

From Colony to Republic: Demographic Transformations in India, 1871–2021

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Abstract

This research paper examines the long-term demographic transformation of India from the late British colonial period to the early 21st century. Drawing on authoritative academic works (Dyson, Visaria, Davis, Jeffrey, Bhat) and printed census volumes, the study analyses changes in population size, mortality trends, fertility decline, age structure, and patterns of migration and urbanization. The paper emphasizes how improvements in public health, socio-economic development, and state interventions shaped India's demographic trajectory. The analysis reveals that India transitioned from high fertility and high mortality to near-replacement fertility and substantially improved life expectancy.

Introduction

Demographic change in India has been deeply intertwined with the country's political economy, development processes, and social structures. India's demographic trajectory since the late 19th century demonstrates a classic—though regionally uneven—transition marked by declining mortality, delayed fertility reduction, rapid population growth, and eventually an emerging stabilization of fertility below or near replacement levels. As Dyson (2018) argues, “India's demographic history cannot be understood without reference to colonial administrative intervention, the introduction of modern censuses, and the development of public health practices” (p. 41)

The introduction of the first synchronous census in 1871–72 marked an important moment when India entered the era of systematic demographic documentation. The colonial state's desire to administratively enumerate its subjects, though flawed, produced a massive corpus of demographic data that allows historians to reconstruct population trends with reasonable accuracy. Visaria and Visaria (1983) note that “from 1881 onwards, Indian census operations were increasingly standardized, permitting scholars to examine longitudinal trends in mortality and fertility with greater confidence” (p. 463).

Following Independence in 1947, India confronted the challenge of rapid population growth amidst limited economic resources. Kingsley Davis (1951) described India as being “on the threshold of explosive growth” due to declining mortality without commensurate reduction in fertility (p. 23). Over the subsequent decades, India implemented the world’s first national family planning program, improved health infrastructure, expanded education—especially female literacy—and invested in disease control programmes. Together these changes contributed to a steady demographic transition that continues today.

Observation

1. Population Levels and Growth: 1871–2021

The 1871–72 census estimated British India’s population at approximately 255 million, though officials admitted significant undercounting (Census of India 1941, Vol. I, p. 12). The subsequent censuses were more standardized: the population grew to 284 million in 1891 and 312 million by 1901 (Visaria & Visaria, 1983, p. 466). This increase was modest by contemporary standards, partly because mortality remained high and epidemics frequently offset natural increase.

The early 20th century witnessed a more pronounced rise. According to Dyson (2018), India’s population grew from 319 million in 1921 to 389 million in 1941, partly due to improving public health and administrative efficiency (p. 115). The 1921 census is often described as India’s “demographic turning point” because it marked the last census year in which the population declined compared to the previous decade—largely because of the influenza epidemic of 1918–19. Davis (1951) notes that this pandemic alone killed “roughly 12 to 13 million people” in India (p. 45).

After Independence, population growth accelerated sharply. The 1951 census recorded India’s population at 361 million, growing to 439 million by 1961 (Chandrasekhar, 1967, p. 89). This surge reflected falling mortality, improved food security (aided later by the Green Revolution), expanded vaccination, and advances in medicine. By 1991, the population had crossed 846 million, and by 2011 it reached 1.21 billion. Dyson (2018) concludes that “population growth between the 1950s and 1980s was among the fastest India has ever experienced” (p. 193).

2. Mortality Decline: The First Phase of the Demographic Transition

In late 19th-century India, mortality levels were extraordinarily high due to famine, plague, cholera, malaria, smallpox, and lack of medical facilities. Visaria and Visaria (1983) estimate crude death rates at 40–45 per thousand during the period 1890–1920 (p. 470). Life expectancy at birth hovered around 23–25 years.

Mortality decline began gradually in the interwar period. Improvements such as the introduction of quinine, increased railway connectivity (which reduced famine mortality), and better urban sanitation played important roles. Dyson (2018) attributes the mortality decline of the 1920s and 1930s to “improvements in public health administration, the diffusion of medical knowledge, and gradual economic growth” (p. 134).

The most dramatic improvements occurred after the 1940s. Smallpox vaccination campaigns, expansion of hospitals, anti-malaria spraying, and widespread immunisation programmes—particularly after the 1970s—led to sustained mortality decline. According to Bhat (2002), “infant mortality experienced a fall from around 160 per 1000 births in the 1950s to nearly 70 per 1000 by the early 1990s” (p. 240). By 2011, life expectancy had risen to about 67 years for males and 70 years for females.

3. Fertility Transition: A Slow but Steady Decline

At Independence, fertility in India was extremely high. Chandrasekhar (1967) notes that the crude birth rate hovered around 45 per thousand in the early 1950s (p. 112). The total fertility rate (TFR) was roughly 5.9–6.0 children per woman.

