental organizations, etc.

b. Organizing massive information and education campaigns to generate public awareness related to the benefits of having small families and healthy birth spacing.

c. Conducting regular vaccination and immunization drives to protect the children from various health risks.

**Pros and cons of the bill in different countries globally:**[8-10]  

**Pros**

1. Allowing almost all people to have their preferred number of children (China).
2. Stabilization of the population and reduction of fertility (China).
3. Improvement of health outcomes (China).
4. Reduction in unemployment (China, Japan).
5. Improvement in the life standard (China).
6. An increase in family time among parents by sending parents’ home from offices early on the third Wednesday of every month so that they can spend more time with their children (South Korea).
7. Economic stability in the family (e.g., child care grant, monthly grants, paid maternity leave to parents) (Japan, Vietnam, United Kingdom).
8. Reducing carbon emission (Vietnam).

**Cons**

1. Violation of human rights (Myanmar).
2. Increased abortion, infanticide, and female feticide (Vietnam, China).
3. Population aging in the long run, so more sound policy actions are needed to meet the social, health, and care needs of the elderly population (China, Iran).
4. The problem of unregistered children (China).
5. Derangement of sex ratio (China).
6. High contraceptive demand but inadequate supply (Vietnam).

**Discussion**

Although the name of the bill is The Uttar Pradesh Population Control, Stabilization, and Welfare) Bill 2021, the salient features of the bill have shown that it has major emphasis on debarring from different elections and welfare schemes. Similar kinds of bills/acts have been in practice in different states of the country, although the literature says that improvement of literacy, birth spacing, addressing unmet needs of contraception, and increasing age of marriage are a few of the time-tested solutions for population stabilization.

Global evidence suggests that Vietnam’s population policy since 1980s had stipulated a limit on family size to two children, but there are signs that Vietnam’s population policy has focused too strongly on contraception and abortion to control the birth rate and stabilize the population.[10]  

Similarly, Bangladesh is a good example that has stabilized the population and controlled the birth rate despite not having two child policies. Since it became an independent nation in 1971, Bangladesh has been implementing family planning programs, in an attempt to keep a check on rapid population growth. Bangladesh has invested heavily in family planning methods and services. Data published by the World Bank show that the number of births per woman in Bangladesh came down from 6.9 in 1971 to 2.06 in 2017. Experts believe that Bangladesh’s media, particularly public broadcasters, played a major role in making people aware of the benefits of having fewer kids by pointing out that it helps parents to take better care of their children as well as causes less of a financial burden. The importance of access to education in achieving birth control must also be underlined. The increase in literacy rates over time has also had a positive impact on lowering the fertility rate. To reduce population growth, Bangladesh has been providing free contraceptives to women for decades. Regular birth control pills are particularly popular among women in the country.[11]
Moreover, the Indian society is a patriarchal society and a society that has a preference for male children. Therefore, The Economic Survey of 2018 mentions that “son meta preference”—the desire to have a male child—has resulted in 21 million “unwanted girls” in India.[12] Moreover, the social structure of India is such that the decision for reproduction or a complete family size does not depend solely on the desire of women, and the role of the husband, in-laws, and relatives has a generalized impact and the desire for a son for continuation of ancestry will force her for reproduction again and again. Therefore, the law will force her in front of a double-edged sword. There is a chance that as people living in smaller towns and villages still follow the old traditions, the new policy would cause agitations in communities.

