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Inquiry into Fertility of Immigrants

Preliminary Report

Introduction

IMMIGRATION INTO BRITAIN from Commonwealth countries, on any appreciable scale, is a phenomenon of very recent years. It is a result of the economic attractions of good wages and the welfare services coupled with the freedom of citizenship within the Commonwealth: a freedom now subject to qualifications as a direct result of the increasing scale of immigration. Birmingham has been a focus of attraction because of its prosperity and the diversity of its trades. Within Birmingham immigrants have tended to congregate in certain parts of the city; Sparkbrook, Soho, Balsall Heath, Handsworth, Lozells, are all wards with more than 5,000 immigrants. Sparkbrook ward contains the highest total number of any ward, and includes representative groups from several different countries of origin. (See Table 1A).

Most immigrants are not accompanied by their families when they first arrive. Some will send for them later, usually when they consider they have established themselves sufficiently securely; others may set up permanent or semi-permanent liaisons with members of the indigenous population or with other immigrants. In any case the pattern of fertility they exhibit becomes a matter both of intrinsic interest from the sociological viewpoint and of importance in the future provision of services of all kinds. Before it has crystallized into a set form in the course of time

TABLE 1A
POPULATION AT 1961 CENSUS

SPARKBROOK		TOTAL	%	MALES	FEMALES
WARD					
Irish .. ..	..	3,735	14.5	2,186	1,549
West Indian ..	..	1,021	4.0	606	415
Indian/Pakistani		848	3.3	760	88
Others .. ..	..	810	3.1	544	266
Total imm. pop.		6,414	24.9	4,096	2,318
Great Britain ..	..	19,345	75.1	9,405	9,940
TOTAL					
SPARKBROOK		25,759	100.0	13,501	12,258
BIRMINGHAM					
Immigrant ..	..	99,842	9.0	58,523	41,319
Great Britain ..	..	1,007,345	91.0	486,101	521,305
TOTAL .. ..	..	1,107,187	100.0	544,624	562,624

NOTE: The nationality groups in the table above refer to population by place of birth, in accordance with the Census definitions.

West Indian corresponds to the Census category "British Caribbean Territories".

Indian/Pakistani combines the two Census categories of "India" and "Ceylon/Pakistan".

it is important to record and examine the pattern of fertility, even though the period is one of transition and high social mobility. It is such transitional periods in fact which have in the past so frequently escaped informed sociological observation.

The present investigation was begun in March 1963, in Sparkbrook, to attempt to provide information of this kind, and even more important, to discover to what extent such information was obtainable, and if obtainable, reliable. The Census of 1961 included questions on country

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of birth which, although the movement of an immigrant population is more rapid than that of the indigenous, could be related to results obtained in an Inquiry. The University of Birmingham had availed itself of the offer by the General Register Office of full census data for each Enumeration District. The average composition of an Enumeration District is about 250 households. In Sparkbrook there were thirty Enumeration Districts, which meant that Inquiry results and Census data could be compared on a finer basis than had hitherto been possible. For this purpose the Inquiry was associated with the West Midlands Social and Political Research Unit, which was set up by the University of Birmingham to administer the Census material, and to initiate and co-ordinate research related to it.

Like many of the areas where immigrants have settled in this country, Sparkbrook before the First World War was a select middle- and professional-class residential district. Now it is a compact working-class area which has seen successive influxes of immigrants: the Welsh in the 1920s, the Irish in the 1930s and the West Indians and the Indians and Pakistanis since the mid-1950s. Terrace and court housing has

now surrounded the large and lofty Victorian houses, which the pressure for accommodation has turned into one-room tenements. The Ward itself is now almost a self-sufficient entity; it is served by road, railway and canal communications; it is the home of several light-engineering firms and service industries, enough to provide employment for many of its residents. In addition to the normal amenities, there are now to be found shops run by Moslems for their own special requirements, a cinema showing Indian films; and places of worship suited to the wider range of beliefs now represented.

Structure of Sample

Ten of the thirty Enumeration Districts were chosen for inclusion in the sample. Although the Census data were not available at the beginning of the Inquiry, the definition of each Enumeration District was known. From the Electoral Registers the proportion of electors with Asian names was assessed for each Enumeration District, and the ten Districts with the highest proportions selected. Names of Irish or West Indians were of course mostly indistinguishable from the names of the indigenous population. Table 1B shows a breakdown, according to the

TABLE 1B
IMMIGRANT POPULATION OF SPARKBROOK—Census 1961
(by place of birth)

