



Policy and Research Paper N°13

Female Empowerment and Demographic Processes:
Moving Beyond Cairo
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ISBN 2-87108-059-3
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Introduction

Policy & Research Papers are primarily directed to policy makers at all levels. They should also be of interest to the educated public and to the academic community. The policy monographs give, in simple non-technical language, a synthetic overview of the main policy implications identified by the Committees and Working Groups. The contents are therefore strictly based on the papers and discussions of these seminars. For ease of reading no specific references to individual papers is given in the text. However the programme of the seminar and a listing of all the papers presented is given at the end of the monograph.

This policy monograph is based on the seminar on 'Female Empowerment and Demographic Processes: Moving Beyond Cairo' organised by the IUSSP Scientific Committee on Gender and Population, in collaboration with the Department of Sociology of the University of Lund, held in Lund, Sweden, from 21-24 April 1997.

The challenge of Cairo

To some participants in the International Conference on Population and Development (ICPD) in Cairo in 1994, it may have seemed that the concept of women's empowerment appeared out of nowhere, a nebulous apparition sent to haunt the habitat of population professionals accustomed to dealing with the more familiar topics of fertility, mortality, migration and population growth and composition. Whereas population conferences held in Bucharest in 1974 and Mexico City in 1984 had addressed the 'woman question' only briefly (Box 3), Cairo represented the culmination of years of work on the part of supporters of women's health and rights in both southern and northern countries. The ICPD Programme of Action included chapters not only on the usual demographic questions, but also on 'Reproductive Rights and Reproductive Health' and on 'Gender Equality, Equity and the Empowerment of Women'. 'Countries should act to empower women', the statement concluded, 'and should take steps to eliminate inequalities between men and women as soon as possible'.

The Cairo document declares that the empowerment of women is a positive good, an end in itself and not a means to an end. That is why the Programme of Action makes little attempt to link women's empowerment to population processes such as lower birth rates in a way that might demonstrate its usefulness as a demographic concept. Proponents believed that the promotion of gender equality and women's empowerment needed no justification. Whether or not it was linked to certain demographic outcomes, its social and developmental benefits were considered to be self-evident.

This is not to say that the concept of women's empowerment has no role to play in demographic inquiry, however. Indeed, quite the opposite is true. By urging researchers to recognize the dynamics of gender-based inequality in different settings - that is, the social force of culturally constructed sex/gender systems - the study of female empowerment and disempowerment can enrich the science of demography. How do particular population processes or conditions affect the capacity of girls and women to take control over their own lives and to exercise their basic human rights? How does the empowerment of women affect their sexual and reproductive health and demographic behaviour? How can women be empowered to transform the policies and practices of governments and other institutions, and how can governments and other institutions design policies and practices to empower women?

Box 3: The 'Woman Question': From Bucharest to Beijing

The World Population Plan of Action urges ... 'the full integration of women into the development process, particularly by means of their greater participation in educational, social, economic and political opportunities'... 'The opportunity for women to plan births also improves their individual status'. (Plan of Action of the World Population Conference, Bucharest, 1974)

'The ability of women to control their own fertility forms an important basis for the enjoyment of other rights'. (International Population Conference, Mexico City, 1984)

'The empowerment and autonomy of women and the improvement of their political, social, economic and health status is a highly important end in itself. In addition, it is essential for the achievement of sustainable development'. (ICPD Programme of Action, Cairo, 1994)

'[Reproductive rights] rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. It also includes their right to make decisions concerning reproduction free of discrimination, coercion, and violence ...' (Cairo, 1994)

'Women's empowerment and their full participation on the basis of equality in all spheres of society, including participation in the decision-making process and access to power, are fundamental for the achievement of equality, development and peace'. (Platform for Action of the Fourth World Conference on Women, Beijing, 1995)

'The human rights of women include their right to have control over and decide freely and responsibly on matters related to their sexuality, including their sexual and reproductive health, free of coercion, discrimination, and violence. Equal relationships between women and men in matters of sexual relationships and reproduction, including full integrity of the person, require mutual respect, concern and shared responsibility for sexual behaviour and its consequences'. (Beijing, 1995)

The Cairo Programme of Action is a political document. Its goal is to shape population-related policies and programmes in a way that contributes directly to the exercise of human rights and the improvement of human welfare. But there is a scientific challenge as well: a challenge to researchers to deepen and broaden the scope of demographic inquiry. It is not only a question of how the concept of women's empowerment can contribute to the analysis of population processes, but also of how the science of demography can contribute to the alleviation of social inequalities and injustice.

Female empowerment: what is it?

The concept of empowerment is more dynamic and comprehensive than the relatively static concepts of 'status of women' and 'female autonomy', both of which have contributed a substantial literature to the field (Box 4).

