Testing the Link between Fertility Declines and Women's Empowerment in Developing Countries

Research from developed countries suggests that fertility declines and the ability to control fertility have functioned as important levers for changes in women's lives. Many have argued, for example, that by enabling women to decide whether and when to have children and fundamentally separating sexuality from reproduction, oral contraceptives helped to facilitate women's empowerment and catalyze fundamental shifts in gender relations in the United States (US) (Birdsall and Chester 1987; Gordon 2002). Similar dynamics may be evident in currently developing countries, but there has been limited empirical examination of these relationships outside of Western industrialized countries and Japan (Malhotra et al. 2009; however, see Llovd 2002; Schuler 1994, 1997; and others for work that touches on these relationships). Drawing from this earlier work, Malhotra and colleagues (2009) developed a conceptual framework to depict their contention that under the right contextual conditions, women's access to the means of fertility control and related fertility declines may benefit them in significant ways, in terms of their welfare, empowerment, and fundamental shifts in gender relations.¹ This study offers an important first empirical examination of this hypothesis in developing countries using macrolevel quantitative and contextual data from 12 developing countries around the globe. Specifically, it examines data on women's lives in the economic, socio-cultural, legal, and political spheres, and looks for broad trends and other clues about their relationships with contraceptive prevalence and fertility declines as well as relevant contextual influences.

Examining these dynamics in developing countries will add insight to the concerns and challenges facing increasing numbers of developing country women today, in societies with lower fertility levels, shifting age structures, higher aspirations, increasing female labor force participation, and rapid changes in the global economy. Moreover, it will help us to identify ways to intervene with policies and programs to help maximize the benefits of fertility decline that may accrue to women and identify potential solutions to the challenges women face.

Background

As Malhotra et al (2009) have contended, the potential relationship between the ability to control fertility and associated fertility declines and women's wellbeing, empowerment, and transformations in gender relations is supported by strong theoretical and empirical underpinnings. First, theoretical streams from several disciplines suggest that sexuality and reproduction—and the desire to control them—are at the heart of gender stratification. Gaining control over the occurrence and timing of childbearing has the potential to undermine the social systems (e.g., kinship, gender) that have helped to maintain control over women's sexuality and reproduction in the past. Many developing countries have experienced the dramatic expansion of contraceptive options and significant fertility declines in recent decades. These rapid changes in women's ability to control their reproductive capacity may have had ripple effects on other dimensions of their lives. Second, as noted above, evidence from industrialized countries also suggests such a relationship. It is argued that the efficacy of the Pill coupled with an enabling environment fostered an era in the US in which fertility decline and women's ability to control their own reproduction led to women's empowerment, and catalyzed fundamental changes in gender relations (Birdsall and Chester 1987; Gordon 2002). It seems more than plausible that

¹ Although we focus on this one-directional pathway, this is undoubtedly an iterative relationship, in which benefits to women can facilitate social and economic change as well as fertility control and declines.

such changes may also be apparent in developing countries. Third, the past few decades have been marked by dramatic shifts in women's family size preferences worldwide. Women around the world want smaller families and in many settings are, or have been, willing to bear significant personal and social costs—in terms of stigma, threats to their physical safety, and so on—to control their fertility. It seems reasonable that women perceive something in having smaller families that serves their own interests in ways that larger families no longer do. The rapidity and extent of this norm change underscores the transformative potential of contraception and fertility declines in the lives of women.

Although these relationships have been documented in numerous industrialized countries—with quite different social and cultural contexts—it remains an open question whether the same relationship will be observed in developing countries. Women in currently developing countries face a wide range of socio-cultural and political contexts and trajectories and patterns of fertility decline, and contend with vastly different economic contexts than did women in industrialized countries when contraceptive use was expanding rapidly there. Globalization, the importance of international aid and actors in shaping national policies and programs, the legacy of colonialism, and widely varying economic opportunities have combined to create a very different context of fertility decline in the recent past than that of industrialized countries. Examining how these forces interact in developing countries may help us to understand more clearly the implications of fertility decline on women and nations as a whole, develop a forward-looking research agenda, and identify ways to intervene with policies and programs to help maximize the benefits of fertility decline that may accrue to women.

