

Reliable demographic and socio-economic estimates are almost non-existent for Bangladesh and West Bengal for the pre-Partition period, that is prior to the 1950s. As a result, academics thus far have explained the demographic transition in these two territories in light of the population rates and trends pertaining to the last fifty years of the twentieth century. This paper argues that this is a rather myopic approach and that analysis of the historical demography of Bangladesh and West Bengal is integral in understanding the contemporary population dynamics. In particular, the significant improvements in mortality following the 1918-19 influenza pandemic; the 1943-44 famine in Bengal; and the 1947 Partition of India, to a large extent, have shaped the present demography of the region.

The district-level data in the decennial censuses and the annual public health reports for undivided, pre-Partition Bengal were used for calculating demographic and socio-economic rates for what is Bangladesh and West Bengal today (Tables 1-5).

Figure 1, comparing the birth rates, suggests that the higher rate of birth observed in Bangladesh today in relation to West Bengal has been the ongoing trend since the beginning of the twentieth century. This may be explained by the relatively greater presence of Hindus in West Bengal, who are known to have lower fertility than Muslims, as well as higher levels of urbanization and education there (Tables 3 and 4).

Table 1 reveals that the rate of growth of population was relatively faster in West Bengal from 1921 onwards. Table 2 explains why this was the case, namely, that West Bengal made significant gains in mortality from the 1920s onwards (see also Figure 2). These gains are explained by public health interventions, among other things, which became more widespread following the passing of the Government of India Act of 1919 that gave provinces greater autonomy to design and implement medical and public health policies.

Malaria was perhaps the most important cause of death in British India; the disease happened to be endemic in western Bengal. This explains why the death rate was generally higher in West Bengal than in East until the 1920s (Figure 2). Public health measures like clearing of swamps and free distribution of quinine contributed to improving malaria mortality in West Bengal from the 1920s onwards when the overall death rate improved dramatically (Table 5).

In summary, the main argument of this study is that fertility decline started earlier in West Bengal than in Bangladesh because the former made earlier and greater gains in mortality than the latter. Unlike the existing studies on Bengal which argue that mortality only started declining in the region since the late 1940s, this paper establishes that it has been declining since the beginning of the twentieth century only to be interrupted by the 1918-19 influenza epidemic and the series of crisis during the 1940s.