Empowerment is both a group and an individual attribute; both a process (that of gaining power) and a condition (that of being empowered). Power is a relational concept, understandable only as it is exercised by individuals or groups vis-à-vis others within a particular context. The relational aspects of power derive not only from gender, but also from hierarchies of class, caste, ethnicity, age, lineage, religious and national identity and other characteristics that form the organizing principles of social differentiation.

Processes of empowerment (or disempowerment) operate at many levels. Moreover, the concept is a multidimensional one, for empowerment in one sphere of activity, one physical setting or one set of relationships may not lead to empowerment in another. As experienced subjectively, the feeling of being empowered or disempowered may be very different from that ascribed by a researcher who is attempting an objective definition. Individuals objectively defined as being empowered or disempowered may not subjectively regard themselves as either.

The essence of empowerment is the development of individual and group consciousness of the opportunity and ability to act:

- consciousness (resulting from a process of 'conscientization') of the existence and sources of injustice;
- consciousness of an entitlement to fair and equal treatment and to the conditions necessary for survival, security, or social advancement;
- consciousness of a capacity to confront, challenge and overcome social injustice wherever it occurs.

Box 4: Status, Autonomy and Empowerment: How Do They Differ?

The status of women refers to the positions that women occupy in the family and in society relative to those of men and of women of other classes, other countries, other times. The United Nations and other organizations have compiled sourcebooks of indicators of the status of women such as literacy, education, employment, age at marriage, political representation, and legal rights. Like empowerment, status is multidimensional (a woman may have high educational status but low economic status, for example) and applies to individuals and groups.

Female autonomy refers to an individual's capacity to act independently of the authority of others. Like female status it is multidimensional, for a woman may have considerable autonomy in some spheres of activity but very little in others. Autonomy implies freedom, such as the ability to leave the house without asking anyone's permission or to make personal decisions regarding contraceptive use. Although household decision-making is often used as a measure of autonomy (for example, having the final say over how much of the family budget to spend on food), it is not necessarily a measure of power because such decisions may be delegated to women by other household members.

Female empowerment refers to the capacity of individual women or of women as a group to resist the arbitrary imposition of controls on their behaviour or the denial of their rights, to challenge the power of others if it is deemed illegitimate, and to resolve a situation in their favour. Empowerment implies a struggle for change against opposition. Like female autonomy, female empowerment requires access to key social and material resources from which power derives. Although there are commonalities across and within societies, sources of power also have important culturally-specific components.

From the perspective of the international feminist movement, the empowerment of women can be thought of as a transformative project involving every aspect of gender-based individual, group and institutional behaviour.

... and how can it be measured?

The measurement of empowerment poses a challenge to researchers. It is undoubtedly premature, if not impossible, to develop a universally applicable set of indicators that would be sensitive to variations of social context and meaning and yet, at the same time, be comparable across settings. One needs to know not only how to recognize power (what is it?) but also how to distinguish it from its sources (how do you get it?) and from its outcomes (what do you do with it if you have it?). This is not an easy task.

The demographic literature contains a wealth of data on the measurement of women's status, autonomy or decision-making power. In some studies, indicators of women's status or autonomy are taken as dependent variables; the analysis focuses on those factors that may explain variations in women's position across individuals, households, communities or regions. In other studies, indicators of female status or autonomy are taken as independent variables intended to help explain variations in demographic behaviour such as contraceptive use or child survival. In still others, they are intervening variables mediating between background characteristics and demographic outcomes. Sometimes indicators such as years of schooling or wage employment are used as proxies for autonomy or power, but critics have charged that these substitutes can be highly misleading. What is needed in both southern and northern country studies are direct measures of attitudes or behaviours that tap a capacity for resistance and transformation.

In southern countries, large-scale inquiries such as the Demographic and Health Surveys, with the exception of an Egyptian survey described below, have up to now offered little except the usual indicators of women's status such as age at first marriage, years of schooling, current employment status (whether working for cash) and marital/living arrangements such as polygyny or post-marital residence with the husband's family. Surveyors are reluctant to add expensive questions about autonomy or empowerment without prior evidence that such behaviour is demonstrably relevant to demographic and health outcomes. Yet, if questions on these topics are not included in national surveys, evidence is difficult to assemble except in smaller and more localized studies. Moreover, if we consider that female autonomy and empowerment are integral components of women's health and rights, then by definition they are the proper subject of direct inquiry when linking health and social behaviour to demographic processes.

The 1994 Egyptian DHS contains a broad array of questions relating to women's status, autonomy, and power:

- indicators of individual sources of empowerment, such as the woman's age at first marriage, years of schooling, exposure to media, experience of work before marriage, current ownership of assets;

- indicators of familial settings that may be empowering or disempowering, such as size of dowry, post-marital residence with in-laws, age and educational gap between wife and husband; and
- direct evidence of autonomy or empowerment, for example if the woman chose her spouse freely, currently controls earnings or expenditures, moves about with few restrictions, believes in more egalitarian gender roles, views wife beating as never justified.