Age grp.	S	Ireland			India				Cey./Pak.				Br. Carrib.				Other				
		M	W	D	S	M	W	D	S	M	W	D	S	M	W	D	S	M	W	D	
0-14	256	—	—	—	18	—	—	—	11	—	—	—	50	—	—	—	85	—	—	—	
15-19	119	3	—	—	7	2	—	—	5	—	—	—	26	—	—	—	20	1	—	—	
20-24	233	128	—	—	11	8	—	—	10	33	—	—	82	15	—	—	30	11	—	—	
25-34	225	417	—	2	2	35	1	—	30	310	—	—	104	140	2	—	60	106	1	1	
35-44	131	287	4	2	4	18	—	—	8	158	—	—	34	90	1	—	29	93	1	—	
45-54	57	173	14	1	2	13	—	—	2	50	—	1	12	39	—	—	14	44	3	1	
55-64	21	84	5	—	—	6	—	—	2	10	—	—	2	6	—	1	9	19	1	—	
65+	2	13	9	—	—	3	—	—	—	—	—	—	1	1	—	—	1	11	23	—	
TOTAL	1,044	1,105	32	5	44	85	1	—	68	561	—	1	311	291	3	1	248	285	9	2	
				2,186				130				630				606				544	
		FEMALES																			
0-14	271	—	—	—	25	—	—	—	7	—	—	—	48	—	—	—	65	—	—	—	
15-19	91	21	—	—	2	1	—	—	2	1	—	—	14	5	—	—	11	1	—	—	
20-24	87	177	—	—	—	6	—	—	—	6	—	—	42	42	—	—	4	20	—	—	
25-34	64	361	4	—	—	14	—	—	1	7	—	—	38	128	4	—	5	52	—	—	
35-44	24	222	4	1	—	9	—	1	1	3	—	—	16	38	2	1	7	48	3	—	
45-54	17	101	10	3	—	—	—	—	—	—	—	—	8	20	—	2	1	16	2	—	
55-64	4	43	11	—	—	—	—	—	—	—	—	—	2	4	—	—	1	12	2	—	
65+	2	10	21	—	1	1	—	—	—	—	—	—	1	—	—	—	3	5	8	—	
TOTAL	560	935	50	4	28	31	—	1	11	17	—	28	169	237	6	3	97	154	15	—	
				1,549				60								415				266	

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1961 Census, of the immigrant population of the ward by sex and marital status.

Here, as in Table 1A, the headings refer to the population classified by place of birth. Children of immigrant parents born in this country are thus classified as born in Great Britain. In our sample, however, we have grouped children by the place of birth of their mother's present consort. We found no immigrants from Ceylon in the districts included in our sample and we grouped together those from India and Pakistan to form our Indian/Pakistani group.

The different patterns of immigrant settlement are apparent from Table 1B in the numbers of women in the West Indian group compared with the Indian/Pakistani. In the latter group no woman in our sample came unless at her husband's request to join him. Almost the direct opposite was the case in the West Indian group, where the common pattern was that a woman would come unattached and independently to this country. While here she may cohabit with a West Indian, usually from the same island, hoping eventually to return home with him. On the other hand, Indians or Pakistanis who bring their families here have generally no intention of returning to their own country.

The area selected is bounded on the west by the Stratford Road, a main arterial road running in a south-easterly direction, and by the canal and railway line on the east, running approximately parallel. In the centre is Farm Park, a remnant of the estate of Sampson Lloyd, one of the founders of Lloyd's Bank. In the south-east corner are Barber Trust houses, which contain no immigrant families. They have been excluded entirely from the sample. Apart from this section, the whole area chosen was "scanned": particulars were obtained of the occupants of every dwelling. Every house in which was living an Indian or Pakistani family was included in the sample, and we interviewed all other families, of whatever nationality, living in the same house. *Family*, or *family unit*, was used as a term to include husband, wife and children (if any), or a woman living alone, or a man and woman cohabiting, whether the woman had children or not, and whether by her present consort or another.

This method of sampling, which had the

advantage of equalizing the background of living conditions and of maximizing the numbers of the smallest group, the Asians, yielded insufficient numbers of English families to form a comparable group. To supplement this group, and incidentally the Irish and West Indian groups too, we interviewed all families in every tenth house in the streets where we had found Indian or Pakistani families living. This included the whole of the area we had chosen except the south-east corner, where all the housing was that of the Barber Trust. In this way we ensured that all our informants lived in very similar accommodation. If a tenth house happened to be one already included in the main sample, the house next before it was taken.

During this time a questionnaire was being compiled. It was tried out in a pre-pilot survey of twenty-five households in Balsall Heath, an adjoining ward to Sparkbrook, similar in character. This experience showed that once initial contact had been made, immigrants were willing to talk about their family life both in their country of origin and here, and about their reasons for coming, how they had raised the fare, etc. The first form of the questionnaire was therefore expanded after this pre-pilot survey, and interviewing with the new questionnaire began in Sparkbrook in May.

Two hundred and fifty-four families were interviewed at 119 dwellings, out of a total sample selected of 263 families. There were seven refusals: two English, two Irish, one West Indian, one mixed (an Irish woman, living with a Pakistani), one Pakistani; and two non-contacts (one English and one Irish). We excluded one Polish, one Nigerian, and four Arab families, leaving a total sample size of 248.

A written form of introduction was used, when necessary, explaining the purpose of the survey:

... to find out more about conditions as they are, so that plans may be made for the future in the redevelopment of Birmingham and by the extension of its social services.

