Chapter – IV
EXPECTATION OF LIFE

4.1 INTRODUCTION

In the previous two chapters we find that the domination of male members, by and large, in a masculine productive system and above all the basic weakness of women folk in less developed countries as a result of multifarious forms of discrimination are few of the main reasons hindering the aim of the social engineers to install the balanced and proportional employment of women in productive activities. To take up the last point first, it has been the experience of investigators that the poorer the economy the greater is the discrimination against the women. The persistence of discrimination makes the victim weak in respect of both physical and mental powers. This gets confirmed if we compare the expectation of life of men and women at different ages.

In 1974, the first International Conference on population was held in Bucharest. In the conference the developed West held the view that population growth was the cause of poor economic development among the underdeveloped and developing countries of Asia and Africa. [106]

In developing countries this rapid population growth is naturally associated with tragic toll of maternal mortality. The highest number of maternal deaths occurs in Asia, about a third of million women each year, with South Asia the worst affected. According to World Health Organisation (WHO), 28% of worlds' births and 46% of its maternal deaths occur in India, Bangladesh and Pakistan. In Africa about 1,50,000 women die each year. In Sub-Saharen Countries, mortality rates are highest. In industrial world, maternal deaths are rare at present. In most poor countries, pregnancy complications are the largest single cause of death among women in their reproductive years. Nearly half a million maternal deaths occur each year in

developing countries. Too often, the miracle of life becomes a night mare of death. [226 (1995) p. 36]

4.2 BASE AREA STUDIED

Area studied for the empirical studies for this chapter covered the six hundred rural households residing in twelve villages in the district of Koch-Bihar. Six villages are studied from Koch-Bihar Block – I and another six villages from Koch-Bihar Block II. In Block I, we studied the villages naming G, H, I, J, K, L from the Gram Panchayats numbered 2, 5, 7, 9, 12, 13 respectively. In Block – II the studied villages are A, B, C, D, E, F from the Gram Panchayats numbered 7, 5, 10, 11, 9, 6 respectively (Map No. 2). In those villages we collected detailed household and individual information on socio-economic and demographic data such as age, sex, religion, ethnic groups, income, sex of the head of the family and pattern of land holding etc. We talked with married and widowed women. For married women we mean whose husbands are alive. For every married and widowed women we enquired about her level of education, total number of births given, number of children survived, number of children died with age at death, cause of death etc. We collected these details for the year 1994-95. For each village we computed Male expectation of life (Y_M), Female expectation of life (Y_F) and total expectation of life (Y_T) at birth and as well as at every ages.

Now let us take up the cases of each studied village in respect of health care services available under different Gram Panchayat areas (Map no. 3).

1. Village – I, Block – I

It is a remote village in Koch-Bihar Block I. It is a Muslim dominated village. Above fifty percent of the households studied are Muslims. The village is 18.50 K.M. away from the district town of Koch-Bihar and 6 K.M. away from the Suktabari Gram Panchayat Office located on the State

Highway from Koch-Bihar to Siliguri. No health care service is available within the village. Even for first aid one has to go 6 K.M. at Suktabari market place. Distance of the village from the Subdivisional Hospital is 18.50 K.M. So far as the communication is concerned only Van Rickshaw is available to come to Suktabari market from the village. The village is connected by a Kancha Rasta to the main road. Van Rickshaw is a two-wheeled carriage drawn by one man.

2. Village J, Block I

The village is only 6 K.M. away from the district town Koch-Bihar. It is connected by a long mettaled bridge over the river Torsa. Block Medical Office and Hospital (BMOH) is 8 K.M. away at Dewanhat. BMOH has ten beds for patients to be treated. The Subdivisional Hospital is only 6 K.M. away from the village. Primary health care services are locally available. There is a Public Health Sub-Centre found in the village.

3. Village K, Block I

The village is 9 K.M. from the district town Koch-Bihar. The village has no medical facility available to its inhabitants. But the Block Medical Office and Hospital is 5 K.M. away at Dewanhat and the Subdivisional Hospital is 9 K.M. away at Koch-Bihar.

4. Village G, Block I

The village is a remote one. It is connected by a semi-metalled road to Nishiganj Bandar. Rickshaw van is the popular conveyance. The village has no health care centre. The Subdivisional Hospital is 17 K.M. away from the village at Mathabhanga. District Hospital at Koch-Bihar is nearly 28 K.M. away from the village.