Figure 1

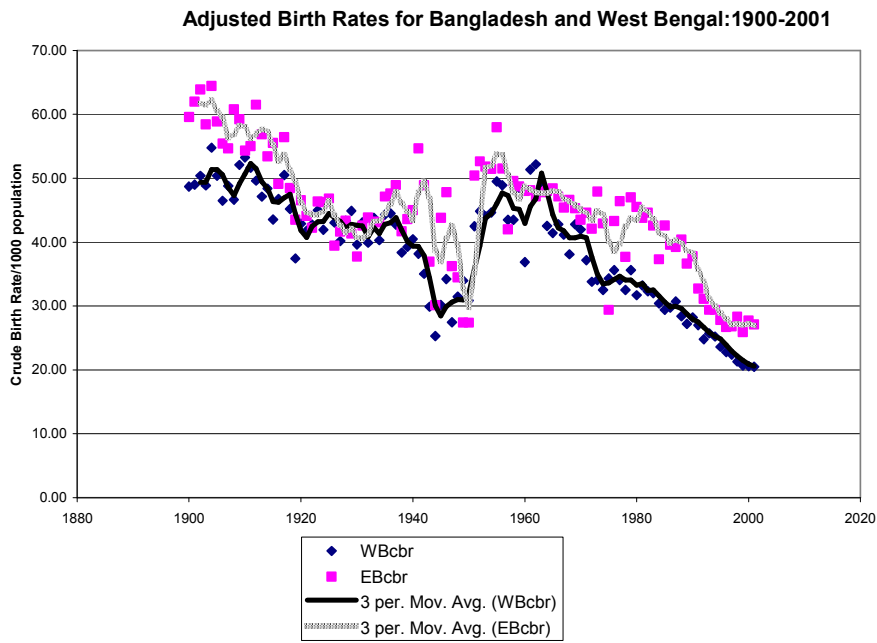


Figure 2

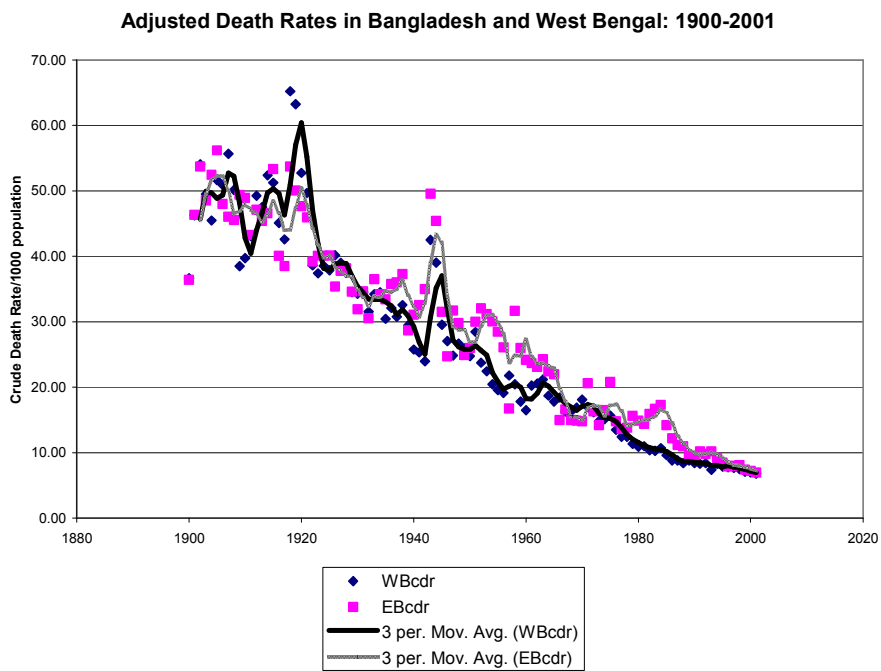


Table 1: Selected Population Statistics of pre-Partition West Bengal and Bangladesh

Year	Population		Annual Growth (%)		Percentage increase (%)		Population Sex Ratio (f/m)		Population Density (sq miles)	
	WB	EB	WB	EB	WB	EB	WB	EB	WB	EB
1891	14050828	23150967							500	574
1901	15222385	24678870	0.80	0.69	8.34	6.60	952	909	542	612
1911	16135390	26813744	0.58	0.82	6.0	8.65	917	961	574	665
1921	15732706	28046514	-0.25	0.45	-2.48	4.58	819	952	560	696
1931	16965527	29825801	0.75	0.61	7.84	6.34	840	971	604	740
1941	21033010	35166323	2.14	1.65	23.97	17.91	847	729	749	873
1951	24139150*	37217854*	1.37	0.57	14.7	5.81				

Notes: All the rates and estimates, including size of population presented were calculated based on the author's territorial definition of pre-partition East and West Bengal. Bengal Presidency constituted a total land area of 70,873 square miles (1911 census) out of which West Bengal was defined by the author to have an area of 28,082 and East Bengal an area of 40,292 square miles. WB and EB are abbreviations for West and East Bengal.

*The 1951 population estimates presented for both regions are consistent with the geographical and population boundaries used to calculate those for the preceding decades.

Source: Census reports of Bengal – 1891, 1901, 1911, 1921, 1931 and 1941; Census report of Pakistan, 1951; Census report of West Bengal and Sikkim, 1951.