The attempt to distinguish direct evidence of autonomy or empowerment from its immediate settings or potential sources is important because there is no guarantee that women can use available resources to empower themselves. Indeed, social norms and values emphasizing female subordination often override material considerations such as a woman's ability to support herself economically in a way that weakens the effects of personal resources on individual empowerment.

The collection of a wide range of measures, such as the 32 questions in the Egyptian survey, raises several methodological questions. Is it better to be comprehensive or selective in the choice of indicators? If one is to cast the net widely, which may be useful in unfamiliar terrain, then the multiple indicators will have to be reduced for analytical purposes. This may be accomplished through a priori conceptual reasoning, in which case the resulting dimensions may not be statistically independent, or through the use of statistical techniques such as factor analysis, in which case the dimensions may be difficult to interpret or to replicate in other settings.

If one is to be selective at the outset in the choice of indicators, then certain dimensions of autonomy or empowerment are bound to be missed. Yet if the researcher is interested in the effect of women's empowerment on a particular behavioural outcome such as the timing of first intercourse or marriage, it may make more sense to ask specifically about the extent to which a girl or woman felt entitled to choose her partner and the timing of the event rather than to try to relate the behaviour to a more general measure. Parsimony can be useful. In contrast, more comprehensive, multi-faceted measures of empowerment are helpful if the researcher's primary interest is in monitoring empowerment per se rather than establishing its linkages to specific aspects of demographic behaviour.

Empowerment and rights

The Universal Declaration of Human Rights addresses two types of individual rights. The first includes civil and political rights, or individual liberties, such as the right of free association, movement, and expression, that are intended to protect all persons from abuses of state power. The second includes economic and social rights, sometimes called entitlements, that are intended to ensure to all persons an adequate standard of living including food, housing, schooling, health care, employment, and a clean environment.

The concept of human rights has evolved through numerous international proclamations and declarations in the past decades. The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), for example, not only identifies and condemns all forms of discrimination against women but also insists on the elimination of customary practices and prejudices that result in unequal treatment. Statements from the World Conference on Human Rights in Vienna in 1993 as well as from Cairo and Beijing refer to the 'integrity of the person', which implies freedom from physical violence and rape, protection from harmful practices such as female genital mutilation, and self determination in matters related to sexuality and reproduction such as whether, when, and with whom to have sexual relations and bear a child.

If empowerment is signified by the capacity of an individual or group to protect and advance its own interests even in the face of opposition, then the research strategy becomes one of selecting clusters of interests or rights and establishing the extent to which women feel empowered to assert them (Box 5). One of the many interesting contradictions inherent in this effort is that some women may consider certain customary rights and privileges of the type condemned by CEDAW to be critical to their own survival and security. Indeed, empowerment may be expressed through women's consciousness of violations of their traditional rights as women and through their efforts to assert traditional claims. Women's organizations may oppose liberal divorce or abortion laws, for instance, or insist on the right to wear the veil in public, or demand special protection or services in the workplace. The condition or process of empowerment per se thus needs to be distinguished from the purposes for which it is used.

Box 5: Are Women Empowered to Exercise Rights Such As These?

Sexual rights: the right to 'control one's own body;' to enter marriage only with free and full consent and to terminate a marriage; to engage in pleasurable sexual relations free from discrimination, coercion, or violence; to refuse unwanted sexual acts or relationships; to protection from sexually transmitted diseases and unwanted pregnancy; to the respect of one's partner and to shared responsibility for sexual behaviour and its consequences. Freedom from the threat of genital mutilation, sexual harassment, rape, prostitution, and sexual slavery.

Reproductive rights: the right to decide freely and with full information on the timing and number of children (if any); to high-quality reproductive health information and services, including the choice of safe, effective and acceptable methods of contraception and sterilization, the prevention and treatment of reproductive tract infections and infertility, the safe termination of unwanted pregnancies, and safe pregnancy and childbirth; the right to bear and raise healthy children.

Education and training: the right to schooling and, without discrimination based on gender, to the same choice of curricula, vocational training, university coursework, scholarships, literacy and adult education classes, extension programmes, and other formal and non formal educational opportunities.

Employment: the right to work and to equal employment opportunities; to equal promotion, job security, training, and benefits; the right to equal pay and equal treatment with respect to work of equal value; the right to social security; to safe working conditions; to protection from dismissal on grounds of marriage, pregnancy, or maternity.

The right to property: on an equal basis with men and regardless of marital status, the right to inherit, buy, sell, own, use, and administer property and to conclude contracts; the right to participate equally with men as beneficiaries of agrarian reform, housing, or land resettlement schemes; equal access to credit and loans.