5. Village H, Block I

It is a remote village dominated by the Muslims. There is a Primary Health Centre at Chilkirhat where patients are treated at out-door. The Subdivisional Hospital is 17 K.M. away at Koch-Bihar from the village.

6. Village L, Block I

Village L is a somewhat developed village. It is only 8 K.M. away from the district town. It is well connected by a metalled road with the district town. The village as such has no health care facility available to the villagers but they can easily avail the facilities of medical services from the district town Koch-Bihar.

7. Village E, Block II

The village chosen is 5 K.M. to the north of the district town of Koch-Bihar. The village is well connected by metalled road with the district town. The Subdivisional Hospital is only 5 K.M. away from the village.

8. Village F, Block II

The village is 7 K.M. away from the district town. The village is situated by the side of the main road. The Subdivisional Hospital is 7 K.M. away from the village.

9. Village B, Block II

The village chosen is 16 K.M. away from the district town. The village is connected by Kancha Rasta to the nearest Bandar Pundibari. Pundibari is 4 K.M. away from the village. For health care services the villagers come to

Block Medical Office and Hospital at Pundibari. The Subdivisional Hospital is 16 K.M. away from the village. Van rickshaw is a popular vehicle for the villagers. Buses under North Bengal State Transport Corporation ply only once in a day from the district town to the village and back.

10. Village D, Block II

The village is nearly 11 K.M. away from the district town. It is under Baneswar Gram Panchayat. The village is situated at a distance of 1 K.M. from the main road. So far as the Women's Health is concerned there is one Maternity Home (MH) and one Child Welfare Centre (CWC) situated at Baneswar. There is a Primary Health Centre found at Baneswar near to the village. But the Subdivisional Hospital is 11 K.M. away from the village. The village is connected by a Kancha Rasta to the main road. The mode of communication is either three wheeler rickshaw or two wheeler van-rickshaw from the village to the main road.

11. Village C, Block II

The village is comparatively well developed. Though it is nearly 26 K.M. away from the district town of Koch-Bihar, but on the other side it is only 6 K.M. away from the sub divisional town and hospital of Alipurduar. Alipurduar is a sub-divisional town under Jalpaiguri district. So the village can avail the health care services when necessary. There is a Primary Health Centre found near to the village.

12. Village A, Block II

It is another prospective village. Its distance from Koch-Bihar district town is nearly 27 K.M. But its distance from Alipurduar is only 5 K.M. The village is situated just by the side of the main road from Koch-Bihar to

Alipurduar. So the villagers can avail all the health care and other facilities from Alipurduar sub-divisional town at ease. There is a dispensary found in the village.

4.3 DEMOGRAPHY OF DEATH

The emphasis given to women's health till now remains limited. If we consider the health of female girls and elderly women we get a grim picture to concern about.

Table 4.3.1

Sex-wise Distribution of Population Twelve Villages
Koch-Bihar
(1994-1995)

Age-Group	Population (1994-95)			Sex Ratio
	Male	Female	Total	
0 – 5	196	169	365	.862
5 - 15	214	188	402	.879
15 - 30	658	530	1188	.805
30 - 45	451	350	801	.776
45 - 60	345	249	594	.722
Above 60	131	113	244	.863
Total	1995	1599	3594	.801

4.3.2

Sex-Wise Distribution of Death Twelve Villages
Koch-Bihar
(1994-95)

Age Interval	No. of Deaths			Age Specific Death Rate (ASDR)		
	Male	Female	Total	Male	Female	Total
0 - 5	77	119	196	392.86	704.14	536.99
5 – 15	35	57	92	163.55	303.19	228.86
15 – 30	23	45	68	34.95	84.90	57.24
30 – 45	26	38	64	57.65	108.57	79.90
45 – 60	39	41	80	113.04	164.66	134.68
Above 60	62	70	132	473.28	619.47	175.85
Total	262	370	632	131.33	231.39	176.85

From the table 4.3.2 we gather an idea of sex-wise distribution of deaths. A fool proof ratio of deaths may not be possible for a population of a age-group. But in age-group of (0 – 5) a rough ratio of death is found to be much higher for females than for males. A perusal of age-specific death rates also reflects on the dismal fact of much higher death rate among girls in younger ages mostly within five years of age.

