



Women's Reproductive Agency within the Household in Kashmir: A Sociological Study

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Abstract:

The study attempts to explore women's reproductive agency in a patriarchal setting - among married, reproductive age women in Kashmir within the framework of their reproductive rights. Women's agency is acknowledged as a pivotal indicator of their empowerment as it aligns with their self-interest, whether that self-interest is inclusive of the familial setting of the agent. Women's reproductive role is no different in this regard and is an important arena for the exercise of agency, especially in a setting where women's inputs in this regard are devalued, providing a stage for self-assertion, self-determination, and empowerment. As a part of the study of women's experience of their reproductive rights, the researcher attempts to present their experience of reproductive agency to determine their empowerment.

Keywords: *Women, Reproductive agency, Reproductive rights, Experience, Empowerment.*

1. Introduction

Decision-making capacity is identified as an important indicator of empowerment and gender equity. The process of women making decisions is referred to as exercising agency (Sen, 1990; Folbre, 1994; Kabeer 1994, 2000; Agarwal, 1997; Waldrop, 2012). Women's agency is an important constituent of women's empowerment. Women's agency can be said to be operative when it results in a fundamental shift in perceptions, or "inner transformation" so that women are able to define self-interest and choice and consider themselves as not only able but entitled to make choice (Mishra & Tripathi, 2011, p. 59). Sen (1985) defines agency as what a person is free to do and achieve in pursuit of the goals or values (s)he regards important; or the capability to achieve well-being (Sen, 1992; 1993). McDaniel (1996) identifies self-determination as agency. The concept of self-determination pays attention to the context in which women live and emphasizes women's empowerment. It ensures that women do not passively slot into the programs drawn up by outside interests. Self-determination enables women to challenge, change and shape their society in accordance with their needs and in a much more directed fashion. Malhotra, Schuler, and Boender (2002) define women's empowerment as a process of increasing agency over time. Agency is contingent upon choices located within a social-material structure. The act of making choices is a process of decision making wherein the social world/ structure constitute the self-perception of what individuals' value and what choices they recognize as possible. Santos & Alkire (2011) define agency as an individual's ability to act independently and the capability to make choices, even if they are limited by operative social structures.

Hays (1994) suggests that agency is both transformational and reproductive. Batliwala (1994; 2013) writes that transformation is brought about through resisting patriarchal structures, which results in women's empowerment. Negotiation, on the other hand, is analogous to the bargaining power and skills women acquire and exhibit in the process of transformation (Folbre, 1994). Unnithan-Kumar (2004) identifies negotiation and resistance as important constituents of women's reproductive agency. Kandiyoti (1991) provides a precursor to this terminology through her concept of patriarchal bargains: women try to maximize benefits for themselves within an oppressive system and thus select what they find appealing or unappealing. Browner (2000) refers to the negotiation process as the conjugal

dynamic, while maintaining the influence of broader structural and cultural processes. Braunstein (2006, p.74) defines bargaining as contested dominance describing situations where household members interact in a spirit of cooperation and conflict. Malhotra & Schuler (2005) find that women exercise their agency when they feel empowered through access to resources. Chaudhari et al. (2014) find that women's inhabitation within patriarchal societies influences their agency to such an extent that they align their goals within the constraints of family and culture; this can be understood as agency being reproductive.

2. Research Methodology

The researcher has used primary data to collect the information. Exploratory and descriptive research design has been used by the researcher to collect the data. An attempt has been made to explore the social experiences of reproductive-age married women. The universe of the present study comprises of college educated, employed, urban, married reproductive age women in the age group 25-44 years. 300 respondents constitute the sample size taken based on non-probability purposive sampling, also known as judgmental sampling.

3. Objective of the Study

The general objective of the study is to explore women's experience of reproductive rights within the social structure they inhabit. Specifically, their exercise of reproductive agency is explored in this study.

4. Operationalizing Reproductive Agency

Reproductive agency within the household has been assessed by evaluating decision-making in marriage and motherhood. As women navigate these facets of their lives in the household, they make choices and decisions which have a bearing on their reproductive agency.