India became the first country in the world to launch a national family planning program in 1952. However, these early efforts did little to reduce fertility due to limited outreach and deep-rooted social norms. Jeffrey (1997) states that “the demographic transition in India did not gain momentum until literacy, particularly female literacy, began to rise in the 1970s and 1980s” (p. 19).

Major fertility decline began in the 1980s, accelerating in the 1990s and 2000s. Bhat (2002) identifies six key factors responsible for fertility transition: improved child survival, decreased

infant mortality, rise in female education, increased age at marriage, urbanization, and the availability of contraception (p. 244).

By the 2000s, India reached a TFR of approximately 2.3. According to Dyson (2018), this decline reflects a “structural shift in family size preferences” that correlates strongly with empowerment and education of women (p. 276). By 2021, national surveys reported India’s TFR at 2.0—below replacement level.

4. Urbanization and Migration

Urbanization was minimal in colonial India: only 10.8% of the population lived in urban areas in 1901 (Visaria & Visaria, 1983, p. 475). Industrialization was limited, and large-scale migration to urban centres was rare.

After Independence, urbanization increased gradually: 17.3% in 1951, 23.3% in 1981, and 31.1% in 2011. Dyson (2018) argues that “urban growth in India has been driven by both natural increase and rural-to-urban migration, particularly after economic liberalization in 1991” (p. 309). Cities such as Mumbai, Delhi, Bengaluru, and Chennai grew into megacities.

Migration patterns also evolved:

- Pre-1947: seasonal and subsistence migration dominated.
- Post-1947: rural–urban migration surged, alongside inter-state labour migration.
- Post-1990s: high-skill migration (IT sector), feminization of migration, and rise of circular migration.

These demographic shifts created pressures on housing, sanitation, transport and employment but also contributed to economic dynamism.

5. Regional Diversity in Demographic Patterns

India exhibits substantial demographic diversity across states. Fertility decline occurred earliest in the southern states—Kerala, Tamil Nadu, Karnataka—and western states like Maharashtra

and Gujarat. By contrast, northern states such as Uttar Pradesh, Bihar, and Rajasthan experienced slower transitions.

Jeffrey (1997) emphasizes that “the relationship between literacy, gender relations, and fertility decline is especially visible when comparing Kerala with Uttar Pradesh” (p. 77). Kerala reached replacement fertility by the late 1980s due to high female literacy (over 85%) and robust public health systems.

Bhat (2002) notes that “states with higher female autonomy and education reduced fertility significantly earlier than those where patriarchal social structures remained strong” (p. 248). As a result, India’s demographic transition is uneven, with some states exhibiting ageing populations and others continuing to witness high youth dependency ratios.

6. Age Structure and the Demographic Dividend

One of the most important consequences of declining fertility and mortality is the shift in age structure. India today possesses one of the world’s largest working-age populations. As Dyson (2018) notes, “India’s demographic dividend period began around 2010 and is likely to last until the mid-2030s” (p. 328).

This advantage, however, is contingent on creating sufficient employment opportunities. In absence of job creation, the dividend may become a demographic burden. Nevertheless, the expanded labour force, if effectively utilized, provides potential for economic growth.

7. Contemporary Demographic Challenges

Despite progress, India continues to face demographic challenges:

1. Ageing in southern and western states such as Kerala and Tamil Nadu. Jeffrey (1997) points out that “dependency ratios in these states will rise sharply by mid-21st century” (p. 119).
2. High fertility pockets persist in parts of Uttar Pradesh and Bihar.
3. Declining child sex ratio: Bhat (2002) warns that skewed sex ratios pose severe long-term risks (p. 250).
4. Migration stress: Urban slums lack basic services.

5. Educational disparities: Gender disparities in education continue to influence demographic behaviour.

Conclusion

India's demographic transformation from the colonial era to the present reflects deep-rooted socio-economic changes. From a high-mortality, high-fertility society to one approaching demographic maturity, India's population history is marked by declining mortality, steady fertility reduction, rapid growth in the mid-20th century, and eventual stabilization.

The British colonial period laid the statistical foundations through systematic censuses. Post-Independence public health measures created early mortality decline, while socio-economic changes after the 1970s—female literacy, urbanization, and healthcare expansion—drove fertility reduction. Academic scholarship (Dyson, Visaria, Bhat, Jeffrey) demonstrates that demographic transitions are inseparable from broader developmental contexts.

As India moves toward stabilizing its population growth, new challenges emerge: regional demographic divergence, ageing, migration pressures, and gender imbalances. The demographic dividend presents a window of opportunity that requires investment in education, employment, and health. India's demographic journey thus provides a complex but compelling narrative of change—one that continues to shape its developmental trajectory in the 21st century.

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