The Present Study

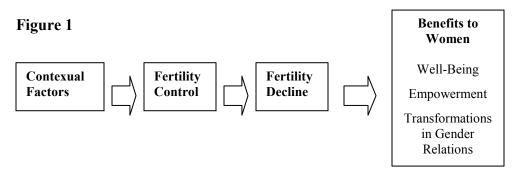
The overarching question motivating this effort is: What has access to the means of fertility control and associated fertility declines meant for women in developing countries, in terms of welfare and rights, opportunities, and fundamental transformations in gender relations? Answering this question requires assessing whether, how, and when women's access to fertility control options and related demographic shifts resulted in improvements in women's health and wellbeing, empowerment, and/or significant transformations in gender relations, and a grasp of relevant mediating and moderating factors—an effort that would require a highly detailed examination of a wide range of evidence from numerous contexts. Thus this paper centers on a more modest question:

What can we learn about the relationships between fertility decline and changes in women's welfare and empowerment and transformations in gender relations from a macro-level analysis of data from selected developing countries?

The conceptual framework underlying this study consists of the conditioning contextual factors on the left, fertility control and declines as the core drivers in the middle, and benefits to women at three different levels—in health and wellbeing, empowerment, and transformations in gender relations—as the major outcomes on the right (Figure 1). The resulting shifts in benefits to women may be small or incremental or large and substantial. In particular, these benefits include:

- 1. Improvements in women's well-being in terms of health, nutrition, income, education, reduced violence, longer life span, and other indicators of the basic human condition.
- 2. Women's empowerment, in terms of the expansion in their ability and freedom to make strategic life choices where this option was previously denied them.

3. Increased gender equality as evidenced by demonstrable shifts or radical transformation in social, economic, and political institutions and in societal norms and ideologies.



The analysis draws upon a wide range of macro-level data from 12 different developing countries, including Argentina, Brazil, China, Egypt, India, Kenya, Mexico, Philippines, South Africa, Taiwan, Thailand, and Tunisia. These countries represent a purposive sampling of countries with mature—if not completed—transitions from high to low fertility and quantitative and qualitative data available at the macro- and micro-levels at several points in time on a wide range of dimensions, including the economic, socio-cultural, legal, and political dimensions.

We investigate data from a number of different dimensions, including the economic, sociocultural, legal, and political dimensions. Using the available data, we explore macro-level correlations, patterns, and trends within and across countries among, for example, fertility rates, contraceptive prevalence rates and method mix, women's health status, labor force participation, educational enrollment and attainment, age at marriage, laws and policies (e.g., laws governing marriage, land ownership and inheritance, and political participation) and where available, direct measures of women's empowerment, such as decision-making ability or freedom of movement. We examine associations within each country, exploring relationships over time, and compare trends across countries over time as well. We also examine the many contextual factors that would mediate and moderate these relationships, such as family, kinship, and marriage systems; educational and economic systems; the role of state and international actors in population policies; the broad legal and political contexts; and the strength of gender and social norms, and determine of positive conditions or changes in these factors existed, facilitated, or impeded the influence of fertility decline on gender transformations.

Some of the data we use will be quantitative, coming from a variety of sources, including the World Fertility Surveys, Demographic and Health Surveys, government and other national data (e.g., labor force or poverty surveys, census data), peer-reviewed articles, data collected by the United Nations Development Programme, the World Bank, the United States Central Intelligence Agency, and other local, national, and international agencies as available.

However, we will also rely on qualitative evidence and contextual information from other researchers in history, sociology, policy/public administration, and other disciplines to enhance our understanding of policies, social movements, historical events, and other important contextual influences. We will use this additional insight, for example, to identify and evaluate whether a policy was particularly gender transformative in its conceptualization or execution, or

whether a particular women's movement was progressive or actually regressive in nature. Taken together, this analysis will provide a much more comprehensive examination of these relationships than has been done previously—with previous work examining only particular slices of the hypothesis, and provide a more richly textured examination of these issues. While it will not be possible to draw causal conclusions about whether, when, and how fertility decline and the means of fertility control influenced women's lives, this analysis will permit a first look at broad trends in the relationships and allow us to draw general conclusions about them. This analysis will also be instructive to determine if more in-depth case studies of this hypothesis are warranted, to take an initial look with existing data to identify cases that promise to be interesting or offer new insights, and help us to identify what kinds of data might be necessary to understand these relationships more fully. The findings from this study will offer a starting point for more in-depth research on this topic and will help to build a research and policy agenda that uses the fundamental connections between population and gender to address existing and emerging priorities.

References

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