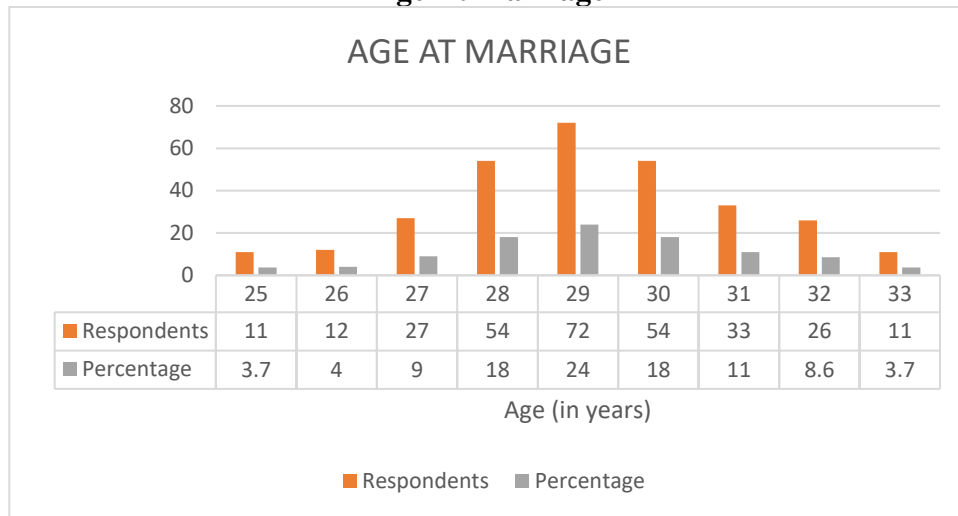
5. Findings

5.1 Age at Marriage

Marriages in India have usually been characterized as early, necessitating a law into effect that sets a particular age for marriage as being legal. Early marriage is also significantly related to a high fertility rate. Women who enter marriage at a young age are less able to assert themselves and make decisions for themselves and their family. They are accorded a lower status insofar as age dictates the hierarchy within family. The later that woman enter marriage, the more they are able to be assertive and participate in family decision-making.

Figure 5.1 depicts the age at marriage for the respondents of the study. The majority of the respondents had been married at the age of 29 years (24 percent). The ages from 28- 30 years of age have been found to be where marriages predominantly happen. Together they make up 60 percent of the sample. This is followed by 11 percent for 31 years of age. The early and later age bracket are almost similar for age at marriage. This finding is in line with earlier research on increasing age at marriage for women in Kashmir. None of the respondents in the study got married later than the age of 33 years. Having a later age at marriage is also an outcome of pursuing education and employment.

Figure 5.1
Age At Marriage

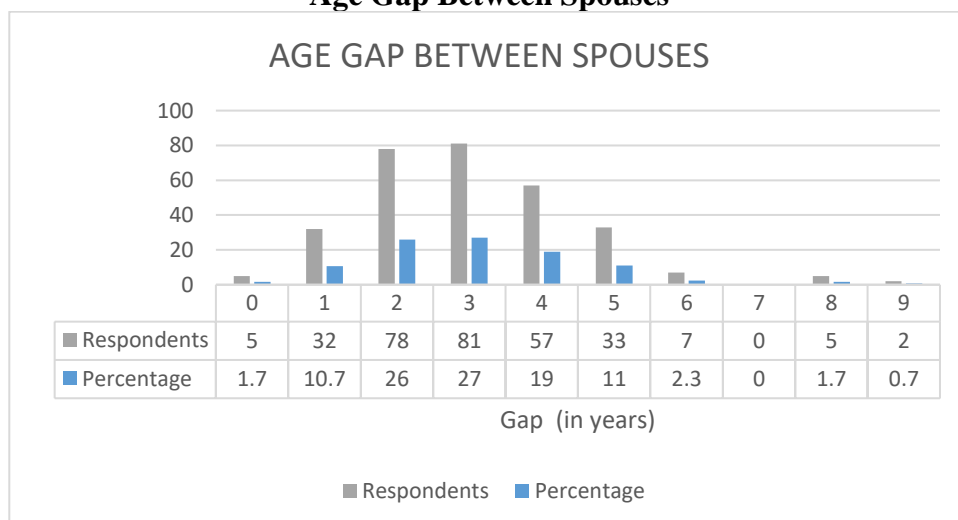


Respondents revealed both voluntary and involuntary reasons for delay in marriage. When a young woman attains maturity, her family is usually under pressure to arrange marriage as soon as possible. However, some young women, especially those with higher levels of education, engage in employment before marriage. Although the reasons for delaying marriage may be various -lack of a suitable spouse, deficient dowry- the fact remains that women have a greater opportunity either to pursue their education or to seek gainful employment if marriage is delayed. Thus, the delay, whether voluntary or involuntary, can lead to some emancipation of women via education or employment; such opportunities may influence further their age at marriage and their attitudes toward matrimony and reproduction. The possibility of a circular and reinforcing mechanism implied in this argument is evident. Thus, apart from the biological impact of increasing age at marriage, there is a behavioural impact of higher age at marriage on women's reproductive preferences. Age at marriage is thought to be a useful indicator of relative status in a household: a younger wife is more vulnerable to the opinions, orders, and sanctions of her husband and in-laws, whereas an older bride is likely to have had more "exposure," more time to formulate opinions and develop an independent personality. She presumably is better able to withstand the pressures from husband and in-laws.