Freedom of movement, association, and political activity: The right to vote in all elections and to be eligible for election to all publicly elected bodies; to participate in the formulation and implementation of government policy and to hold any public office; to participate in non governmental organizations and associations; to move freely within one's country and to leave one's country and return; to participate in all aspects of religious, recreational, and cultural life.

Once the clusters of rights are defined, the researcher can assess women's (and men's) knowledge, attitudes, and practices relating to these rights, together with their determinants, by using surveys, in-depth interviews, focus groups, direct observations, media analyses or other research approaches.

- To what extent are women aware of the rights they have, or should have, either as universally defined, as understood by local law or custom or as emerging in human rights discourse?
- To what extent do women believe that they are entitled to exercise these rights even if others oppose them?
- To what extent are women willing and able to act, or have women acted in the past, individually or as a group, to defend or assert these rights?

'Enabling conditions' for empowerment and choice

The abstract notion of freedom of choice means little unless the social, economic and political environment offers a genuine range of options.

For years, critics of the survey approach to demographic inquiry have urged that greater attention be paid to the context in which people make demographic decisions. There is a mismatch between theory and data, critics argue. Theories relating to sexual, marital and reproductive behaviour, migratory behaviour and health-seeking behaviour typically draw on institutional factors such as sexual norms and ideologies, household and kinship structures, intergenerational and inter household wealth flows, the nature of land and labour markets, the distribution of health services, cultural ideas about health and illness, religious strictures, government policies, and so on. In contrast, large-scale surveys tend to pull the actors out of their dramatic context and place them on an empty stage.

Identifying key aspects, or 'enabling conditions', of the decision-making environment is crucial to understanding the potential for female empowerment in general as well as specific components of demographic behaviour. Where is the locus of control over a particular decision such as the timing of a marriage or the choice of a mate, for example? What influences how much agency a young bride has in deciding whether to delay a first pregnancy? Who decides about the allocation of family labour within the household and in the labour market, and within what framework of opportunities and constraints?

Decision-making environments range from the immediate context of interpersonal interactions, through the intermediate context of family and community influences, up to the broader context of market and state forces. At each of these levels, elements of the environment can empower or disempower women and influence demographic processes. At each of these levels, questions can be posed about the distribution of potentially empowering material and social resources. For example:

- What are the most valued **material resources** or signs of wealth such as land, housing, furnishings, personal adornments, income in cash or kind, the accumulation of capital, control over labour (familial or non-familial)? What about less obvious resources in rural communities such as ownership of or access to livestock, fodder, fuel, water? Who controls these resources within the household, the community, the market, the state? What are the mechanisms (laws, policies, customs) by which access to and control over resources (e.g., ownership or use rights) are allocated? What role does gender play in this allocation process?
- How are valued **opportunities** distributed within the household or family, the community, the market and the state? These include opportunities for schooling (formal and informal), technical training, agricultural extension services, credit and employment in various sectors; access to health care, family planning services, legal assistance, social welfare services and child care; opportunities to buy consumer goods, to have access to information and entertainment, to move about freely in public and engage in the cultural life of the community, to enjoy rest and leisure, to participate in political decision-making. How are these opportunities structured by gender?
- What are the major focal points and boundaries defining group **identity and solidarity** within the household or family, the community, the market, the state? Along what lines is group mobilization for action most likely to occur (for example, neighbourhood organizations, market women's associations, consumer movements, labour unions, political parties and protest movements)? To what extent do these groups reinforce or transcend gender, and what role do women play in maintaining or challenging group solidarity or expressing group demands?
- How does the **content of prevailing norms and ideologies** come to bear on the potential of women to empower themselves in the household or family, the community, the market, the state? What are the core ideas relating to sexuality and gender as they intersect with ideologies of kinship, class or caste, race or ethnicity, religion, nationalism, economic life, and so on? Are these ideologies 'open' or 'closed' with respect to providing space for alternative beliefs or practices?

The research strategy behind these questions is two-fold: first, to identify key elements in the decision-making environment that may empower or disempower women in general or with specific reference to their sexual and reproductive health and demographic behaviour; and second, where feasible, to design programmatic or policy interventions with the goal of enabling girls and women of all social classes to exercise their rights.

Environments are shaped by economic, political and social forces operating at global, regional and national levels as well as locally. Market forces, political ideologies, economic policies, ethnic or religious and national rivalries and a multitude of other forces all play their part. An enabling environment does not necessarily empower, but the empowerment of women is almost impossible in the absence of enabling conditions.