Immigrants proved easy to interview. They were anxious to please, and to settle down; ambitious for their children and for themselves. The English and the long-settled Irish were more sure of themselves and their rights; sometimes

critical of the coloured immigrants, especially the Indian and Pakistani group, because of ignorance, their very different way of life, and the language barrier. Freedman, Whelpton and Campbell (1959) found that questions about family planning were more readily answered than those about income, which some informants considered to be "too personal". In our sample, we were refused details of income in two cases, but met no refusal of information about family planning. In four instances it was not sought because in each of these it was not the woman herself or her husband who was interviewed, but in three cases her son, and in one, a student living in the same house and of the same nationality.

The families interviewed were classified into four nationality groups. A general description of the background of each group is given, and the numbers in brackets indicate the total of completed interviews.

ENGLISH (54): These were families who had lived in the area since before the war, and had seen it change in character. They were mostly older women who had completed their families; but there were some young couples, who were either living with their parents or had moved into the area temporarily until they could find accommodation elsewhere. Many of them were resentful of immigrants because of their different way of life, and their effect in lowering the social standing of the area.

IRISH (69): These fall into three sub-groups:

(i) a settled group, closely similar to the English;

(ii) an itinerant group, travelling back and forth between England and Ireland, according to the labour situation, whose permanent home was usually in Ireland and their time here only short;

(iii) the Irish tinkers, who used to be horse-dealers, leading a nomadic life in caravans; now dealers in scrap, second-hand furniture, etc.; still nomadic, and very different in way of life from their respectable long-settled compatriots; stricter Catholics and regular church-goers, adhering to the teachings of the Church on birth control.

WEST INDIAN (56): This group lived an easy-going, loose-knit family life, in which marriage was neither socially nor economically necessary. English was their native language, and Christianity, in various forms, their religion. They settled down easily and were on the whole well tolerated by their English neighbours; it was the hope of most of them sooner or later to

return to the West Indies. Men and women came singly, met here and cohabited or married here. We found no example of a couple arriving together who were married before they came to this country.

INDIAN/PAKISTANI (69): Although by no means a homogeneous group they were distinct and separate from the others because of several predominant factors. Their skin was a different colour; their languages different, few knowing much English; and their beliefs and way of life were very different. Many seemed to have no wish to be assimilated, and had come, for the most part, by means of an organized network of family and village connections. The first immigrants in this group were mostly seamen, either deserting ship at a British port, or getting their discharge papers in a Commonwealth country. Once settled they sent for their families to join them. Recently, others had come not directly from India, but from East Africa—Kenya and Tanganyika mainly—where for a long time there has been an Indian population, chiefly small businessmen and civil servants. The spread of nationalism in Africa had put their position in jeopardy and they have chosen to come to England. They came with the advantage of a knowledge both of the English language and the English way of life, making it an easier matter for them to settle in England than for their countrymen coming from a rural and traditional life at home. Of the whole group, we found that a majority had come from either the Mirapur area, in Northern Pakistan, or from the Punjab region of India and Pakistan.

Interviewing

With few exceptions the interview took place with the mother in each family unit. The exceptions occurred among the Indian/Pakistani group where the mother spoke no English: in some cases the interview was with the father, alone or in the presence of his wife, and often senior members of the family too.

The attitude towards family planning showed interesting differences between the groups. Among the English and the Irish, the decision to try to plan or to limit the family was a joint one. In the West Indian group it was the concern of the woman: few women in this group marry or even have the advantages of a stable union until after the birth of several children. If a West Indian woman eventually marries she will often have had children by other men than her husband, though he will accept them all as his family. Among the Indians and Pakistanis,

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the mother's role is still governed by tradition: her husband is responsible for her and for her behaviour; she is a reflection of her husband, and her views are his. Only slowly does this seem to be changing, and any decision to allow his wife more freedom in this country than she is accustomed to at home, is the husband's.

All the questions, except certain of those relating to family planning, were factual, and internal checks of various kinds were included. To some, however, it was impossible to get accurate answers. For example, several Indian and Pakistani families had no record of the birth dates of their children who were born before they came to this country. Their way of life at home had not demanded registration or the exact remembrance of such events. Different cultural, economic and social patterns in the immigrants' home countries made it sometimes difficult directly to compare the experiences and practices of different groups before they came to England.

Results

The composition of the sample is shown in Table 2. Throughout the sample, the woman was grouped according to her husband's nationality or if she were unmarried, according to her own. Mixed unions, whether by marriage or co-habitation, were all formed by white women with Indian, Pakistani, or West Indian men. We found no example of the reciprocal.

In many respects it was more meaningful to subdivide the Indian/Pakistani group on the basis of religious practice into Moslems, Hindus, Sikhs, and a Mixed group. The composition of the Mixed group is as follows:

- One English wife married to a Hindu born in England.
- One English woman married to an Anglo-Pakistani from whom she is now separated.
- Three married English women, separated from their husbands, living with Hindus.
- Three single English women living with Moslems.
- Three Irish wives married to Moslems.
- One Irish widow living for the past fourteen years with a Moslem whose own wife is in Pakistan.
- One German wife married to a Moslem.