4.4 EXPECTATION OF LIFE

A life table is a particular conventional method of presenting the most fundamental and essential facts about the age distribution of mortality. It is defined to be the instrument of measuring the probabilities of life and death.

There is no doubt that age specific death rates for a given community give a fair picture of the mortality experience of the community during a given period but the life table which is constructed on, the basis of the age specific death rates performs the same task in an explicit manner.

Life table is used for measuring population growth, for future population projection i.e. estimating size and age composition of population in future. This is also used for comparing mortality situation of two countries. The expectation of life at birth plays a vital role as it gives the average longevity of a person. A fair idea of relative mortality, situations of two or more countries may be had from the expectation of life at birth.

If we compare the expectation of life of men and women at different ages in the rural areas of Koch-Bihar, we find that expectation of life at birth is lower for females than for males at every age. Our search for factors obviously tells us for stressing gender discrimination in the grass roots of the rural Koch-Bihar. This is a veritable proof that women in poorer societies like ours are not able to live as properly as their male counterparts. They are the first and foremost victims of poverty, exploitation, gender discrimination or inequality and so on. The growing gaps in expectation of life and mortality between men and women are the direct and immediate outcome of growing gaps between men and women in sex ratio, literacy, education, training for employment, declining rate of participation in productive activities and growing disparity in access to health care and medical services.

A conference on "Women's Health" was held in 1978 at Alma Ata. "Health For All (HFA) was the goal set by many countries in the world. India was one of the participants in the conference and signed in favour of the goal. So India as a partner of the declaration started with some programmes to achieve the goal. Primarily the goal for HFA was set by 2001 A.D. But later on because of certain missing parts in the planning and implementation of the programmes as well as the policies, the goal has been pushed ahead by 10 years to 2011 A.D. However, the areas of concern to ensure achievement of

HFA include health, education, nutrition and food supply, water and sanitation besides maternal and child health care. It is assured that all individuals have equal access to those services overlooking the social reality of gender bias which operate against women.

4.5 SOME POINTS ABOUT METHODOLOGY

Methodology adopted in calculating expectation of life proceeds step by step.

The life table is a life history of a hypothetical group or cohort of people, as it is diminished by deaths. The record begins at the birth of each member and continues until all have died. Some simple assumptions are made at the outset :

a) The cohort is closed against migration in or out.

b) People die at each age according to a schedule that is fixed in advance and does not change.

c) The cohort originates from some standard number of births like 1,000, 10,000 or 1, 00,000 called the radix of the life table.

At each age deaths are evenly distributed between one birthday and the next i.e. half the deaths expected between age 9 and age 10 occur by the time everyone reached age 9 and ½ years. The cohort normally contains members of only one sex. It is also possible to construct a life table for both sexes together.

In computation we take eight steps shown in the following structure of our life table :

4.5.1

Life Table Structure

Age Group (x)	q_x	p_x	d_x	l_x	L_x	T_x	e_x
0 – 1							
1 – 2							
2 - 3							
3 - 4							
4 - 5							
5 – 6 and so on							

Every value in the life table refers to some particular age. A person reaches exact age x when he reaches his xth birthday. For a year afterwards, he remains in the interval x to x+1 until he reaches the next birth day, when x+1 becomes his exact age. During this interval, x is not his exact age; he is x plus some fraction of a year of age.

Some life table terms refer to exact age (l_X, e_X, T_X); others refer to the interval X to X+1 (q_X , p_X , L_X, d_X). The term q_X , for example, means the probability of dying between exact age X and exact age X+1. Another subscript, placed before the terms, states the length of the interval if it is more than one year e.g., ${}_5q_X$ means the probability of dying between exact age X and exact age X+5. So ${}_nq_X$ means the probability of dying between exact age X and exact age X+n.

In column 3, p_X means surviving rates.

$$p_X = 1 - q_X$$

d_X reveals the number of deaths at each age in the life table cohort $d_X = l_X.q_X$, ano-

ther formula for $d_X = l_X - l_{X+1}$

l_X is the number of survivors by age X. l_X is the radix of the life table. This column shows the number of persons living at age X in which the initial

figure will be those of new born babies who will begin the first year of their life together.

L_X shows the average number of years survived between age X and X+1. It is a method of approximation. In general L_X is calculated as $\frac{1}{2}(l_X + l_{X+1})$. Its chief advantage is simplicity when age interval is 1 year. But the following is often good approximation of L_X under five years of age when mortality rate change rapidly.