Female empowerment and demographic processes

The Cairo agenda does not address in detail the nature of the connections between female empowerment and demographic processes because, as noted above, advocates considered empowerment a worthy goal in and of itself. However, a considerable literature has addressed the question of how women's status, autonomy or empowerment may affect or be affected by the timing of the first birth, contraceptive use, reproductive preferences and decisions to migrate, among other processes. Moreover, there is a vast scope for additional research.

The Cairo Programme of Action highlights a number of processes that are inherently demographic (despite the rubric of sexual and reproductive health) because they relate to fertility, morbidity and mortality and/or population structures and movements. Sexual behaviour; the formation and dissolution of unions; reproductive preferences;

unplanned childbearing; contraception and abortion; reproductive morbidity and mortality; child survival and health; and voluntary and involuntary migration - all are imbedded in socially constructed sex/gender systems and can be analysed through the lens of female empowerment. For example:

- To what extent are girls and women in specific contexts able to **negotiate the terms of a sexual relationship** in general or of a particular sexual act, including the choice of a partner, the nature and timing of the sex act, the achievement of sexual pleasure, protection from unwanted pregnancy or sexually transmitted disease, protection from physical or emotional harm and the assurance of male responsibility for sexual behaviour and its consequences? How can girls or women, married or unmarried, individually or as a group, be empowered to negotiate effectively in their sexual lives, and what impact would such empowerment have on sexual relationships and outcomes? What specific policies or programmes would create the 'enabling conditions' for pleasurable and responsible sexual behaviour?
- How does the empowerment of girls and women affect whether and when they first **marry or form a sexual union**, their capacity to negotiate a fair distribution of rights and responsibilities within the relationship and the propensity for marital dissolution and remarriage? To what extent or in what ways are early marriages more empowering or disempowering for females than later ones, or arranged marriages compared with those based on free choice, or consensual unions compared with formal marriages, or polygynous vs. monogamous unions? Do factors such as the age or educational gap between partners, or their living arrangements, make a difference? What policies or programmes would enable women to negotiate more favourable 'terms of trade' at the time of marriage, during marriage and at its dissolution?
- Under what conditions are women likely to **develop preferences for delayed childbearing and fewer children**, and specifically for replacement level fertility or below? Are these same factors likely to affect men's preferences? How and why do male and female preferences differ in specific contexts, and with what results? To what extent does female empowerment within the context of an environment of choice contribute to lower desired and achieved fertility? Of key importance here is the question of the sexual, marital and reproductive goals of adolescents and the extent to which they have access to the resources they need to make informed choices. At what point in the process of transition to very low fertility rates might an unrealized desire to have more children become relevant, and what role might female empowerment play in contributing to or resolving this dilemma?
- To what extent and in what ways does female empowerment **reduce the incidence of mistimed or unwanted pregnancies** and childbearing? If girls and women had a greater capacity to negotiate the terms of trade of a particular sexual relationship or sexual act, would they be less likely to experience an unintended pregnancy? Or, if they could be assured of their partners' willingness to share responsibility for raising a child, would fewer pregnancies or births be defined as 'unwanted'? In turn, how does the experience of having an unplanned pregnancy affect a woman's sense of her own capacity to control key features of her life?
- How does female empowerment **improve women's access to safe and acceptable methods of contraception and abortion** and their effective use? By definition, choosing to use contraception or abortion under conditions of fully informed consent is empowering to women because it provides a crucial element of control over their reproductive capacity. Whether it leads to empowerment in other spheres, however, depends on the full context of their lives. How might family planning programmes themselves empower women - and especially adolescent girls - to challenge male privilege and authority and to insist on their partners' full co-operation in fertility and disease control (Box 6)?

Box 6: How Can Reproductive Health Programmes Empower Girls and Women?

A comprehensive sexual and reproductive health programme includes high quality services in contraception, sterilization and abortion together with counselling on sexuality and sexually transmitted diseases, treatment or referrals of STDs, identification and treatment of other reproductive tract problems, and medical surveillance during pregnancy, childbirth, and the post-partum period. The transformation of gender roles to encourage male caring and responsibility should play a crucial role in the information, education, and communication (IEC) aspects of programme activities.

Programmes can contribute to the empowerment of girls and women in at least three ways: through the training, employment, and conscientization of women workers at all levels; through interactions with clients that include culturally sensitive counselling, the exchange of accurate information, and the delivery of high quality services; and through the influence of programmes on the community as a whole.