The four nationality groups are close to equality in size: the optimum ratio for purposes of comparison. The third column of Table 2 shows the percentage of women ever marrying to be high, as would be expected from the method of selecting the sample, except in the West Indian group, where a different custom prevails. The column showing women ever pregnant thus gives a better basis for comparison between the groups. The figures in the last column are affected by extraneous factors in the case of the two latter groups. The marriage customs among the West Indian group are such that only a small proportion of mothers (1 in 5) are represented here (see for instance Blake, 1961); a figure based on duration of cohabitation before the birth of the first child would be more properly comparable, but the data necessary are not in every case available. Among the Indian/Pakistani group, both the custom of child marriage and often the long separation of the wife from her husband before she joins him in this country, contribute to an extended interval between marriage and the birth of the first child. The same disparity of custom recurs at a later stage in our analysis and is examined more closely in Tables 6 and 7. By examining the percentages of women married by a given

TABLE 2
DETAILS OF SAMPLE

	No. of women in group	As % of total sample	Women ever marrying %	Women ever pregnant %	Women ever having L.B. %	Average duration of marriage before birth of 1st child (months)
English	54	21.8	94.4	92.6	85.2	20.0 (45)
Irish	69	27.8	97.1	88.4	82.6	18.5 (56)
West Indian	56	22.6	60.7	94.6	89.3	29.0 (11)
Indian/Pakistani	69	27.8	97.1*	97.1	92.8	36.0 (62)
Total	248					

* Excluding the Mixed group from the sample, 100% of the Indian/Pakistani women were married, and all of them before the birth of the first child.

NOTE: Figures in brackets in the last column refer to the numbers of families from which the average was derived.

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TABLE 3
OF THOSE WOMEN MARRIED, % MARRIED BY A GIVEN AGE

	- 12 years	- 15 years	- 18 years	- 21 years	- 24 years	- 27 years	- 30 years	- 33 years	- 36 years	- 39 years
English (51) ..	—	—	17.7	49.0	72.6	88.2	94.1	98.0	98.0	100.0
Irish (67) ..	—	1.5	26.9	59.7	85.1	94.0	97.0	98.5	98.5	100.0
West Indian (34) ..	—	—	11.8	35.3	58.8	73.5	79.4	91.2	100.0	.
Indian/Pakistani (67)	6.0	28.4	65.7	88.1	97.0	97.0	100.0	.	.	.

TABLE 4
AVERAGE AGES (YEARS)

	In sample	Ever pregnant	Never pregnant	At marriage	At 1st birth or miscarriage	Average age of husbands at marriage
English	41.0	41.1	39.0	22.5	24.0	25.8
Irish	31.7	32.1	28.8	21.4	21.0	25.7
West Indian	30.8	30.1	34.7	24.5	20.0	26.1
Indian/Pakistani	30.4	30.6	22.5	17.5*	20.1	23.7

* Four of the mothers in the Indian/Pakistani group were child brides, 1 at age 7, 3 at age 11.

NOTE:

All the immigrant women in the sample are under age 50 except 11.6% of the Irish, 1.8% of the West Indian and 2.9% of the Indian/Pakistani group, whereas nearly 30% of the English group are over age 50.

age, as in Table 3, the differences between the groups are revealed more clearly.

From Table 4 the average age of the English women is seen to be ten years greater than that of women in the other groups. This difference is a reflection of the stable and long settlement pattern of the English in the area, many of whom lived and brought up their families there before the war. Immigrants tend always to be the younger, more mobile members of a community.

This, and the differences in pregnancy and marriage patterns, are all apparent from Table 4.

Table 5 clarifies the differences between columns 2 and 3 of Table 4, revealing the never pregnant group to be a combination of young and of older women, some who have not yet begun their families, and others classifiable as infertile. In most of what follows we shall be concerned only with the fertile group.

TABLE 5
WOMEN NEVER PREGNANT, BY AGE AND LENGTH OF MARRIAGE

	Married for less than 5 years				Married for more than 5 years			
	Age now (yrs.)	19	20		47	70		
English	Length of marr.: (yrs. and mths.)	1 ⁰	0 ⁸		23	19	before widowed	
Irish	"	18	21	25 34 39	28	30	35	
West Indian	"	0 ⁸	1 ¹⁰	0 ⁸ 4 ¹¹ 0 ⁸	5 ¹⁰	7 ⁸	15	
Indian/Pakistani	"	24	35	45				
		S*	S*	2 ⁹ †				
		19	26					
		2 ⁰	2 ⁴					

* S: Woman has never married.

† Plus 7 years living with husband before marriage.

TABLE 6
DURATION OF MARRIAGE BEFORE FIRST BIRTH OR MISCARRIAGE

Mothers who conceived their first child after marriage

Duration of marriage (years)

	Mothers conceiving after marriage	Duration of marriage (years)										
		-1	-1½	-2	-2½	-3	-3½	-4	-4½	-5	5+	
English (34)	%	68.0	24.0	20.0	10.0	4.0	2.0	—	—	—	4.0	4.0
Irish (35)	%	57.4	21.3	19.7	8.2	4.9	—	—	—	—	1.6	1.6
West Indian (6)	%	11.4	1.9	3.8	—	—	—	—	1.9	—	—	3.8
Indian/Pakistani (59)	%	88.0	16.4	14.9	11.9	7.5	11.9	3.0	4.5	1.5	3.0	13.4

NOTE: All percentages in Tables 6 and 7 are related to the number of women ever pregnant (see Table 2).