Table 2: Estimates of Intercensal Growth Rates and Crude Rates of Natural Increase: 1900-1950

Decade	10-year CBR		10-year CDR		CRNI		I. Growth rate		Net Migration	
	WB	EB	WB	EB	WB	EB	WB	EB	WB	EB
1901-10	50.0	59.2	48.1	49.4	0.19	0.98	0.58	0.82	0.39	-0.16
1911-20	46.1	52.5	51.1	46.5	-0.50	0.60	-0.25	0.45	0.25	0.07
1921-30	42.9	42.9	38.9	38.3	0.40	0.46	0.75	0.61	0.35	0.15
1931-40	41.7	45.1	31.6	34.1	1.01	1.10	2.14	1.65	1.13	0.55
1941-50	31.8	32.6*	29.1	38.8	0.27	-0.62	1.37	0.57	1.1	-0.05

Notes: The registered 10-year Crude Birth Rates (CBR) and Crude Death Rates (CDR) were adjusted using the correction factors 1.49 and 1.55 for West Bengal and Bangladesh, respectively. These correction factors for West Bengal and Bangladesh are the averages of the estimates obtained using the Growth Balance Method and the Reverse Survival Technique (details in Chapter 2). The Crude Rate of Natural Increase (CRNI) is the difference between the 10-year CBR and the 10-year CDR. The figures have been expressed in percentage terms in order to make them more comparable to the intercensal growth rates.

*The Public Health Reports did not publish registration data for East Bengal after 1945.

Source: Calculated by the author using relevant census and registration data

Table 3: Age-specific Fertility Indicators

	General Fertility Rate (GFR)		Child Woman Ratio (CWR)	
	West Bengal	East Bengal	West Bengal	East Bengal
1901	167.64	222.16	0.648	0.791
1911	142.63	177.59	0.630	0.750
1921	133.79	140.90	0.501	0.685
1931	141.99	132.48	0.654	0.782
1941	105.22	123.91	0.518	0.591

Notes:

GFR was calculated by dividing the total births registered during the three years around the census year, by the female census population aged 15-40.

Child/Woman ratio was defined to be the percentage of population aged under five by the female population aged 15-39. The consistent exclusion of the age group 40-45 in the denominator should not make any considerable difference in the rates.

Table 4: Urban/Rural Residence in West and East Bengal – 1901-1941

	Urban Population		Decadal Urban Growth (%)		(% of Urban Population	
	West Bengal	East Bengal	West Bengal	East Bengal	West Bengal	East Bengal
1901	1974946	556093			12.97	2.25
1911	2257856	630060	14.32	13.30	14.04	2.35
1921	2414220	707832	6.93	12.34	15.34	2.48
1931	3071172	965660	27.21	36.42	17.80	3.22
1941	4565580	1248413	48.70	28.87	21.71	3.55

Notes: Figures were calculated for West and East Bengal using census data for undivided Bengal.

Table 5: Registered Cause-specific Mortality in West and East Bengal (Deaths per thousand population)

Year	Cholera		Fever		Respiratory Diseases		Other		Total	
	West	East	West	East	West	East	West	East	West	East
1901	2.23	2.37	24.25	25.42	NA	NA	8.55	3.08	35.03	30.87
1911	1.80	1.49	22.43	21.80	0.47	0.09	4.70	7.79	29.40	25.68
1921	1.26	1.53	25.03	25.39	1.96	0.29	7.63	2.74	35.41	29.95
1931	0.74	1.11	15.70	17.11	2.37	0.93	4.34	3.58	23.15	22.73
1941	0.56	0.71	13.53	15.31	3.00	1.58	1.75	3.88	18.82	21.48

- Notes:*
1. All figures refer to three-year averages and thus 1901 relates to 1900-02, with the exception of 1941, which relates to 1938-40.
 2. The 'Total' column is the sum of the four other columns – cholera, fever, respiratory diseases and 'other'.
 3. NA – not available
 4. All rates were calculated for West Bengal and Bangladesh separately using registration data in the Sanitary Commissioners' reports for undivided Bengal.
 5. Malaria deaths were recorded under fever deaths.