5.2 Age Gap Between Spouses

A measure of spousal age difference is useful to assess relative status of husband and wife. Age hypergamy is another important factor which continues affecting marriage and decision-making. The age gap between the spouses is displayed in Figure 5.2.

Figure 5.2
Age Gap Between Spouses



Majority of the respondents (27 percent) have an age gap of 3 years with the spouse. 26 percent have a gap of 2 years and 19 percent have a gap of 4 years. No respondent has a gap of 7 years. 2 respondents have a gap of 9 years and 5 respondents have a gap of 8 years. 1.7 percent respondents have no age gap with their spouse.

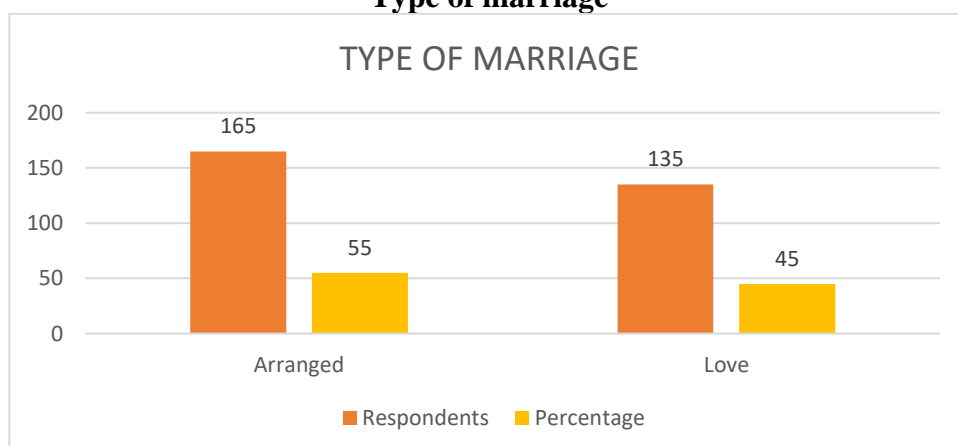
A wider age gap could mean that the husband will be more influential and that the communication between spouses could be more domineering on the part of the husband. A narrower gap means communication is less strained and more in the vein of a dialogue. A wider age gap has been observed as a worldwide cultural norm. Sociological explanations have been given for wider age gap. The theory of capital exchange underlines the asymmetrical assets (or "capital") of men and women: on the marriage market, man's higher social status and income are exchanged against woman's youth and looks. The available men are perceived, classified, and judged based on their social age, which depends less on physical appearance than on social status and autonomy. The preference of younger women for older men is a traditional attitude, corresponding to a sexual division of labour which is also traditional. This preference becomes less clear-cut - although it does not totally disappear- in all situations where women's status is less defined by that of their spouse. Women who extend their studies and get a strong professional grip before getting married often see the couple as two separate individuals and do not expect their partner to provide them with a social identity: moreover, the qualities they appreciate in their spouse are less exclusively work-related. Yet if they choose men who are almost the same age as themselves, this probably does not express a desire for equality, but rather a structural constraint, resulting from their late entry in the marriage market. For women who decide to marry later, the options are less varied from the point of view of age.

5.3 Type of Marriage

In Kashmir, arranged marriages are still the most preferred way to find an eligible partner. In an arranged marriage, parents or heads of the household take the responsibility of finding eligible partners for their children. Typically, marriage in India is contracted by a woman's legal guardian, her consent being inferred rather than formally sought, and forced unions are not regarded as infringements on an individual's right to free choice, or as unethical. Marriage by choice is looked down upon and often invites some manner of social backlash, ranging from becoming the content of gossip to honour killings in extreme cases. The study assesses marriage type as either being based on romantic love or based on traditional arranged pattern.

Figure 5.3 represents the respondent's marriage type. The study finds that arranged marriages are still more prevalent than love marriage among women who are conventionally empowered. Even though the margin of difference is not as stark as expected: 55 percent respondents have had an arranged marriage whereas 45 percent have had a marriage based on romantic love. Respondents revealed that this necessarily does not mean that choice is missing in arranged marriages as the final say lays with them.