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Table 6 shows the distribution of marriage duration to the birth of the first child, extending the information summarized in the last column of Table 2. Only mothers conceiving after marriage are included in Table 6, those conceiving before marriage appearing in Table 7, but the percentages of the two tables are addi-

to attempt legitimization more frequently than the English. All women in the Indian/Pakistani group who conceived a child before marriage were from the Mixed group, and none of them was herself of Indian or Pakistani birth.

In the first four columns of Table 8 the comparisons between "All women" and "Women ever pregnant" are affected by the different stages reached by family units at the time of sampling: this is most obvious in the Irish group with its larger number of women not yet pregnant. The English group, despite its higher average age, has the smallest family size; allowance for age differentials might have accentuated the differences between the groups, but we discuss later our reasons for preferring direct comparisons. The difference between pregnancies and live-births, chiefly miscarriages but a few stillbirths, is examined more closely in this and subsequent tables.

Among the Irish women in our sample fewer pregnancies result in live births than in any other group, a difference which is more marked when related to mothers, as shown in the last column of Table 8. From Table 9 it is clear that some of the Irish women repeatedly miscarry, and that the total of miscarriages in the Irish group is more than double that in any other group.

TABLE 7
MOTHERS WHO CONCEIVED THEIR FIRST CHILD BEFORE MARRIAGE

Mothers who had their first child:

	Before marriage	Within nine months of marriage
	%	%
English (16)	10.0	22.0
Irish (26)	8.2	34.4
West Indian (47) ..	79.2	9.4
Indian/Pakistani (8)	7.5	4.5

NOTE: All percentages in Tables 6 and 7 are related to the numbers of women ever pregnant (see Table 2). 92% of English mothers have had a child within 3 years of marriage. 96.7% of Irish mothers have had a child within 2½ years of marriage. 94.3% of West Indian mothers have had a child within 1½ years of marriage. Despite earlier age at marriage only 31.3% of Indian/Pakistani mothers (including the Mixed group) have had a child within 1½ years of marriage.

tive throughout a nationality group. It is interesting to note the reversal in the ratio of English to Irish in Table 8: Irish women seem

TABLE 8
SUMMARY OF PREGNANCY EXPERIENCE

	Average no. of PREGNANCIES		Average no. of LIVEBIRTHS		Pregs. resulting in L.B.s	Pregs. not resulting in LIVE BIRTHS*	
	All women	Women ever pregnant	All women	Women ever pregnant		Of all Pregs.	Of all Mothers
English	2.9	3.1	2.5	2.7	87.0	13.0	27.5
Irish	4.0	4.5	3.1	3.5	78.8	21.2	40.0
West Indian ..	3.1	3.3	2.5	2.7	81.1	18.3	28.3
Indian/Pakistani ..	3.7	3.8	3.4	3.5	88.3	11.7	15.4

* This includes miscarriages, stillbirths and three terminated pregnancies.

TABLE 9
NUMBERS OF MISCARRIAGES

	Women ever preg.	MISCARRIAGES PER WOMAN					TOTAL MISC.	MISCARRIAGES AS % OF	
		0	1	2	3	4		*Total pregs.	Total L.B.s
English	50	37	12	—	1	—	15	9.7	11.2
Irish	61	37	11	5	5	3	48	17.6	22.3
West Indian ..	53	39	7	6	—	1	23	13.1	16.2
Indian/Pakistani ..	67	58	6	1	2	—	14	5.5	6.1

* This column differs from the corresponding column in the table above only by the exclusion of stillbirths. These were ten in number, and by nationality groups were respectively: 3, 2, 3, 2. The three terminated pregnancies have been included among the miscarriages.

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TABLE 10
AVERAGE AGE OF WOMEN EVER PREGNANT, AT EACH BIRTH OR MISCARRIAGE

	Order of birth or miscarriage											
	1	2	3	4	5	6	7	8	9	10	11	12
English	24.0	26.0	28.1	29.7	29.9	31.4	32.3	35.0	33	36	39	42
Irish	21.7	23.7	25.2	26.3	27.5	29.4	30.7	31.9	33.3	33.5	32.0	33.7*
West Indian ..	20.3	23.6	26.2	27.0	28.7	29.3	31.2	32.3	30	32	33	43
Indian/Pakistani ..	20.1	21.9	24.0	26.5	27.8	30.8	31.1	36	35	37		

*There were three further birth ranks in the Irish group, with average ages of 36.3, 36.5 and 34. (See NOTE, Table 11).

Table 10 shows the pattern of fertility by age of mother for each nationality group. Throughout this table and the next, ages are given in years and decimals of a year. On average the Indian/Pakistani woman has her family earliest, and the English woman latest. Variations in higher birth ranks are due mainly to the small numbers of families on which the figures are based.