Indicators of female empowerment resulting from programme interventions could include the following, among others:

- a woman feels confident about how to plan her pregnancies, if any, and is fully satisfied with the method and the provider she has chosen;
 - a woman is determined to protect herself from the risk of a sexually transmitted disease or an unwanted pregnancy even if her relatives or partner disapprove;
 - a woman is willing to refuse or terminate a sexual relationship or to seek assistance in changing her partner's behaviour rather than endure physical, sexual, or emotional mistreatment;
 - a woman is willing to insist that her partner remain sexually faithful, that he seek treatment for a sexually transmitted disease, or that he use condoms;
 - a woman initiates other health-seeking behaviour with regard to her own sexual and reproductive needs or the health needs of her children;
 - a woman refuses to tolerate poor quality treatment and feels entitled to demand good services and to be treated with dignity;
 - a woman understands that control over her sexual and reproductive life can lead to other positive changes, and feels empowered to claim her rights in other spheres.
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- To **reduce the incidence of reproductive morbidity and mortality**, how could women be empowered to recognize and take care of their own reproductive health needs and to demand better services? In particular, how could women be empowered to avoid or overcome high-risk situations such as exposure to damaging reproductive tract infections and possible infertility; early, closely spaced, or late childbearing (intended or unintended), harmful pregnancy and birth practices, and poor quality prenatal and maternal care?
 - In what ways does female empowerment **contribute to the survival, health and well being of children**? Are women with more power and influence more likely to delay, space and limit their childbearing and thus improve the survival chances of their infants? Are they more likely to invest in the care and nurturing of their infants and children, for example with breast feeding, vaccinations, improved nutrition and sanitation and adequate medical care, and to demand better child health services and more participation in child rearing from their partners? Does the empowerment of women weaken the preference for sons and reduce disparities in the treatment of sons and daughters? Are there cases in which empowering women to meet their own needs (e.g., in employment, in divorce) may work against the best interests of the children? In what ways? How can family and workplace policies and programmes help to ameliorate potential conflicts between the rights and well being of adults and children?
 - Finally, how does female empowerment **facilitate or inhibit migratory flows of particular types**, and how do migratory processes - voluntary and involuntary, short- and long-distance, temporary and permanent, labour- or marriage and family-motivated - serve to empower or disempower women in specific contexts (Box 7)? How does the migration of men affect the autonomy and power of women left behind, in the short and long term? How do the potentially empowering or disempowering experiences of male migrants affect the women who move with them? In turn, as girls and women gain greater individual agency, under what conditions does their empowerment translate into decisions to migrate autonomously or to resist parental or spousal expectations that they will move?

Virtually all of the connections suggested below depend on the characteristics of the particular environments in which they occur. The distribution of material resources and economic and social opportunities, the potential for social mobilization and the force of ideologies, among other elements, can facilitate or constrain female empowerment and its relationship with demographic outcomes. Processes are played out differently at the individual level and in the household or family, the community, the market and the state. Case studies that incorporate key elements of these environments together with their interaction effects can make important contributions to the study of population processes.

Box 7: Empowering and Disempowering Aspects of Migration

Within the past two or three decades, the representation of women among internal and international migrants has increased, in part because women are better able to take advantage of new opportunities. In many southern and northern countries, women dominate rural to urban migration streams and in some cases they also outnumber men among labour migrants from southern to northern or Middle Eastern countries.

Migration can facilitate the empowerment of women in direct and indirect ways. The relationship is a complex one, however, and under some circumstances, migration can perpetuate patriarchal systems or disempower women.

Although research on this topic is limited, it is possible to make some tentative generalizations. Migration is more likely to empower women when:

- women move from rural to urban areas, thereby exposing themselves to a wider range of influences, attitudes, and behaviours;
- the migration is not clandestine or undocumented;
- women work outside the home at the place of destination and personally control at least some of their cash income;
- they find jobs in the formal rather than the informal sector;
- women move autonomously, thus separating themselves at least temporarily from the authority of family members;
- women form new social networks with other women at the place of destination;
- the migration is long-term or permanent.

Women may be disempowered, however, under conditions in which:

- they are forced to work in bonded labour to pay back debts incurred, or fear arrest if they are undocumented;
- they work in unprotected occupations such as domestic labour, entertainment industries, and involuntary prostitution;
- they become targets of racial discrimination and subject to physical, sexual, and psychological abuse at the place of destination;
- the migration is associated with post-marital residence in the husband's village far from the woman's natal village where she has family and friends;
- women migrate with husbands or family members who impose new restrictions on their physical mobility or who use physical violence as a form of control

Box 8: The Effects of Education on Female Autonomy and Fertility Depend on the Context

Analysis of the links between formal education and fertility in 53 countries reveals that in some settings it requires at least an upper primary education to reduce markedly a woman's desired and actual family size.

Smaller increments of educational attainment translate into greater changes in fertility in Latin America and the Caribbean than in other regions, in large part because of the higher levels of development and gender equity that exist in many of these countries relative to other regions.

Findings from Egypt, Ghana, and South Asia indicate that in settings characterized by high levels of gender inequality, relatively low levels of education enhance women's autonomy only in limited, non-economic areas of decision making - such as breast-feeding, child care, and contraceptive use - which do not threaten the traditional locus of power in the household.

