

Women's Empowerment and Reproductive Choices

SYED MUBASHIR ALI, HUSSAIN B. SIYAL, and MEHBOOB SULTAN

INTRODUCTION

The 1994 Cairo International Conference on Population and Development (ICPD) in their Programme of Action calls for promoting gender equality and equity and the empowerment of women. Furthermore, the conference also recognises the basic rights of all couples and individuals to decide freely and responsibly the number, spacing, and timing of their children, as well as the right to the information and the means to do so [Sadik (1994)].

The need for such a programme of action arose in view of the fact that in many countries, including Pakistan, women are generally least empowered and hence they have negligible rights to decide about the number of their children. According to the 1990-91 Pakistan Demographic and Health Survey, over 54 percent women either wanted to stop having children or wanted to wait at least two years before having another child [Ali and Rukanuddin (1992)]. However, in practice, all of these women were not protected; instead, only 12 percent were practising contraception [Shah and Ali (1992)]. The low incidence of family planning practice on the part of the women is not so much due to the dearth of family planning services; rather it is due to resistance by husbands, in-laws, and other peer pressures. Demographers like Caldwell (1982) and Cain *et al.* (1979) also contend that in patriarchal societies it is the patriarchy which militates against the fertility decline.

Another way of looking at the state of women in this society is to study a relationship between their actual and ideal number of children. Although the precise relevance of the statements on the ideal family size to the actual reproductive behaviour has always been argued [Hauser (1967); Lightbourne and MacDonald (1982)], yet many demographers agree that in developing countries observed fertility may not reflect

Syed Mubashir Ali and Hussain B. Siyal are Research Demographer at Pakistan Institute of Development Economics, Islamabad and Mehboob Sultan is Fellow at National Institute of Population Studies, Islamabad.

Authors' Note: The authors are grateful to Mr Mohammad Afzal, Joint Director, PIDE, for his valuable suggestions during the writing of this paper and to Dr Mohammad Irfan, Chief of Research, PIDE, for his constructive comments on an earlier draft. The authors acknowledge with thanks the computer assistance provided by Mr Masood Ashfaque and Mr Mohammad Rafiq.

the actual demand for children whereas the family size preferences would do so [Farooq (1981); Ware (1984)].

Table 1 is based on the currently married women aged 35+ years who have given numeric responses. The reason for restricting the analysis to women 35+ years old is that in Pakistan owing to young age at marriage, a large number of women in the 35-49 years age-bracket are grandmothers; and because of the grandmother taboo, i.e., the inhibition to bear children after becoming a grandmother, a majority want to cease child-bearing as they have achieved their desired family size [Ali (1989)].

Table 1

*Percentage Distribution of Currently Married Women Aged 35+ Years,
By Number of Living Children and Ideal Family Size*

Number of Living Children	Ideal Family Size*					Row Total
	0-2	3-4	5-6	7-8	9+	
0-2	4.1	8.4	1.4	.7	.3	14.9
3-4	2.4	18.1	2.9	1.0	0	24.4
5-6	3.1	17.3	10.0	.7	.1	31.3
7-8	.9	12.1	3.6	2.1	.8	19.5
9+	0.2	4.9	3.6	.3	.9	9.9
Col. Total	10.81	60.8	21.5	4.8	2.2	100.0

*Based on numeric responses only.

Table 1 shows that there were only 35 percent women who have the same number of children as their ideal. Sixteen percent women still have less than their stated ideals, whereas almost half of the women have excess children from their stated ideal number of children. The non-correspondence between the two measures is certainly a matter of concern.

In such a situation, merely family planning programme efforts may not yield the desired results. Empowering women in a variety of social and economic spheres will not only reinforce their ability to control fertility but will also rid women of numerous abuses committed against them, including physical abuse by husband and in-laws.

In this paper, we shall restrict our analysis to identification of some of the women's empowerment variables, and test the effectiveness of these variables on reproductive choices.

DATA AND VARIABLES

The present study is based on the data of the 1990-91 PDH Survey. The survey collected information regarding demographic and health issues, and as such no specific information on women's empowerment was collected in the survey. However, efforts

are made to select those variables which reflect women's empowerment and autonomy in decision-making. The dependent variable used in the analysis is Children Ever Born (CEB).

The analysis in this paper is based on the currently married women aged between 15-49 years who have given birth to at least one child in the last five years from the date of the survey.

In this man's world, it is a fact that a woman's view is hardly taken into consideration, especially when a desired family size is pursued. Rather women are considered to be baby-producing machines entrusted with the duties of rearing and caring of children besides doing household chores. When the question, "Have you and your husband ever discussed the number of children you would like to have?", is answered in the affirmative, it reflects recognition of women's worth in being consulted for a decision as vital as the number of children to be produced, implying the degree of empowerment she has.

Usually, a person who has the supreme power and authority in the household is considered to be the head of a household. A woman as head of the household is undoubtedly empowered with the authority of decision-making. The question is, would women empowered with decision-making choose to have a smaller family size or not?

The question, "If you could go back to the time you did not have any children and could choose exactly the number of children you want to have in your whole life, how many would that be?", indicates her preference for the ideal family size. In response to this question, some women gave numeric answers whereas many termed the question as interference in God's affairs. For this question, we divided the reply into two. All those who gave numeric responses are considered to have had some grit and authority to decide about the number of children, and hence may be said to have empowerment of decision-making. Whereas, all those who gave non-numeric responses are 'fatalists'. In other words, these women may be said to have resigned their power and tend to accept whatever is their 'fate'.

The empowerment of women in this analysis was measured by another set of questions, that is: "At the time you became pregnant with (name of the child), did you want to become pregnant *then*? Did you want to wait until *later* or did you want *no more* children at all?". The empowerment status of the women was determined in such a way that all those women who wanted the baby at the time of their pregnancy were considered to be "empowered". In the second category, all those who wanted the baby later but became pregnant were classified as "less empowered". And in the third category, i.e., "least empowered" were those who wanted no more children but got pregnant.

"If you needed to go to a health clinic or a hospital, could you go by yourself or would you need to be accompanied by someone?". The answers to this question denotes women's freedom of mobility and social independence. A woman capable of

Table 2

Multiple Classification Analysis of Children Ever Born and Selected Variables, Controlling for Current Age of Respondent, Age at First Union, Breast Feeding, and Contraceptive Use

Variable + Category	N	Unadjusted		Adjusted for Independents		Adjusted for Independents + Covariates	
		Dev'n	Eta	Dev'n	Beta	Dev'n	Beta
PAKISTAN							
Grand Mean =	4,242						
Head of Household							
Women	95	.88		.84		.08	
Men	3661	-.02	.05	-.02	.05	.00	.01
Response to Question on Ideal Family Size							
Numeric	1515	-.37		-.42		-.20	
Non-numeric	2441	.25	.12	.28	.13	.14	.06
At the Time of Becoming Pregnant, Wanted Pregnancy							
Then	2892	-.51		-.55		-.25	
Later	287	.01		.38		.41	
No More	578	2.57	.42	2.57	.42	1.03	.18
Discussion about No. of Children							
Yes	1350	-.04		.13		.06	
No	2406	.02	.01	-.07	.04	-.03	.02
IF Needed to Go to a Health Clinic or a Hospital							
Could Go Alone	939	.24		.34		-.11	
Would Be Accompanied	2817	-.08	.05	-.11	.07	.04	.02

Continued—