The graph (Figure 1) partially compensates for small numbers and the varying stages of development of individual families by exhibiting the cumulative pattern of fertility by age of woman, for each group. In this way each pregnancy can contribute to the whole picture; each woman is included up to her age at the time of

interview: thereafter both she and her whole family are excluded from the computation. The Indian/Pakistani group shows the steepest rise, followed closely by the Irish, who, in our sample, continue to the highest total number of pregnancies. The English and the West Indian patterns are similar in shape up to age forty-five, though separated by approximately one pregnancy in total number. Comparisons of the upper sections of the curves are unreliable, being subject to relatively large sampling fluctuations because of the diminishing numbers of families contributing information.

Because the English group is older than the others, it is a possible hypothesis that some of the differences in Table 10 are due to a changing pattern of childbearing, both by age and number, observed at different stages of its evolution. For this reason a similar table (Table 11) was compiled for women none of whom was above age twenty-five at the time of sampling.

FIGURE 1
CUMULATIVE FERTILITY BY AGE, OF ALL WOMEN IN SAMPLE
(3-year moving average)

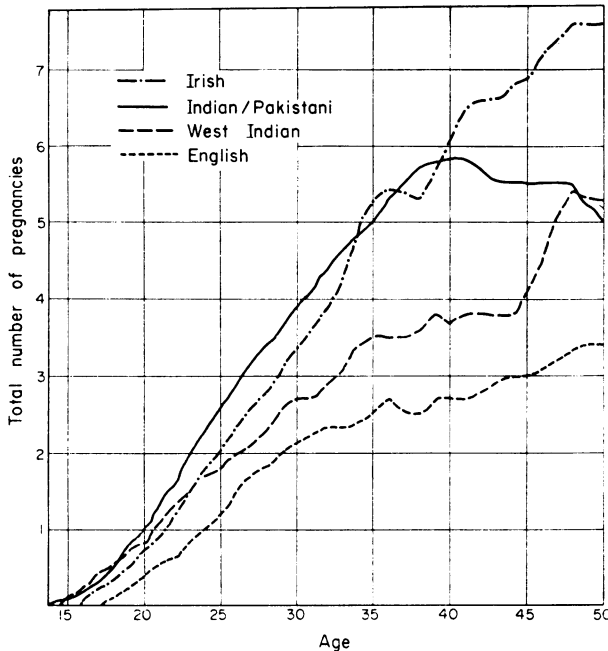


TABLE 11
AVERAGE AGE AT EACH BIRTH OR MISCARRIAGE OF WOMEN NOT MORE THAN AGE 25 AT TIME OF INTERVIEW

	Order of birth or miscarriage							
	1	2	3	4	5	6	7	8
English (9)	20.0	21.0	23.0	23.0				
Irish (24)	19.5	21.1	21.7	22.6	22.0	23	23	24
W.I. (24)	17.8	19.8	22.8	21.0	25			
I./P. (18)	19.8	20.5	22					

NOTE: Figures in brackets refer to the numbers of women ever pregnant, but not more than age 25 at time of interview.

In both Tables 10 and 11, if only one family is represented the figure is in italics.

Any secular changes in reproductive patterns might thereby introduce less distortion. Inspection of this Table seems to justify the hypothesis, certainly in respect of earlier childbearing.

In Table 12 we have examined the ages at death of children up to fifteen by nationality group. Clearly these tables are biased by the

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inclusion of families in all stages of development, and in particular by differences in this respect between the groups, a fact which is demonstrated in the last column of Table 12A. The Indian/Pakistani group which showed a low rate of miscarriage shows here the highest number of children dying. Excluding the deaths of older children (over the age of five) there are still nearly three times the number of deaths in this group compared with the others. On closer examination in Table 12B, it is seen that their deaths are divided almost equally into the three groups of under one month, the remainder of the first year, and the subsequent four years.

DEATHS OF CHILDREN
TABLE 12A
Deaths of children under 15 years of age

	Num-ber	Of total preg-nancies %	Of total L.B.s %	Average year of birth of child
English	12	7.8	9.0	1935
Irish	13	4.8	6.1	1950
West Indian ..	13	7.4	9.2	1948
Indian/Pakistani ..	39	15.2	16.9	1948

TABLE 12B
Children dying by age at death

	Total	< 1 month	< 1† year	< 5† years	< 15† years
English.. ..	12	4	2	3	3
Irish	13	7	4	2	—
West Indian ..	13	5	5	2	1
Indian/Pakistani	33*	11	9	9	4

* This figure excludes 6 cases where age at death was not ascertainable.

† Exclusive of preceding column.

Infant mortality rates, shown in Table 12C, which were obtained by relating the above figures to our totals of livebirths, are not inconsistent with rates recently current in the countries of origin of our immigrant groups, or with those of eleven years earlier in the case of the English

group. The fact that the majority of these infant deaths occurred in the country of origin sup-

TABLE 12C
Infant Deaths (< 1 year)

	Infant mortality rate	Average year of birth of child	Neonatal mortality rate
English.. ..	45	1940	30
Irish	51	1951	33
West Indian ..	70	1951	35
Indian/Pakistani	87	1951	48

ports this comparison. Neonatal mortality rates, calculated in a similar way though with still smaller numbers, are rather less divergent than rates for the whole of the first year of life. This finding, too, is consistent with expectation, because the wider divergence in rates of total infant mortality will be attributable largely to the differential effects, between groups, of malnutrition and infections in the post-neonatal period. It is open to doubt, however, whether the low miscarriage rate we found in the Indian/Pakistani group is a true picture, or whether for some reason it is due to under-representation.