Figure 5.3
Type of marriage



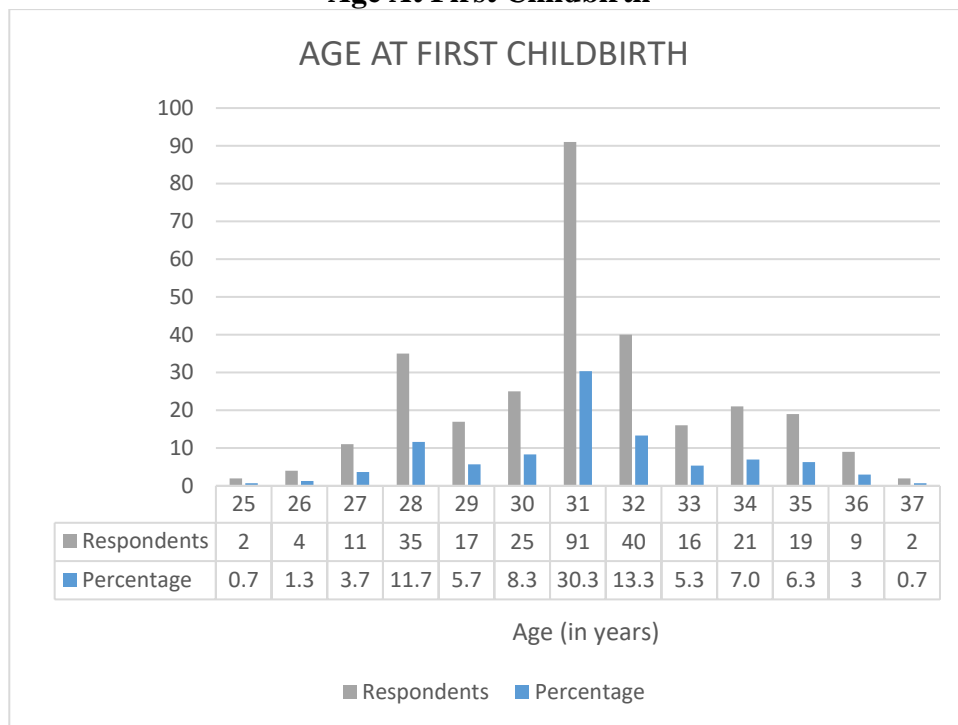
This, interestingly also reflects, increasing acceptance of marriage by choice and based on romantic love when all other considerations are met. Some respondents revealed that getting married to a person of their choice was a struggle and others failed in marrying a spouse of their choice due to reasons of endogamy, sect, class, caste, rural-urban divide, and social status. Greater choice in marriage is linked significantly to egalitarian gender relations and mutual decision-making in matters of reproduction.

5.4 Age at First Childbirth

Social norms and state policies influence the timing of the first birth. Age at first birth is significant in that early childbirth often reflects a lack of decision-making power on part of a woman. Additionally, it means that over the life-course she is more likely to birth many children.

Figure 5.4 reveals a rather intricate image for the age at first childbirth of the respondents in the present study. The ages of 31 years, 32 years and 28 years are found to be wherein socially negotiated fertility mostly occurs. Whether such a trend holds for a larger section of the population, along with possible causality, needs to be explored further which is outside the ambit of this study.

Figure 5.4
Age At First Childbirth



N= 292 (excluding infertile cases) % = 97.3

The study sample reveals that majority (30.3 percent) of the respondents' age at first childbirth is 31 years of age. Drastically, the percentage falls to 13.3 percent for the following age at 32 years of age. After, it follows 28 years of age for 11.7 percent of the respondents. The age at first childbirth is slightly skewed towards the ages 32-37 (35.6 percent) in comparison to the ages 25-30 (31.4 percent).

Societies have normative ideas concerning both when to become a parent and when it is too late, or panic time (social age deadlines) regarding whether childbearing begins too early or too late. However, education and employment (unemployment) are both determinants of age at childbirth. Participation in higher education has a negative effect upon the probability of having a first child early. Additionally, age at marriage is also observed as a determinant in this study.