Sex-selective abortion is an established phenomenon in India, and in 2003, Amartya Sen has highlighted that in the past century, 100 million women had been missing in South Asia because of “discrimination leading to death” experienced by them from the womb to the tomb in their life cycles. The two-child norm policy in the present form will encourage it further because the couple has only two attempts to reach the desire goal (male child), and it will further produce a stretch on the gender ratio. Moreover, illegal and sex-selective abortion will make the life of women miserable.[13] A study conducted by Baruch in 2005 entitled “Law of Two-Child Norm in Panchayats: Implications, Consequences and Experiences” had highlighted that people have an opinion that “political position/subsidy etc., are not going to support them in old age; it is only the son who will do it.” Therefore, if this kind of deep-rooted thinking of the community is still prevalent in our society, unless we address this law, it will be disaster. Other than this, there will be more practice of parents dapping female children or sending them to orphanage, denying the paternity of female children, pre-natal sex determination, violence against the women for giving birth to girl children, etc.[14] Moreover, one of the criticisms of this “two-child norm” in the present format is that it is very harsh toward the divorced couple. If the couple already has two children with the previous marriage, then what will be the status of those children born after re-marriage (if any of the divorced husband/wife gets re-married after divorce)? Divorce is one of the painful experiences of someone’s married life, and because of this “two-child norm”, no one would come forward to marry a divorced lady. China had already experienced many of these factors with their one-child policy for the past 20 years, and considering this, the Population Foundation of India issued a statement saying that China must learn from China’s failed experience with enforcing coercive population policies. “Gender social problems, frightful in nature and proportion, and worrying socio-demographic consequences of a declining child sex ratio have forced them to move away from this coercive policy.[14] It said that religion has little to do with fertility levels, but what makes the difference is “education, employment opportunities, and accessibility of contraceptives.”[15]

The total fertility rate (TFR) across most Indian states declined in the past half a decade, more so among urban women, according to the latest National Family Health Survey (NFHS). Census 2011 and SRS 2018 data also show that states having high literacy have low TFR similarly and low literacy is related with high TFR [Table 1]. If we focus on the reduction of TFR in India after independence, major reduction has occurred between 1980 and 2011 [Figure 1a]; similarly, major improvement in female literacy also occurred between 1981 and 2001 [Figure 1b]. Therefore, it is the literacy (especially female literacy) that plays a significant role on population reduction. According to the NFHS-4 data, the women in the lowest wealth quintile, and the least educated women, had on an average one more child compared to those with more than 12 years of schooling and in the highest wealth quintile.[15] Another important factor (unmet needs of contraceptives) has an important relation with TFR. NFHS4/5 and SRS 2018 data show that states having high unmet needs of contraception have a high TFR and it is true for vice versa [Table 1]. In the case of Bihar and Uttar Pradesh too, a well-implemented family planning policy/service can bring about a gigantic change and a population control policy will do more harm than good.

**Conclusion**

Adoption of the “small family norm” will have better utilization of scarce resources (health care, environment, education, occupation, etc.), will have less stress on parents/government, and will improve the quality of services, but states should not ignore the responsibility of accessible, affordable, equitable, and quality basic care and services to the citizens. Globally, countries have shown that the “two-child norm” act may not always produce the desire outcome; on the contrary, unintended outcomes were far more serious. Studies have found that people never have accepted family planning services because of law, but they have been accepted when they have completed their desire family size (specially with male children).[16][17] Although the proposed “two-child norm” act is not completely a coercive or preventive act and rather a way to send messages advocating a small family, the real answer of population stabilization lies on social development, women empowerment, affordable family planning services, and autonomy.

Table 1: State-wise comparison of literacy rate with TFR and unmet needs of contraception

| State                 | Literacy rate* | TFR*     | Unmet needs** |
|-----------------------|---------------|----------|--------------|
| Top five states       |               |          |              |
| Kerala                | 94.0%         | 1.7      | 12.5         |
| Lakshadweep           | 91.85%        | 1.4      | 12.3         |
| Mizoram               | 91.33%        | 1.9      | 18.9         |
| Goa                   | 88.70%        | 1.3      | 8.4          |
| Daman and Diu         | 87.10%        | 1.8      | 11.9         |
| Last five states      |               |          |              |
| Andhra Pradesh        | 67.02%        | 1.6      | 4.7          |
| Jharkhand             | 66.41%        | 2.5      | 11.5         |
| Rajasthan             | 66.11%        | 2.5      | 7.6          |
| Arunachal Pradesh     | 65.39%        | 1.7      | 12.5         |
| Bihar                 | 61.8%         | 3.2      | 13.6         |

*Source: Office of the Registrar General and Census Commissioner, Ministry of Home Affairs, Government of India. **Source: SRS Statistical Report Detailed Tables 2018 **Source: NFHS-5
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