

Change Comes Slowly for Women in Rural Bangladesh

Asia-Pacific Population & Policy summarizes research on population and reproductive health for policymakers and others concerned with the Asia-Pacific region.

The Office of Population of the United States Agency for International Development provides support for this publication under a cooperative agreement with the Program on Population of the East-West Center.

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ISSN 0891-6683

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Bangladesh, like other South Asian countries, has been described as a staunchly patriarchal society. In the countryside, men work in the fields and move about freely, while women are often secluded in their homes. Women's direct role in major household decision making also appears to be limited.

Yet societies change. More women are working in Bangladesh's expanding industrial sector, more are using contraceptives, and more girls are attending school. Have these and other changes been accompanied by improvements in the status of women?

Between 1982 and 1989, the Mother and Child Health/Family Planning Extension Project of the International Centre for Diarrhoeal Disease Research, Bangladesh, collected data from 7,433 ever-married women between the ages of 15 and 56. The survey focused on two rural areas that differ in ecological, economic, cultural, and political terms—Sirajgong and Gopalpur subdistricts in north-central Bangladesh and Abhoy-nagar and Fultala subdistricts in the southwest.

Survey results from these two areas provide a unique opportunity to explore the changing status of women in rural Bangladesh. The objective of the study, summarized in this issue of *Asia-Pacific Population & Policy*, was to identify variations in the general pattern of low status for women and to assess the socioeconomic and demographic characteristics associated with women's changing roles.

Work at the East-West Center was supported by the United States Agency for International Development.

INDICATORS OF STATUS

The analysis concentrates on two sets of questions. These form the basis for composite indices that shed light on women's status in the two rural areas. The first questions concern women's physical mobility—their freedom to move outside their homes. The second set of questions concern women's authority in household decision making. Balk (1996) provides a detailed explanation of how the two indices are constructed.

Table 1 shows that most women move freely between households, but they tend to be confined in their movements further afield. Nearly one-fourth seldom or never travel outside their village. When they do leave their village, only a few wear a *burka* (an overgarment that covers the head, arms, and full body to the ankle), but nearly one-half are usually accompanied by a husband or other male relative.

Table 2 suggests that women have little authority in decision making on household expenditures or other family matters, including decisions that concern their own health or the health of their children. Three-fourths of the women surveyed have little or no say in deciding whether to see a doctor when they become ill or whether to buy medicine for a

Table 1 Women's status in two areas of rural Bangladesh: Indicators of physical mobility (percentages)

	Often	Sometimes	Seldom	Never	
How frequently do you travel outside ...					
Your home (<i>bari</i>)?	90	8	1	0	
Your village?	12	66	21	1	
	Never	Sometimes	Always		
When you travel outside your village, do you generally wear a <i>burka</i> ?	84	0	16		
	No one	Children	Female relative	Male relative	Husband
When you travel outside your village, who usually accompanies you?	7	38	8	25	23

sick child. Few have much say on how money is spent. One-third even report that they have little say in allocating the money that they earn themselves.

Each woman was asked about her perceptions of the restrictions placed on her by other members of her household. Only one-half report that they are allowed to leave their homes to visit a family planning clinic. Still smaller proportions feel that they may leave their homes to attend a film or festival (23 percent) or to earn money (17 percent).

Nearly two-thirds report that they may take a sick child to a hospital outside their village "only in an emergency" or "almost never."

Questions also probed women's attitudes toward the situation of women in general. Responses show that many women feel entitled to rights that they do not enjoy. For example, 28 percent feel that women should be allowed to travel outside their villages on their own, but only 7 percent may do so. Sixty-five percent feel that women

should be able to decide whether to see a doctor when they are ill or to buy medicine for a sick child, but only 7 percent actually make these decisions on their own. The majority approve of women working outside their homes, but only 11 percent do so. Nearly all feel that women should be allowed to own property, but almost no women in Bangladesh do.

These findings confirm general observations on women's low status in rural Bangladesh. Any effort to change this pattern might usefully consider the minority who appear to enjoy a higher status than average—those who report particularly high levels of physical mobility and authority in household decision making. The broad data available from the Extension Project make it possible to identify what socioeconomic and demographic characteristics are associated with higher status.

WHAT CHARACTERISTICS AFFECT WOMEN'S STATUS?

The analysis assesses how individual, household, village, and regional characteristics affect women's physical mobility and authority in household decision making. Several individual and household traits are considered, such as a woman's age and education and her family's socioeconomic status. In addition, indices of local practices and attitudes are constructed for each village, based on the responses to selected questions of all the women in the village who were covered by the survey. These indices are used to assess the influence of the local community on the behavior of individuals.