It appears that in highly stratified settings such dimensions of autonomy such as a woman's decision-making authority and her social and economic self reliance are not enhanced until relatively high levels of education have been attained. In contrast, in more egalitarian settings even modestly educated women are likely to participate in important family decisions, to work in non-farm occupations, and to control economic resources.

Empowering women to shape policy

If female empowerment is, indeed, a 'transformative project', then the idea is not simply to transform individual behaviour but to transform the environment itself. One looks not only at how elements of the environment encourage or inhibit female empowerment, but at how the empowerment of women (in general and as members of particular classes, castes, ethnic or religious groups, age groups, and so on) can transform institutional structures and ideologies. The mobilization of advocates of women's health and rights in southern and northern countries to rewrite the Cairo agenda is just one example of how female empowerment can shape public policy by rewriting the population paradigm.

From a policy perspective, it could be useful to think imaginatively about how to support the activism and effectiveness of women's health and rights advocates in both southern and northern countries in addition to following the more conventional course of analysing the potential effects of the empowerment of women as individuals on their reproductive health and demographic behaviour. That is, greater attention could be paid to how to promote the principles of ICPD on the public stage by strengthening the capacity of women's groups and organizations to apply pressure to governments and other institutions to design and implement the policies and programmes that ICPD requires.

Feminists and other supporters of human rights have long argued that population policies, like development policies, should derive from an ethical position based on the achievement of social justice and universal human rights. It is within this framework that activists recast the language of the Cairo Programme of Action to emphasize the interconnections between health, empowerment and rights. The promotion of these principles at the national level - together with specific policies and programmes relating to the sexual and reproductive health and rights of adolescents and adults regardless of age, marital status or economic condition - depends on enabling conditions such as the following:

- the existence of 'political space' (democratic openings) for popular participation in setting the agendas of governments, political parties and other institutions;
- the support of an active and informed civil society, including a variety of women's organizations, human rights groups, trade unions, church groups, professional associations, community-based associations and others;
- accountability on the part of governments to implement the recommendations of Cairo and Beijing, among other policies, including the 'mainstreaming' of women in all sectors of the political and development process;
- insistence on the part of international agencies and bilateral donors that gender equality is a prerequisite for just and sustainable development, and that policies promoting gender equality are therefore conditions of financial support;
- critical analysis of current macro-economic processes such as economic globalization, the expanded role of multinational corporations, unequal terms of north-south trade and of policies such as structural adjustment programmes, that exacerbate inequalities and fail to account for the human costs;
- confrontation with major ideological threats to women's rights and empowerment, such as religious, ethnic or nationalist fundamentalist movements whose ideologies are expressed in the control of women's bodies and women's lives.

In turn, the effectiveness of women's efforts to mobilize collectively for policy change depends on these factors, among others:

- accurate analyses of the policy process, including the political context and the personal and group interests of key actors and stakeholders (Box 9);
- the development of a flexible approach to policy change that takes strategic advantage of shifting opinions and unfolding events;
- alliance building with individuals and groups across all sectors of society who share common concerns (e.g., reproductive rights, economic and social rights, environmental concerns) to build political leverage and community support;
- sustained networking and exchange of information, ideas, policy positions and planned interventions with a view to co-ordinating actions in a systematic way;
- cultivation of and ongoing engagement with responsible and supportive representatives of the mass media who can influence public opinion;

- appeals to ideas of fairness and justice, or to commitments made on the part of governments or legal systems, against which violations of rights or denials of opportunities are defined as unacceptable;
- effective use of supportive evidence from social science research, legal cases, personal testimonials and other sources that are accessible, relevant and persuasive in the stories they tell;
- preparation of policy proposals in targeted areas that go beyond lists of demands or complaints to propose concrete solutions and specific policy content.

Box 9: Empowering Women Through the Policy Process

A key factor determining the ability of interest groups to influence public policies is their skill in analyzing the dynamics of the policy process and identifying the interests of major actors. There are no clear rules as to what works and what does not, because the terrain shifts as the policy process evolves. The content of a specific policy may be less pivotal in determining whether or not it is adopted than are other components of the analytical model such as the political context, the process, and the interests of stakeholders.

A successful mobilization effort in South Africa took advantage of the democratic opening following the defeat of the apartheid government to design a progressive new health policy. The Women's Health Project, established in 1991 to involve women of all races and classes, formed alliances with trade unions, academics, women's groups, health professionals, church groups, NGOs, and some government bureaucrats and politicians in a regionally-based consultative process. The outcome was a set of rigorously drafted policy documents - not just lists of demands - with which to lobby the new government.