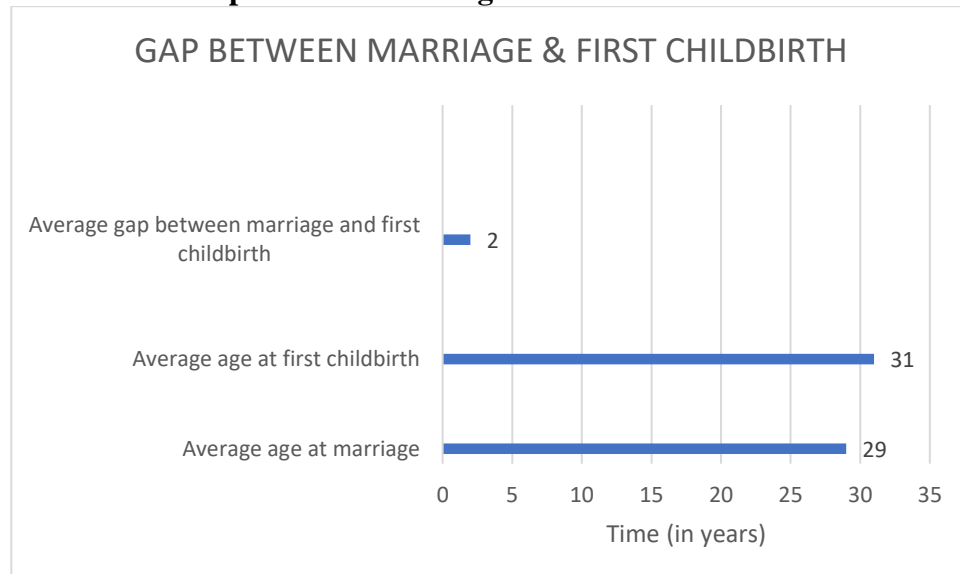
5.5 Gap Between Marriage and First Childbirth

A gap between marriage and first childbirth has been assessed as the difference between average age at marriage and average age at first childbirth. This gap is reflective of reproductive agency. Kashmiri

society is pro-natalist and patriarchal. These types of societies have been shown to pressure newly married women into early conception. Often the pressure to conceive begins with the very first night of the marriage when it is made sure the relationship is consummated. An ability to delay conception or deflect this pressure can be observed from a gap between marriage and first childbirth.

Figure 5.5

Gap Between Marriage and First Childbirth

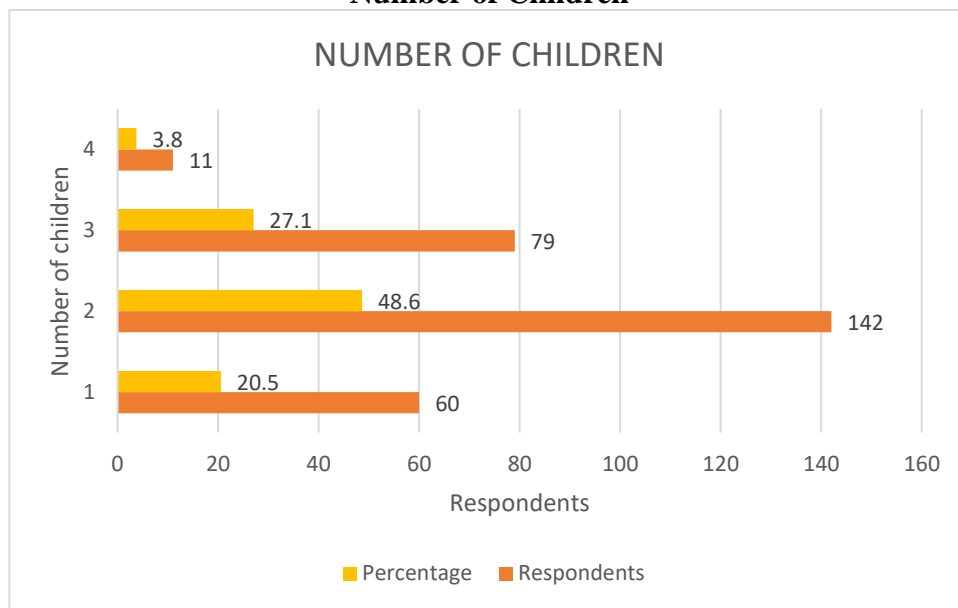


The average gap between marriage and first childbirth observed in the study is 2 years which is a significant time interval reflecting that women are able to deflect pressure to conceive. Delayed conception, on the other hand increases the chances of involuntary childlessness as infertility risk increases. Also, intentions towards childbearing either become obsessive or are marked down as other issues emerge. In the case of this study, these intentions became heightened and were not marked down. Education has been seen across the social sciences as a reason for delayed motherhood as it is viewed as being incompatible with childrearing. A working career is also seen as a reason. The respondents revealed that their own judgement of themselves as ‘capable of mothering’, “being in a place where they could be good mothers” and “emotional and mental state” were reasons for delaying conception. All these judgements can be explained in light of the effects of education. Socialization into the Kashmiri culture ensures that women view themselves as mothers from the go, being feminine is equated with motherhood, so a doubt having crept in has to do with other acquired values.