The two contrasting geographic areas covered by the survey provide an opportunity to gauge any regional effects on women's status. Sirajgong and Gopalpur, described as socially conservative, are among the poorer subdistricts of rural

Table 2 Women's status in two areas of rural Bangladesh: Indicators of authority in family decision making (percentages)

Who makes the decision ...	Entirely myself	Primarily myself	Primarily my husband	Entirely my husband	Mostly other family members
To buy medicine for a sick child?	7	22	43	22	7
For me to see a doctor when I am ill?	7	18	40	28	7
On how long a child should attend school?	3	12	49	32	4
On whom a daughter should marry and at what age?	2	11	42	35	9
To spend money that I earned myself?	28	38	23	10	2
To spend money that my husband earned?	1	5	46	42	6

Bangladesh. More than 95 percent of the residents are Muslims. By contrast, Abhoynagar and Fultala are relatively affluent subdistricts, with well-developed communications systems, rural electrification, and nonagricultural economies. About 80 percent of the population is Muslim, and 20 percent is Hindu. Observers have described this region as socially progressive.

Figures 1 and 2 show the cumulative influence of various characteristics on women's physical mobility and authority in household decision making. These effects were estimated using ordinary least squares regression. Unless otherwise noted, the discussion is limited to effects that are significant.

Physical mobility. Age has a strong effect on physical mobility. As expected, a woman's mobility increases as she grows older. The greatest rise occurs as a woman moves from her early to her late 20s and then into her early 30s. The age difference between a woman and her husband has no significant effect on mobility. Women who live in households headed by their in-laws are less mobile than women who live in other types of household. Women whose marriages have dissolved through separation, divorce, or widowhood are slightly more mobile than women who are still married.

Economic characteristics—house size, land holdings, and husband's occupation—are all important determinants of mobility. Taken together, they indicate that women in wealthy households are much less mobile than poor women. This suggests that wealthy households can afford to keep women in seclusion, while poverty forces women to go against the prevailing social norms.

Contrary to expectations, a woman's education also has a strong negative effect on her physical mobility, and her husband's education has an even stron-

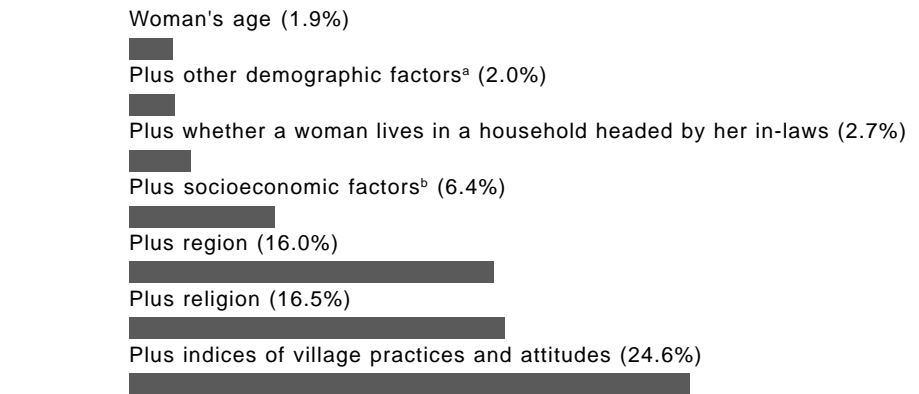


Figure 1 Cumulative contribution of selected predictor variables to explaining variations in women's physical mobility: Total percentage of variance explained

^aIncluding current marital status and age difference between spouses.

^bIncluding size of house and land holdings, woman's education, husband's education, and husband's occupation.

ger negative effect. Rather than changing women's behavior, education—like wealth—appears to support the prevailing social norms. Muslim women have less mobility than Hindu women, but when other factors are taken into account, the independent effect of religion is not significant.

Regional differences have the strongest influence on women's mobility. When the

effect of region is added to the effects of other factors, the amount of variance explained rises from 6.4 to 16.0 percent. Village-level behavior and attitudes also have a strong effect, increasing the amount of variance explained from 16.5 to 24.6 percent despite the fact that regional and village characteristics are highly correlated. Women in the southwest report much more mobility than women in the north-