Family Planning Information

Of all the information we obtained, only a proportion of that concerning family planning represented opinion rather than fact. The first three columns of Table 13 are based on this material. The third column refers only to women potentially capable of childbirth. It is interesting to note that the English show here the lowest percentage. We based our assessment of knowledge of family planning on answers to the question "Many people do something to limit the size of their families and to control when their children come. Do you know about family planning?" (cf. Freedman, Whelpton and Campbell, 1959; Rowntree and Pierce, 1961).

TABLE 13
FAMILY PLANNING

	Ideal size of family	Ideal space between children (years)	Not wanting more children* %	Families with knowledge of F.P. %	Users of F.P.† %	Mean no. pregnancies‡ F.P. users	Mean no. pregnancies‡ Non-users	Average age of: F.P. users (years)	Average age of: Non-users§ (years)
English	3.2	2.7	39.2	90.7	63.3	3.2	8.1	37.5	47.6
Irish	4.1	2.7	47.5	92.8	43.8	4.5	4.9	31.0	33.9
West Indian ..	3.2	3.0	56.6	87.5	42.9	2.9	3.6	28.0	32.7
Indian/Pakistani	3.4	2.9	50.8	68.1	70.2	3.6	4.1	30.1	33.0

* % of those mothers under 45 years of age.

† % of those with knowledge of F.P.

‡ Of women ever pregnant.

§ Includes women never pregnant.

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Informants whose answer to this question was affirmative—these we have classified as “Users” in this and subsequent Tables—were asked further questions about their use of methods of contraception (See Appendix). Not unexpectedly the Indian/Pakistani group were least informed about family planning, yet even two out of three seems a remarkably high proportion for a group largely uneducated and coming chiefly from rural areas of India and Pakistan. In fact, they show the highest proportion of users among those who have knowledge of family planning. The last four columns of this table show the smaller family size (though many families may yet be incomplete) and the younger age, of users of family planning in contrast to non-users.

the use of the sheath in the second. All methods which had at any time been used by a family unit are included in this Table, so that the totals of methods used exceed the numbers of users in each group. The number ever making use of the cap, the next most common method, is not representative of its continued use. We found, in fact, that many of those fitted rarely used it again. Half those using the safe period are Irish women: this method is of course permitted by the Roman Catholic Church. Sterilization is officially encouraged in India and Pakistan, and men who already possess three children can receive a small payment for submitting to a minor operation. Of the five sterilizations in Table 14, however, only one was in a male. In

TABLE 14
METHODS

	Husband careful	Safe Period	Sheath	Cap	Pessary	Foam tablet	Breast feeding	Avoiding inter-course	Sterilization	Total No. of methods
English(31)	.. 12	2	10	6	3	—	1	—	1	35
Irish (28)	.. 11	6	7	3	1	—	—	—	1	29
West Indian (22)	.. 4	1	7	5	2	4	1	1		25
Indian/Pakistani (33)	.. 7	3	15	3	3	1	1	2	3	38
TOTAL	.. 34	12	39	16	9	5	3	3	5	127

NOTE:

1. Figures in brackets show number of families practising family planning.

2. Informants were asked also about “the pill”, the douche and the ring. None of these was used at any time by any of the women.

Table 14 shows clearly the popularity of the sheath as a method of contraception and next to it, coitus interruptus. These two together account for more than half of all the methods used. There is an interesting reversal in the use of these methods between the English and Irish groups on one hand, and the West Indian and Indian/Pakistani group on the other: coitus interruptus is more popular in the first case, and

the course of the interviewing considerable interest was shown in the use of oral contraceptives, which would probably become very popular. Many of those who found their present attempts at family limitation unsatisfactory were anxious to find out more about these and other methods of family planning.

We analyse in Table 15 the reasons given by our informants for not using methods of family

TABLE 15
NON-USERS OF FAMILY PLANNING—Reasons

	No knowledge of F.P.	Ignorance of methods	Want more children	Laissez* faire attitude	Against idea of F.P.†	Religious beliefs against F.P.	No Reason
English (22)	.. 4	—	9	6	2	—	1
Irish (41)	.. 4	2	13	5	1	14	2
West Indian (34)	.. 7	4	3	11	5	1	3
Indian/Pakistani (33)	.. 15	1	4	3	1	5	4

* This includes informants who said they had never really thought about it; who had never needed or cared to plan their families; and those who believed in natural spacing.

† This includes informants who were against the idea of family planning on aesthetic grounds, or because they considered its practice unhealthy.

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planning. We have included in the first column of this Table, for the sake of completeness, those without knowledge of family planning. Of the whole sample, one English informant and three Indian/Pakistani informants were not asked the questions on family planning, because in none of these cases was the woman herself or her husband interviewed. (See p. 10). Apart from those, chiefly Irish, whose religious beliefs were opposed to family planning, it is interesting that the commonest reason given by both European groups was the desire to have more children.