Among other accomplishments, the Women's Health Project and its allies convinced the African National Congress in its party platform to recognize a woman's right to choose whether or not to terminate her pregnancy according to her own beliefs. The road to legislative change was a rocky one, however, with pro- and anti-choice stakeholders and cautious politicians of varying perspectives attempting to influence or avoid the outcome. The Choice on Termination of Pregnancy Bill, which passed in 1997, reflects the central concerns of activists regarding women's reproductive health and rights. Most important, the policy struggle itself empowered women to improve their position in other ways.

Empowering women to shape policy may appear to be far beyond the task of demography, which, conventionally understood, is to undertake the scientific study of population structures and processes. However, demography has always been a policy-oriented science. It has expressed concerns about the 'political arithmetic' of population size, about threats of differential growth to the 'quality' of populations (from eugenics to human capital), about the persistence of poverty and illness and untimely death, about the human costs of excess childbearing and the environmental costs of overpopulation, about the nature of economic development and its effects on population trends and characteristics. And it has proposed solutions: economic and political solutions, social solutions, administrative and technical solutions. Among these, the promotion of family planning programmes as a means of controlling runaway birth rates in southern countries has been the biggest 'solution' of them all.

The science of demography has always been used to inform policy, that is, to propose, design, implement and evaluate solutions to perceived demographic problems. What has been largely missing from the scientific and policy agenda within demography, up to now, is a proportional concern with the harmful effects of gender systems that subordinate girls' and women's rights and well being to the exercise of male power and privilege. This relative neglect of gender is particularly notable given that the dynamics of sex/gender systems are interconnected with population structures and processes in fundamental ways. The application of the concepts and tools of demography and related fields to the analysis of these interconnections and the promotion of female empowerment thus appears as a logical step in the evolution of the discipline.

Female Empowerment and Demographic Processes: Moving Beyond Cairo

List of the papers presented at the seminar on 'Female Empowerment and Demographic Processes: Moving Beyond Cairo' organised by the IUSSP Scientific Committee on Gender and Population, in collaboration with the Department of Sociology of the University of Lund, held in Lund, Sweden, from 21-24 April 1997.

Session 1: What is 'female empowerment'? Conceptual and measurement issues

- 'Conceptualizing women's empowerment' by Paula England
- 'Empowering women for reproductive rights: moving beyond Cairo' by Gita Sen and Srilatha Batliwala

Session 2: Intersections between female empowerment and demographic processes.

- 'Reproductive rights and demographic processes from an empowerment perspective' by Sonia Correa
- 'Sexuality, gender relations and female empowerment' by Ivonne Szasz and Juan Guillermo Figueroa
- 'Reproductive health and the demographic imagination' by Ruth Dixon-Mueller and Adrienne Germain
- 'Family planning programs and demographic outcomes: the relevance of and for female empowerment' by Anrudh Jain
- 'Gender discriminations in the workplace: implications for fertility' by Barbara Bergmann
- 'The consequences of female empowerment for child well-being' by John Hobcraft
- 'Female empowerment and adolescent demographic behaviour' by Anastasia J. Gage
- 'Low fertility, marriage perceptions, and gender relations in Japan: an intergenerational perspective' by Noriko Tsuya

Session 3: Case Studies: Developing Countries

- 'The gender dynamics of recent rapid transitions: The cases of Bangladesh and Egypt' by Sajeda Amin and Cynthia B. Lloyd
- 'Women's empowerment and contraception: Is there a link?' by Abdullahel Hadi, Samir R. Nath and A.M.R. Chowdhury
- 'Empowerment of women in Egypt and links to the survival and health of their infants' by Sunita Kishor
- 'Women's autonomy in rural India: its dimensions, determinants and the influence of context' by Shireen Jejeebhoy
- 'Incorporating women's empowerment in studies of reproductive health: an example from Zimbabwe (DHS)' by Stan Becker
- 'Women's influence on decision-making within households: evidence from Ghana' by Cheryl R. Doss

Session 4: Sources of change to empower women

- 'Wife's empowerment and fertility in Nigeria: the role of context' by Mary Kritz, Paulina Makinwa Adebusoye and Douglas T. Gurak
- 'Economic restructuring, women's survival and transformation in Mexico' by Brigida Garcia
- 'The growth of women's empowerment in Sweden, experiences, actors and arenas' by Katarina Lindahl
- 'Migration and female empowerment' by Graeme Hugo
- 'The position of women and demographic processes in the countries in transition' by Wanda Nowicka
- 'Mobilizing and networking: what works and what doesn't, and why' by Barbara Klugman

Session 5: Moving beyond Cairo: Public Policy

- 'The policy agenda for women's empowerment in the next decade' by Carmen Barroso and Jodi Jacobson
- 'Making governments accountable for female empowerment: preliminary thoughts on the contribution of social science' by Rebecca Cook

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3. promotion of exchange between population specialists and those in related disciplines;
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