

# A Probability Model for Measuring Fecundability of Migrant and Non-Migrant Couples

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**Abstract** In this paper, an attempt has been made to develop a new probability model for measuring fecundability under some assumptions. This model has been applied in measuring the fecundability of migrant and non-migrant couples of western Uttar Pradesh which is untouched so far. Parameters of the model have been estimated by the method of moments. The level of fecundability of migrant couple has been found to be larger than non-migrant couple of the region. We have tried to find some possible explanation for this difference.

**Keywords** Contraception, Fecundability, Migrant, Married, Ovulation etc

## 1. Introduction

Fecundability is a biological capacity to bear a conception and defined as the probability of conception during a lunar month by a biologically fit couple having unprotected cohabitation provided the female has not conceived in the immediate previous cycle ([7], [16]). Fecundability is different from the fecundity in the sense that latter refers to the natural capacity to produce offspring. Only the human fecundability is studied in demography, which depends on several behavioural and biological traits of a female. The importance of the fecundability study lies in the fact that it is one of the most prominent determinants of fertility rates. Since, there exists an inverse relationship between the mean fecundability and mean waiting time to conception, fecundability influences the completed fertility of a female through its relation to mean time to conception in a heterogeneous population ([19]). Therefore, the fecundability can be considered as playing the same role in fertility studies as Mendellian transition theory in population genetics.

In practice, fecundability is estimated for those females, who have a regular ovulation pattern. Non-ovulating, sterile, pregnant or postpartum females are automatically excluded from the study. Fecundability includes all form of conception, without giving regard to the outcome. It is composed of two components (a) recognizable fecundability (b) effective fecundability. Effective fecundability refers to only those conceptions which results in a live birth ([4], [9]).

All throughout this study, fecundability stands for the effective fecundability.

During the past few decades five different methods have been developed to estimate the fecundability of a population ([4]) which are as follows:

- (i). Estimating the proportion of women conceiving during a one month period ([2], [3], [7], [9], [15]).
- (ii). Calculating fecundability from coital frequency and the duration of viability of sperm and ovum ([8], [14], [24]).
- (iii). By fitting models to the distribution of waiting time to conception ([10], [11], [18], [19]).
- (iv). Fitting models to birth interval distribution ([6], [23]).
- (v). Fitting models to the distribution of number of births within a specific period of time by a group of females ([5], [12], [21], [22]).

The number of births by a female during a specified period has motivated the demographers to study and develop the model which can successfully explain the event during the last four decades. But in all these models, researchers have assumed parameter homogeneous over time and due to this fact these models can be applied on the number of births for the shorter duration of time. But due to increasing age at marriage and continued reducing total fertility rate (TFR), such models have gained importance in recent past. Historically, the estimates of mean fecundability have been very inconsistent, varying from 0.05 to almost 1 ([4]). This wide variation in the estimates of fecundability might be attributed to the difference in conception rates of different population due to geographical, behavioural, economic and cultural reasons.

The main objective of this paper is to develop a new method of estimating the mean fecundability and then to compare the mean fecundability of migrant and non-migrant

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**Table 3.** Distribution of observed and expected frequencies for migrant couples

X	Observed freq.	Expected freq.
0	74	74
1	57	56
2	24	26
3	8	8
4	3	2
Total	166	166
		$\alpha=0.921798, a=122.519, b=3996.38, t=31$
		Chi-square=0.67, p-value=0.41

$$M_1=0.85, M_2=1.64, M_3=3.96$$

**Table 4.** Distribution of observed and expected frequencies for combined (migrant and non-migrant) couples

X	Observed freq.	Expected freq.
0	228	227
1	164	165
2	72	73
3	20	22
4	8	5
Total	492	492
		$\alpha=0.916578, a=227.85, b=9486.45, t=37.86315789$
		Chi-square=2.01, p-value=0.16

$$M_1=0.814, M_2=1.54, M_3=3.642276$$

**Table 5.** Comparison of mean fecundability

Type of couple	Mean fecundability
Non-migrant	0.79
Migrant	0.85
Combined	0.81

## 5. Discussion and Conclusions

The observed and expected frequencies are shown in table 2, 3 and 4. It is evident from the p-value that the proposed new model fits the data satisfactorily. The estimates of proportion of couples falling in the second group are 0.9313, 0.9218 and 0.9165 for non-migrant, migrant and combined couples respectively, which indicates that about 7, and 8 percentages females are either sterile or use some form of contraception. Table 5 displays the fecundability estimates of different kind of couples of the region under study. We can observe a clear difference between the fecundability of migrated and non-migrated couple. Migrated couple have the higher fecundability than their non-migrant counterparts, indicating the higher fertility in former. Naturally, when the husband is away from home for some time, then they ought to have high coition rate after meeting. While, in case of non-migrated couple coition rate is comparatively lower due to prevalence of many customs, taboos and festivals in this part of the region during early few

years of marriage. Our findings are in agreement with the previous results ([25]). The proposed model is plagued by the limitation that it does not take into account the foetal wastage, intrauterine mortality and female foeticide. By considering these facts with suitable data, this model can further be extended to have a more in depth study of the fertility performance of the region. Still the present model is useful from the application point of view that it can be utilized at different age group to compare the fertility performance of females in different age segments. This study can be quite informative for the policy maker and health workers working in the family planning programme, as the study gives them a clear insight of high fertility group of the region and they can frame their policy accordingly. All these calculations were done with the help of R-3.2.2 version (R-Core team) on a Window 10 platform.

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