No evidence of procured illegal abortion was obtained from the informants in our sample. Three pregnancies (one English, one Irish and one West Indian) were terminated, however, for medical reasons (See Table 8). All data included in the Tables relate of course to the condition of the informants at the time of interview. This applies in particular to descriptions such as "Women ever pregnant", or "Women ever marrying", because our inquiry represents a snapshot picture of what is essentially a dynamic process.

Conclusions

Even in the preliminary analysis presented here, the results of this survey show differences between the nationality groups in respect of fertility, and important differences in the reproductive experience of women from different culture groups. Some of these differences may, it is true, be artefacts due to the differential effects of secular changes in the pattern of child-bearing or marriage. We know such changes are taking place to-day in our own country, and it would not be unreasonable to expect that settlement in a foreign country could affect even well-established patterns of reproduction. Our data cannot decide the matter, but appear to support the view that both effects are present, and that secular change has not yet suppressed cultural or national differences.

Our attention in this paper has been focused upon the fertility experience of immigrants in comparison with each other, and with the indigenous population of the same area. We have not yet been able to obtain in full the detailed analyses of the Census particulars by enumeration district, and to relate them to our

findings, though this will soon be possible. In addition to the data relating to the Census, our questionnaire includes sections of economic, educational, and sociological relevance, little of which has yet been analyzed. Some of this information may serve to elucidate certain aspects of the differences in fertility.

It is no unusual finding, particularly in a survey which breaks much new ground, that in attempting to obtain answers to certain questions a host of further problems is uncovered. This has been true in the present investigation. In many sections, we have had to make inferences which are tentative because the evidence, while strongly indicative, will not support the full weight of argument. Often the standard methods of fertility analysis have seemed inadequate to comprehend the complexities confronting us in this inquiry, particularly when attempting to compare patterns of fertility among people from widely different cultures. Moreover, geographical separation of husband and wife has often interrupted the immigrant's reproductive lifetime; some of their children have been born at home, some here, in a very different environment, both culturally and materially, and we have felt a need for indices or methods better adapted to such circumstances.

From the outset, however, this inquiry was designed as a pilot investigation, to blaze the trail for one on a larger scale. It is in the sphere of methodology therefore that we should look for its chief contribution. The outline has now been sketched and much of the general shape of the picture is now clear. For finer detail, particularly at points which the present Inquiry has shown to be of importance, a large-scale investigation must be undertaken. But the present Inquiry has served a useful and a valuable purpose as a forerunner.

It has shown first that such a survey is possible and presents no intractable features. It has shown that a questionnaire if it is carefully thought out and well designed can be used to elicit information on matters of an intimate kind, of a kind indeed often regarded as taboo, and that with perhaps minor reservations only, it can be applied with equal facility and efficacy to a variety of nationality groups. Integral to the questionnaire of course, and of central

importance, is the structure of the interview and the personality of the interviewer. The interviewer must be of a patently sympathetic nature, and must establish a relationship of frankness, confidence and trust. Once achieved, the barriers are down, and taboo is no longer taboo (Norris, 1955). The subject of the latter part of the interview, present so often in the forefront of the mind of the harassed housewife and mother, is itself then an aid rather than a hindrance. Together with the information, hesitantly sought but readily proffered, on methods of family planning, it often led to an almost cathartic outpouring.

One of the important consequences of this investigation has been to reveal the demand, and the need, for a family planning service in this district. There is every reason to hope that in the near future a clinic will in fact be set up, in the centre of the area which has been the subject of this survey. It is unlikely that Sparkbrook is exceptional in this respect, so that we may infer that the need exists in many similar areas of immigrant settlement. Our experience suggests that given suitable initial publicity family planning centres set up in such areas would be readily accepted and well patronized.

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APPENDIX

The following questions, taken from the questionnaire, show the form in which information on family planning was obtained. In compiling this section we drew freely upon the fertility studies of Freedman, Whelpton, and Campbell (1959) and Rowntree and Pierce (1961).

Ideal No. of children/family.

How many more children would you like?

Ideal interval between the births of children.

Many people do something to limit the size of their families and to control when their children come.

Do you know about family planning?

Of all the ways to prevent a child, which do you think is the best?

Doctors and public health workers are interested in knowing what method of birth control people are using over the country as a whole. Can you tell me if you yourself or your husband/wife has ever used any of these?

If none used, why not?

If used, between which children?

If a family planning clinic were opened in Sparkbrook, would you go?

Informants were shown, or were read, the following list of different family planning methods to enable them to answer questions on the "best method" and "method used".

1. Husband is careful; withdrawal; coitus interruptus.
2. Safe Period; rhythm method.
3. Protective rubber sheath; Durex, condoms.
4. Cap or diaphragm.
5. Jellies and creams; vaginal suppositories; Volpar paste.
6. Foam tablets.
7. Douche.
8. Continued breast feeding to avoid another pregnancy.
9. Avoiding intercourse for six months or more although living together.
10. The pill; oral contraception.
11. The ring.
12. Sterilization.