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DURGA PRASAD KHATIWADA: CONSEQUENCES OF CHILD MORTALITY ON SUBSEQUENT FERTILITY IN NEPAL. THESIS ADVISORS: YOTHIN SAWANGDEE, Ph.D. VARACHAI THONGTHAI, Ph.D. 62 P. ISBN 974-662-973-5

The main objective of this study was to examine the relationship between child mortality and subsequent fertility in Nepal. The study utilized secondary data from Nepal Family Health Survey (NFHS) 1996. The NFHS 1996 included 4417 live births that occurred during the three years preceding the survey from 8082 nationally representative households. However, this study only analyzed data concerning the 543 children whose mothers subsequently gave birth to additional children. The study analyzed only the replacement effect of child mortality on subsequent fertility. The findings of this study suggest that in Nepal there is an impact of child mortality on subsequent birth interval. The analysis of mean subsequent birth interval suggests that the death of a child has significant impact on subsequent birth interval. The mean of the subsequent birth interval of deceased children was about five months shorter compared to that of surviving children. Furthermore, the first model of regression analysis, which included all children in the model, proved a statistically significant relationship between survival status of child and subsequent birth interval - the subsequent birth interval was observed to be more than five months longer for the children who were surviving compared to the children who had died. Of the total 14 variables, 10 control variables, namely mother's education, residence, religion, age of mother, number of living children, ideal number of sons, ideal number of daughters, birth order, number of deceased sons and number of deceased daughters had statistically significant effect on subsequent birth interval. The second model, which included sex and age of died child, proved that only the age of died child has significant effect on subsequent birth interval. Among the control variables in the second model, only two variables, namely mother's education and mother's age were statistically significant in explaining the length of subsequent birth interval. The study suggests that to reduce the fertility level as targeted by the government, one of the most important means is to enhance child survival or to reduce child mortality. To meet this goal, there is an urgent need to provide comprehensive health services through extended health facilities and compulsory education to general people, especially women. The country can achieve its target of replacement level fertility through lowering infant and child mortality to a great extent.