5.6 Number of Children

An ideal family size has been linked with women’s empowerment world over. In India, the two-child norm idealized having two children in a family unit. Number of children born reflect women’s reproductive agency as they highlight birth intervals and women’s control over their bodies. The total fertility rate (TFR) has witnessed a decline across most Indian states, especially among urban women. In Jammu & Kashmir not only has the fertility rate of rural women declined but also TFR dropped below replacement levels, which could be a cause for worry in the future (NFHS-5). However, there is no clear description of whether it does stem from an improvement in women’s position and advances in women’s empowerment. Theoretically, the two are tied but empirical explanations have not been explored hitherto. As the scope for such exploration is too wide, the present study offers explanations particularly for the population of this study. Figure 5.6 confirms the prevalence of the two-child norm.

Figure 5.6
Number of Children



N= 292 (excluding infertile respondents)

Majority of the respondents (48.6 percent) had borne 2 children, followed by 3 children at 27.1 percent. Respondents with 1 child were found to be 20.5 percent of the sample and 3.8 percent had borne 4 children.

A desire for fewer children is viewed as an indicator for women's empowerment. The respondents revealed most of them had achieved desired family size. Among those with one child, birth expectations for more children were observed. Small number of children were idealized even though children were perceived as a 'gift from god.' High fertility is no longer socially desired, and this may have contributed to a smaller ideal family size. Additionally, higher costs of living, education, and comfortable living along with social costs of time, caregiving, upbringing were observed to be reasons for desiring fewer children. Son preference was observed to be a motivator for birth expectations unrealized. Though most respondents did not lament the absence of a son, they did, however, desire one but they did not want to pursue it to an end where the desire became detrimental to their well-being, implying transitions in the status accorded by birthing a son. Body-image, physical and mental well-being, along with a shift in perceptions regarding the roles, opportunities and futures of children underlined by their gender further motivated the desire for fewer children. Respondents were vocal about how given the same resources and opportunities, girl children are outshining boys in academics and securing lucrative jobs. Also, they mentioned how girls were more inclined to feel responsible for the well-being of their parents in their old age than boys were. This means, a nascent shift in gender ideologies is also responsible for desiring fewer children.

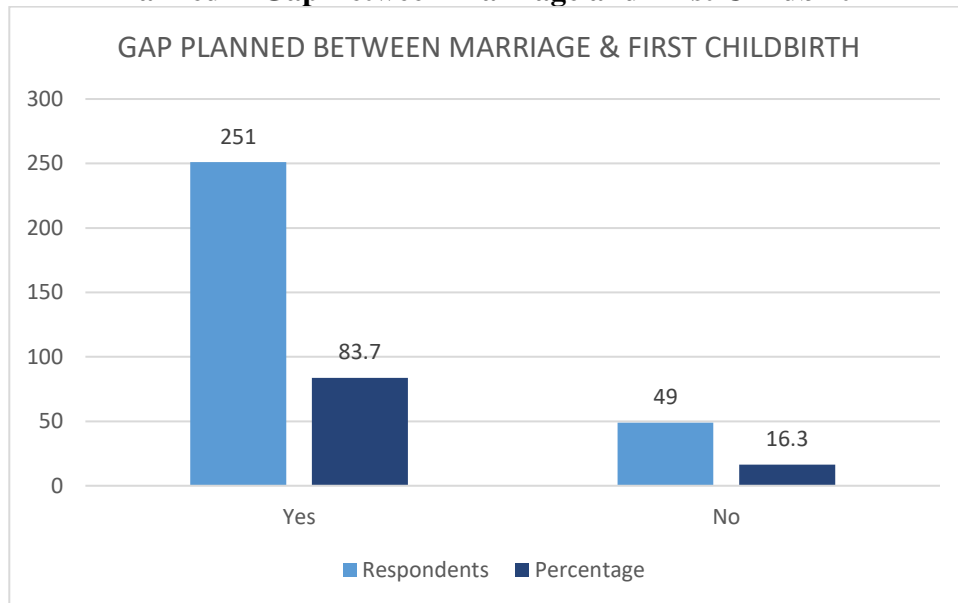
5.7 Planned Gap Between Marriage and First Childbirth