When age interval is 1 year, L_X is calculated on the following technique :

$$\begin{aligned} L_0 &= .3l_0 + .7l_1 \\ L_1 &= .4l_1 + .6l_2 \\ L_2 &= .5l_2 + .5l_3 \\ L_3 &= .6l_3 + .4l_4 \\ L_4 &= .7l_4 + .3l_5. \end{aligned}$$

When age interval is greater than 1, suppose n, then we use the following technique ${}_nL_x = \frac{n}{2}(l_X + l_{X+1})$ where n = age interval.

T_x shows the total number of years lived by the cohort from age X = 0 onwards, until all have died and hence these are obtained by cumulating the values given in for L_X from the bottom upward.

e_X in the last column of life table gives the expected average life span of the population of X years of age.

$$e_X = \frac{T_X}{l_X}$$

It is, however, clear that q_X or the mortality rate is the basic in a life table on the basis of which the values of other variables can be computed [13].

4.6 EMPIRICAL RESULTS :

In this section we present twelve tables for twelve villages showing the male expectation of life (Y_M), female expectation of life (Y_F) and one table for total picture of twelve villages showing the male expectation of life (Y_M), female expectation of life (Y_F) and Total Expectation of Life (Y_T).

Table – 4.6.1

Expectation of Life
Twelve Villages
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life (Y_M)	Female Expectation of life (Y_F)	Total Expectation (Y_T)
0	62.28	46.42	55.19
1	65.09	53.11	60.17
2	66.00	53.92	61.05
3	65.95	58.14	62.80
4	64.95	58.53	64.45
5 - 7	64.41	61.65	63.58
7 - 11	64.40	60.15	62.63
11 – 13	60.40	56.93	58.93
13 – 15	58.40	55.62	57.23
15 – 19	56.65	54.10	55.58
19 – 25	52.84	50.92	52.02
25 – 30	46.84	45.25	46.15
30 - 35	41.84	40.47	41.22
35 - 40	37.11	35.66	36.45
40 – 45	32.10	30.80	31.52
45 – 50	27.10	26.50	26.80
50 – 55	22.10	21.67	21.87
55 – 60	17.85	17.38	17.64
60 – 65	13.01	12.87	12.94
65 – 70	8.87	8.35	8.67
Above - 70	4.72	4.65	4.70

Table – 4.6.2

Expectation of Life,
Village G, Block I
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life (Y_M)	Female Expectation of life (Y_F)
0	59.96	28.20
1	61.44	44.05
2	67.22	43.05
3	66.22	46.78
4	65.22	45.78
5 - 7	64.22	56.04
7 - 11	66.74	54.04
11 – 13	62.74	52.21
13 – 15	60.74	55.90
15 – 19	58.78	53.90
19 – 25	54.74	49.90
25 – 30	48.74	43.90
30 - 35	43.74	38.90
35 - 40	38.74	33.90
40 – 45	33.74	28.90
45 – 50	28.74	23.90
50 – 55	23.74	19.90
55 – 60	18.74	17.25
60 – 65	13.74	10.75
65 – 70	9.50	8.25
Above - 70	4.50	4.00

Table – 4.6.3

Expectation of Life
Village H, Block I
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life (Y_M)	Female Expectation of life (Y_F)
0	68.01	59.26
1	67.01	60.25
2	66.01	61.25
3	65.01	61.80
4	64.01	60.00
5 - 7	63.01	61.70
7 - 11	61.01	59.00
11 – 13	57.01	55.75
13 – 15	55.01	49.35
15 – 19	53.01	51.60
19 – 25	52.66	48.50
25 – 30	46.66	42.66
30 - 35	41.66	38.50
35 - 40	36.66	33.45
40 – 45	31.66	28.50
45 – 50	26.66	22.55
50 – 55	21.66	19.30
55 – 60	16.66	15.70
60 – 65	11.66	10.55
65 – 70	8.95	8.00
Above - 70	4.66	4.00