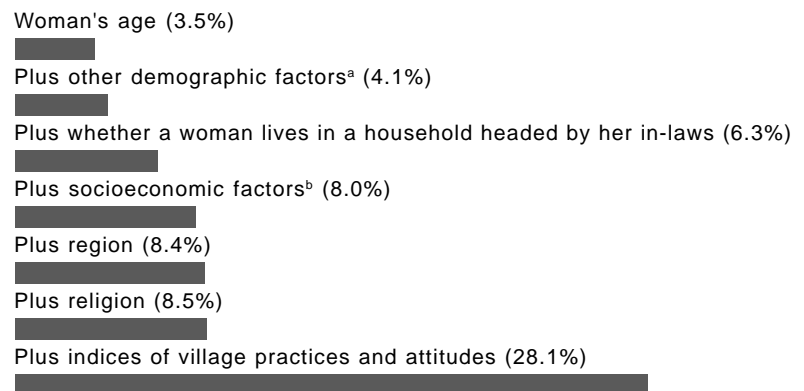


Figure 2 Cumulative contribution of selected predictor variables to explaining variations in women's decision-making authority: Total percentage of variance explained

^aIncluding current marital status and age difference between spouses.

^bIncluding size of house and land holdings, woman's education, husband's education, and husband's occupation.

central region, suggesting that characteristics of the southwestern region—and of its villages—foster women's mobility despite constraints at the household and individual levels. Such characteristics may include the southwestern region's greater economic development, ecological stability, cultural diversity, and social progressiveness.

Authority in household decision making. As women age, their role in household decision making increases and then decreases, peaking in the 30- to 34-year-old age group. The decrease in decision-making authority among older women may not be due to age per se, but rather to the values of an older generation. Women who are much younger than their husbands have more decision-making authority than women who are closer to their husbands in age.

In contrast to the results for physical mobility, more educated women have much greater decision-making authority than women with less education. Husband's education also has a positive effect. Poor women have slightly more authority than wealthy women, and Muslim women have more authority than Hindus, but these effects are small.

As expected, a woman's position within the household has a strong influence on her decision-making authority. Women who live in households headed by their in-laws have much less authority than other women. Divorce, separation, and widowhood do not appear to affect woman's authority.

The attitudes and practices of other women in the village exert an extremely important influence on women's decision-making authority. For this indication of women's status, the influence of the village context tends to reduce significantly the effect of region.

CONCLUSIONS AND POLICY IMPLICATIONS

Several of these results are relevant from a policy perspective. One is the importance of regional and village-level characteristics in determining women's status. Another relevant finding is that the characteristics associated with a woman's freedom of movement—for example, to acquire contraceptives—are not necessarily the same as the characteristics that enhance a woman's decision-making authority within the household. With such complex forces at work, changes in women's status may not necessarily lead to demographic change.

Some of the specific results of this analysis are as expected. Women's mobility and authority tend to increase as they age. Women who live in households headed by their in-laws have less mobility and much less authority than other women.

Other results are surprising. Women who are about the same age as their husbands do not have more status than women who are younger—in fact, they have less authority and the same level of mobility. Women who are separated, divorced, or widowed have about the same status as women who are married. Other factors being equal, Moslem women have about the same status as Hindus.

The effects of wealth and education have interesting policy implications. Women from poor homes have greater physical mobility, almost certainly necessitated by their circumstances, but wealth has little effect on a woman's role in household decision making. Both a woman's and her husband's education tend to increase her decision-making authority but decrease her mobility. These results support other findings suggesting that wealth and education may not necessarily raise women's status in a patriarchal society. They may

even diminish women's status if social norms remain unchanged.

The importance of regional and local communities suggests that policies targeting village-level institutions and influential community members might be an effective avenue for improving the status of women. Another research project at the East-West Center (Mason 1996) compared women's economic power within the family in Pakistan, India, Malaysia, Thailand, and the Philippines. This study also found that regional and community-level factors are important. In these five countries, community factors had a strong and highly significant effect on women's reported levels of domestic decision-making authority in the economic sphere.

Mason's findings and the ones reported here indicate that programs aimed only at individual women—such as providing schooling or jobs—are likely to fall short of their goals in the absence of efforts to change broader institutions and attitudes. Future studies will be useful to help identify key institutions and change mechanisms within communities and households and to determine how these institutions and mechanisms may best be approached to bring about changes in the status of women.

This issue of *Asia-Pacific Population & Policy* is based on:

Deborah Balk. 1996. *Defying gender norms in rural Bangladesh: A social demographic analysis*. East-West Center Working Papers, Population Series, No. 78. Honolulu: East-West Center (to be published in *Population Studies*, 1997, vol. 51, no. 2).

It also draws on conclusions from:

Karen Oppenheim Mason. 1996. *Wives' economic decision-making power in the family in five Asian countries*. East-West Center Working Papers, Population Series, No. 86. Honolulu: East-West Center.