Even though a gap between marriage and first childbirth was determined, respondents were explicitly asked if they planned a gap between their marriage and first childbirth. Entry into motherhood is one of the most important transitions in an individual's life course. More than higher-order births, it brings about substantial lifestyle changes and is irreversible (Hobcraft and Kiernan, 1995). In case of educated and employed women, the maternity penalty- opportunity costs associated with transition to motherhood- have been documented (Tavares, 2016). It has even been contended that "in... modern societies, preferences become a much more important determinant, maybe even the primary determinant, of women's behaviour" (Hakim, 2003, p. 361). As Kashmiri society is marked by an interplay between modernity and traditions, preferences and stakes that differ from socialized attitudes must be either aligned with the norms or creatively negotiated if conflict is to be avoided. The pressure

to conceive immediately after marriage is immense in pronatalist societies like Kashmir. The presence of a gap denotes successful negotiation of the same. Figure 5.7 is quite telling in this regard.

Figure 5.7

Planned A Gap Between Marriage and First Childbirth



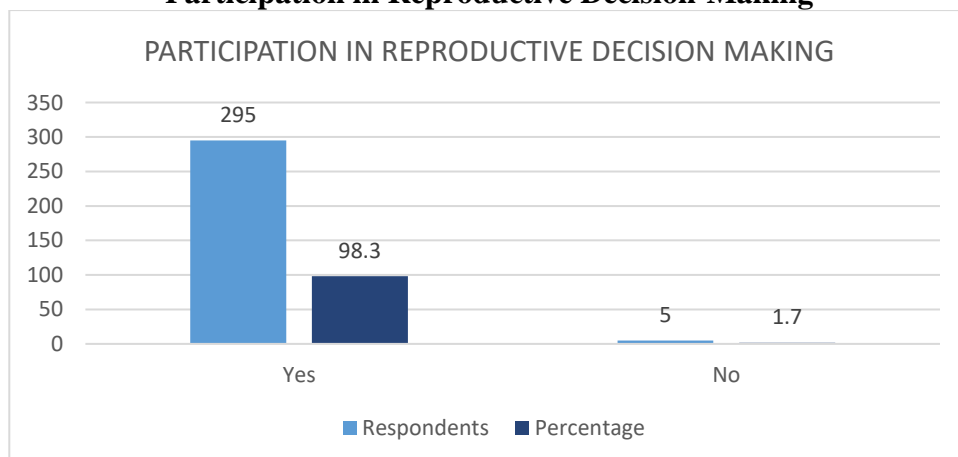
83.7 percent of the respondents revealed that they had made use of family planning as opposed to 16.3 percent of the respondents who revealed that they did not actively plan a gap, even though they may have desired it. In fact, respondents who had fertility issues tried actively to conceive once they realized that something must be off with their bodies. In certain cases, the reality of infertility dawned only after childbirth was desired and contraception use was halted. The overwhelming majority though practiced and planned a gap between marriage and first childbirth.

5.8 Participation in Reproductive Decision-making

Women’s participation in reproductive decision-making is an indicator of their empowerment as they reclaim their bodily integrity, autonomy and ownership over their personhood and corporeality. It is essentially an act of exercising agency. Whereas childbearing in societies with widespread modern contraception is frequently portrayed as the outcome of a rational decision-making process - individuals assess the costs and benefits of childbearing and then decide whether or not, and when, to have a (another) child – this is not always the case as unplanned pregnancies are a reality of those societies. Therefore, it does not help to understand decision-making as a rational decision-making process for this study. Instead, decision-making is explored as strategizing, keeping in consideration, the cultural and social repercussions of choice.