Table – 4.6.4

Expectation of Life
Village I, Block I,
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life(Y_M)	Female Expectation of life (Y_F)
0	51.90	27.64
1	63.80	30.85
2	69.85	33.23
3	68.85	35.87
4	67.85	43.68
5 - 7	66.85	53.43
7 - 11	64.85	51.44
11 – 13	60.85	52.93
13 – 15	58.85	50.93
15 – 19	56.85	48.93
19 – 25	52.85	47.40
25 – 30	46.85	42.70
30 - 35	41.85	37.70
35 - 40	36.85	34.59
40 – 45	31.85	29.55
45 – 50	26.85	27.56
50 – 55	21.85	22.56
55 – 60	16.85	18.40
60 – 65	11.85	13.40
65 – 70	6.85	8.50
Above - 70	4.75	4.87

Table – 4.6.5

Expectation of Life
Village J, Block I,
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life(Y_M)	Female Expectation of life (Y_F)
0	60.69	59.88
1	66.18	58.88
2	69.88	57.88
3	68.88	56.88
4	67.88	55.88
5 - 7	66.88	54.88
7 - 11	64.88	52.88
11 – 13	60.88	48.89
13 – 15	58.88	46.88
15 – 19	58.34	56.11
19 – 25	54.34	52.11
25 – 30	48.34	46.11
30 - 35	43.34	41.11
35 - 40	38.34	36.11
40 – 45	33.34	32.09
45 – 50	28.38	27.09
50 – 55	23.34	22.09
55 – 60	18.34	17.09
60 – 65	13.34	12.09
65 – 70	8.34	9.50
Above - 70	4.79	4.50

Table – 4.6.6
Expectation of life
Village – K, Block I,
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life (Y_M)	Female Expectation of life (Y_F)
0	62.57	53.61
1	61.57	58.54
2	64.93	57.54
3	63.93	58.70
4	62.93	59.55
5 - 7	62.56	55.73
7 - 11	60.56	52.45
11 – 13	56.56	50.50
13 – 15	54.56	48.55
15 – 19	52.56	45.33
19 – 25	48.56	41.75
25 – 30	42.56	40.80
30 - 35	37.56	35.25
35 - 40	32.56	28.50
40 – 45	27.56	21.55
45 – 50	22.56	17.86
50 – 55	17.56	12.70
55 – 60	16.37	12.85
60 – 65	12.87	7.55
65 – 70	9.02	6.75
Above - 70	4.75	3.00

Table – 4.6.7

Expectation of life
Village - L, Block I,
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life (Y_M)	Female Expectation of life (Y_F)
0	65.36	56.36
1	67.16	58.16
2	68.15	59.15
3	62.45	57.73
4	64.55	59.50
5 - 7	64.02	60.55
7 - 11	66.52	58.25
11 – 13	62.52	59.55
13 – 15	60.52	59.00
15 – 19	58.52	57.00
19 – 25	54.52	53.00
25 – 30	48.52	47.00
30 - 35	43.52	42.00
35 - 40	38.52	37.00
40 – 45	33.52	27.00
45 – 50	28.52	22.00
50 – 55	23.52	17.00
55 – 60	18.52	15.00
60 – 65	13.52	12.00
65 – 70	9.83	9.00
Above - 70	4.83	4.50

Table – 4.6.8

Expectation of life
Village - A, Block II,
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life (Y_M)	Female Expectation of life (Y_F)
0	61.88	51.26
1	67.72	54.70
2	66.78	53.70
3	65.73	62.00
4	64.73	61.55
5 - 7	63.72	59.25
7 - 11	61.72	57.55
11 – 13	57.72	52.63
13 – 15	55.72	49.80
15 – 19	53.72	48.20
19 – 25	49.72	43.65
25 – 30	43.72	37.80
30 - 35	38.72	33.55
35 - 40	34.72	34.00
40 – 45	29.72	29.00
45 – 50	24.72	24.00
50 – 55	19.72	19.00
55 – 60	18.40	14.99
60 – 65	13.40	9.99
65+ – 70	9.00	7.55
Above - 70	5.00	5.00

Table – 4.6.9

Expectation of life
Village - B, Block II,
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life(Y_M)	Female Expectation of life (Y_F)
0	56.07	46.11
1	59.05	56.57
2	58.05	57.22
3	57.05	53.55
4	56.05	54.25
5 - 7	55.05	49.50
7 - 11	66.57	53.75
11 – 13	62.57	58.99
13 – 15	60.57	56.99
15 – 19	58.57	54.99
19 – 25	54,57	53.78
25 – 30	48.57	47.78
30 - 35	43.57	42.78
35 - 40	38.57	37.78
40 – 45	33.57	32.78
45 – 50	28.57	27.78
50 – 55	23.57	22.78
55 – 60	18.57	17.78
60 – 65	13.57	13.23
65 – 70	9.02	8.80
Above - 70	4.75	4.50