Figure 5.8

Participation in Reproductive Decision-Making



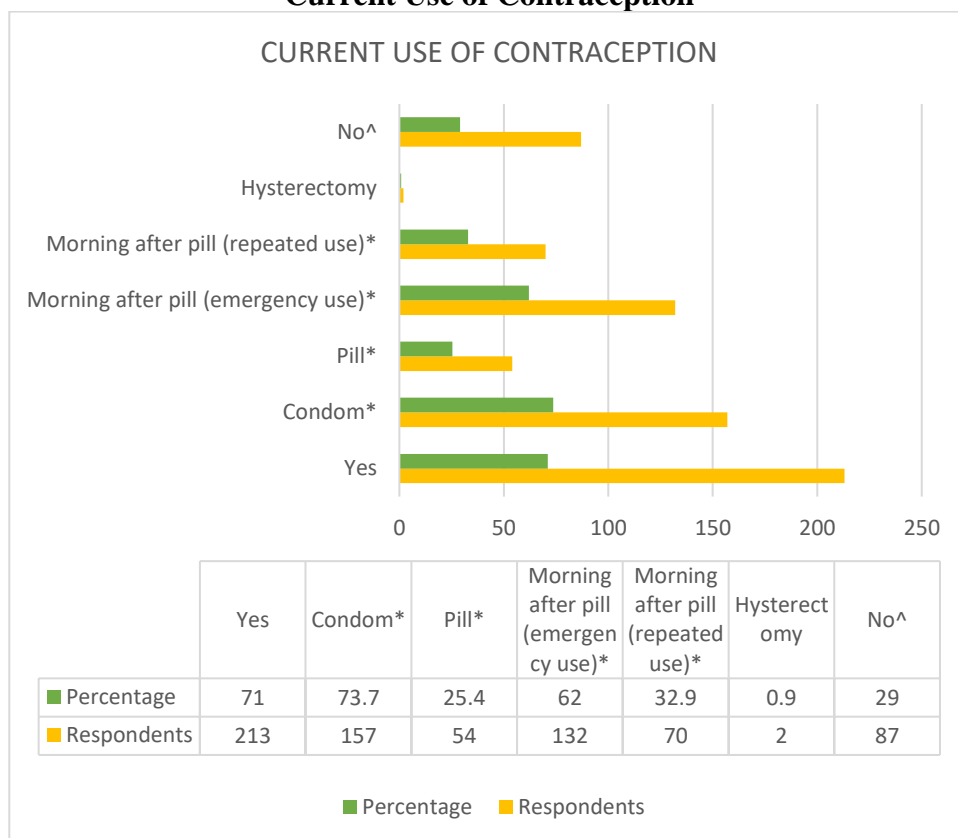
98.3 percent respondents revealed that they participated in reproductive decision-making whereas 1.7 percent of the respondents revealed that they did not participate in reproductive decision-making.

Respondents' greater participation in reproductive decision-making can be interpreted as a social context for gender equality. It entails decisions regarding the timing of childbirth, number of children and spacing. Respondents revealed that couples might disagree about decisions related to pregnancy or contraception but that they engaged in a discussion about it where women were not the silent party whose consent had to be inferred. Future aspirations and apprehensions were discussed and debated by the couples. Respondents felt their inputs and insights were valued and not lost on the partner. Ultimately, decisions were arrived at mutually. This signifies, collective consensus was accorded priority simultaneously maintaining active involvement in all matters related to reproductive decision-making. Strategies were employed to avoid personal suffering.

5.9 Current Use of Contraception

Contraception use is an important indicator of the bargaining power between men and women. Research shows that men generally prefer avoiding contraceptive use, especially when it is intended for their body. Husbands sometimes fear that contraception use diminishes their position as head of the family and undermines their masculinity. Figure 5.9 outlines the respondents' current use of contraception.

Figure 5.9
Current Use of Contraception



^= including infertile respondents *= including multiple responses

The sample reveals that 71 percent of the respondents use contraception whereas 29 percent do not. Of those that use it, the majority use condoms (73.7 percent). The morning after pill is next in usage, both as an emergency contraceptive and for repeated use. 32.9 percent of the respondents use it frequently in place of the Pill, which is used by only 25.4 percent of the respondents. Thus, posing a threat to their health. None used traditional methods citing unreliability. 2 respondents had undergone hysterectomy, though the reasons revealed were not fertility control, but health concerns. The findings reveal that permanent types of contraception are not preferred by the respondents. Further, respondents revealed

covert use of contraceptives too. It can be inferred that woman who have decision-making capability and power are better able to meet their reproductive goals.

Generally, in societies like Kashmir, modern contraception use is viewed as bringing about promiscuity, but it is socially approved within wedlock as a means of limiting fertility. The Islamic tradition is often cited in defence of traditional methods of contraceptive use. Research in contraceptive use in the Kashmir valley has previously found that the practice of contraception is often delinked from religious antecedents. One explanation can be that practical concerns outweigh idealism.

6. Conclusion

The study finds that women in Kashmir exercise their reproductive agency in a culturally specific manner, while utilizing strategies of resistance, negotiation, and alignment. Overt resistance is avoided and undesirable; covert resistance is preferred. In doing so they achieve self-defined empowerment by exercising agency. Entering marriage at a later age and consequently having a later age at first childbirth, along with relatively narrower age gap between spouses enables women to plan childbirth. The study respondents report increased avenues of choice in marriage. They employ family planning practices and use modern contraception to achieve their desire for fewer children. They practice a gap between marriage and first childbirth. The study respondents participate fully in reproductive decision-making. Thus, women in Kashmir exercise reproductive agency within their households to achieve their self-interest and benefit themselves and in doing so empower themselves.

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