Table – 4.6.10
Expectation of life
Village - C, Block II,
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life(Y_M)	Female Expectation of life (Y_F)
0	87.73	59.25
1	86.73	64.85
2	85.73	63.85
3	84.73	62.85
4	83.73	61.85
5 - 7	82.73	60.85
7 - 11	80.73	58.85
11 – 13	76.73	56.85
13 – 15	74.73	54.85
15 – 19	72.73	52.50
19 – 25	68.73	54.50
25 – 30	62.73	48.50
30 - 35	57.73	43.50
35 - 40	52.73	38.50
40 – 45	47.73	33.50
45 – 50	42.73	28.50
50 – 55	18.86	17.45
55 – 60	13.86	9.70
60 – 65	9.85	6.55
65 – 70	9.75	7.70
Above - 70	4.75	3.55

Table – 4.6.11

Expectation of Life
Village D, Block II,
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life(Y_M)	Female Expectation of life (Y_F)
0	58.96	38.06
1	64.48	41.26
2	63.48	50.47
3	66.98	49.47
4	65.98	48.47
5 - 7	64.98	59.42
7 - 11	66.35	57.42
11 – 13	62.35	53.42
13 – 15	60.35	51.42
15 – 19	58.35	49.42
19 – 25	54.35	45.42
25 – 30	48.35	39.42
30 - 35	43.35	36.88
35 - 40	38.35	31.88
40 – 45	33.35	26.88
45 – 50	28.35	27.35
50 – 55	23.35	22.35
55 – 60	18.35	19.27
60 – 65	13.35	14.27
65 – 70	8.80	9.27
Above - 70	4.50	4.74

Table – 4.6.12
Expectation of Life
Village E, Block II,
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life(Y_M)	Female Expectation of life (Y_F)
0	62.56	60.99
1	68.48	66.73
2	67.48	65.73
3	66.48	64.73
4	65.48	63.73
5 - 7	64.48	62.73
7 - 11	62.48	60.73
11 – 13	58.48	56.73
13 – 15	56.48	54.73
15 – 19	54.48	52.73
19 – 25	50.47	48.73
25 – 30	44.47	42.73
30 - 35	39.48	37.73
35 - 40	35.53	32.73
40 – 45	30.56	27.73
45 – 50	25.56	25.26
50 – 55	20.56	20.26
55 – 60	20.08	15.26
60 – 65	15.08	11.40
65 – 70	10.90	6.40
Above - 70	8.10	4.00

Table – 4.6.13

Expectation of Life
Village - F, Block II,
KOCH-BIHAR
(1994-95)

Age Group	Male Expectation of life (Y_M)	Female Expectation of life (Y_F)
0	57.46	53.55
1	62.82	56.70
2	61.82	54.56
3	67.63	52.50
4	66.63	50.95
5 - 7	65.63	52.50
7 - 11	63.63	60.50
11 – 13	59.63	56.50
13 – 15	57.63	50.67
15 – 19	55.63	52.67
19 – 25	51.63	50.55
25 – 30	45.63	43.78
30 - 35	40.63	37.55
35 - 40	35.63	34.59
40 – 45	30.63	28.55
45 – 50	25.63	23.67
50 – 55	20.63	13.50
55 – 60	17.36	9.80
60 – 65	12.36	7.50
65 – 70	9.83	7.75
Above - 70	4.83	4.00

4.7 SUMMARY OF THE TABLES TOGETHER

From the above tables we find that female child mortality is much higher compared to that of male child in the age group (0 – 5) (table 4.3.2). We also find that at every age group female expectation of life is much below than that of males.

4.8 CONCLUSION

Thus, what we seem to find in this chapter is that there is some gender bias in the grass-root rural Koch-Bihar in respect of quality of life offered. Female expectation of life (Y_F) at each age is much below than that of male expectation of life (Y_M). The results of this exercise should, however, be treated carefully. We also find that female child mortality is much high in the age group (0 – 5) compared to that of male child of the same age group (table 4.3.2).

We have no proof of infanticide anywhere in any of the villages. General and relative poverty of families cause relatively better nutrition and better expenses on health care for boys.