

The tie that binds? Husband's and wives' perspectives on sexual and reproductive agency in Bangalore, India

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Women's agency is increasingly recognized as critical to a number of demographic, social, economic and other aspects of women's lives. In particular, recent research has found that it plays a key role in reproductive and sexual health, with a lack of agency associated with poorer health outcomes (Blanc 2001). Some dimensions of women's agency, such as mobility and decision-making, have received more attention in the research than others, in particular women's ability to negotiate or in other ways control their sexual relations. The concept of agency itself is multi-dimensional (Kishor 1995; Hashemi, Schuler et al. 1996; Malhotra and Mather 1997; Kishor 2000; Beegle, Frankenberg et al. 2001; Malhotra and Schuler 2005). Factors that increase agency on one dimension may not necessarily increase agency on other dimensions. Also, women's agency is not static over a woman's lifetime. It can vary by age and by marital and childbearing status (Das Gupta 1996; Hindin 2000). Young married women, particularly in South Asia, are typically at the bottom of the social and familial hierarchy. Thus, they have little power to make any decisions around their lives, are severely limited in their mobility and ability to access reproductive health, social or economic resources (Jejeebhoy 1998; Barua and Kurz 2001; Mathur, Greene et al. 2003), and are vulnerable to coerced or unwanted sex (Erulkar 2004; Santhya, Haberland et al. 2007).

Research on sexual agency is more limited than that on mobility or decision-making, though there is a recent growth in this literature (Blanc 2001). Further, it is difficult to compare findings across studies because of the variety of ways in which sexual agency is defined and measured (Pulerwitz, Gortmaker et al. 2000; Blanc 2001). Research is particularly limited on the dynamics, prevalence and determinants of different dimensions of agency among young married women, though it is critical to understand and address the lack of power faced by this sub-set of the population as these women start their reproductive and adult lives. In particular, relatively little is known about the ways in which inter-spousal communication shape women's sexual agency, particularly in settings where women's overall autonomy and agency are low.

The research that does exist on sexual agency suggests that even talking about sex to their partners is difficult for many women where gender norms dictate that women remain ignorant of and unwilling to discuss sexual matters (Gupta 2000; Wolff, Blanc et al. 2000). Moreover, education and employment – the most-often examined enabling factors for non-sexual agency – may not enhance sexual agency. Some authors find a weak effect of education and employment on risks of coerced sex (Wolff, Blanc et al. 2000; Santhya, Haberland et al. 2007) while others find that neither education nor employment have a significant impact (Erulkar 2004). Santhya et al. (2007) suggest that life stage and relationship factors such as duration of marriage, pregnancy status or relationship with the husband are stronger determinants of sexual agency (measured in terms of unwanted sex) than are education or employment status.

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Our paper addresses these gaps by analyzing the prevalence of and factors associated with sexual agency among young married women in Bangalore, India. In particular, we focus on the role that husband's perspectives and opinions play in shaping women's agency. In contrast to much of the research conducted on inter-spousal relations and communication, we use data collected from *both* wives and husbands, rather than relying on women's reports of their husband's preferences and behavior.

Setting

The data on which this paper is based are part of a multi-year study on gender, power and reproductive health conducted from 2002 to 2008 in Bangalore, the capital city of Karnataka state in southern India. Data were collected from two low-income communities in Bangalore. These working-class communities, classified as "slums" by the Bangalore municipal government, were originally established in the mid-twentieth century when trade and employment opportunities drew large numbers of migrants from the neighboring state of Tamil Nadu into Bangalore (Nair 2005). These communities have continued to grow and are now home to almost one-fifth of Bangalore's population. A network of 55 government primary health centers serves these communities.

Data and Methods

Women were recruited into the study through outreach at local health centers and through door-to-door visits, and their husbands were recruited after women consented to them being contacted. Eligibility criteria for female study participants included being married and between 16 and 25 years of age, fluent in either Kannada or Tamil, the local languages, and anticipating residence in the community for the duration of the 2-year study. Consent was sought from all participants before entering the study. Guardian consent was obtained for women under 18 years of age.

Of the 3527 women approached, 1707 (48%) were eligible to participate, 938 (55%) consented to the interview and 744 completed the baseline survey. Enrolled women participated in face-to-face interviews conducted in private rooms in the health center by trained interviewers. The survey collected information on socio-demographics; household and relationship characteristics; several measures of women's agency and empowerment; women's and households' economic activity and assets; sources of social support; and reasons for and responses to marital conflict. Participants then received sexual health education and optional clinical examination and lab testing.

The analyses in this paper will be based on a subset of women from whom consent was obtained to interview their husbands. The eventual dataset includes detailed information on 187 wife-husband dyads, with husbands and wives interviewed separately. Both were asked a series of questions relating to the various dimensions of agency (husbands were asked these questions as they related to their wife's behavior, while women were asked as it relates to their own behavior). Information collected on sexual agency included the degree to which the husband felt it appropriate for the wife to discuss sex with them, initiate sexual relations, express a desire to *not* have sex, whether the husband felt it was appropriate to insist on having sex over the objections of his wife, and a number of additional questions, including experience with domestic violence.

Analytical Approach

We propose to explore the degree to which women's sexual agency is influenced by their husband's perception of the inter-spousal relationship in a number of ways. Our analyses will begin with an assessment of the differences and similarities between the perspectives of husbands and wives, focusing on three key aspects of sexual agency: whether the wife has the freedom to discuss sex with her husband (and whether the husband feels this appropriate), whether she can refuse sex, and whether she is able to initiate sex with her husband. This comparison will be based primarily on a bivariate analyses of the relationship between the couple's independent reports on each of these questions, and through the construction of a sexual agency variable created by combining these three variables. We will also be able to examine the degree to which there is concurrence in the degree of agency reported by the wife and her husband.

In addition to the bivariate analyses, two distinct sets of multivariate analyses will be conducted to further explore the relationship between husband's perceptions of their wives agency and the degree of agency reported by their wives. In the first stage, the dependent variable will be the degree of concurrence between husband and wife on each of the sexual agency questions described above (the variable will be a three category variable, with the first category being husband agreed, wife disagreed, the second category being both agreed, and the last being wife agreed, husband disagreed). The key independent variables of interest will include both the husband and wife's education level, a household asset score, whether the wife had worked outside the home, whether she had received vocational training prior to marriage, and a series of measures of marital intimacy (whether the couple knew each other prior to marriage, whether the marriage was arranged, whether the woman considered her husband to be her primary source of social support, and whether they couple lived in a household that included either of their parents).

The second stage of the multivariate analyses will explore the role of husband's characteristics and preferences in shaping their wives' level of sexual agency. In this case, the dependent variable will consist of the wife's aggregate agency measure described above, with the key independent variables of interest being the individual answers husbands provided to each of sexual agency questions, in addition to the

variables list above. If couple's answers to the questions on agency are too highly correlated to permit this type of analysis, only the first stage will be conducted.

Together, these analyses will provide important insight into an under-researched topic with significant implications for women's reproductive health. This is particularly true for women in this context, where they represent a particularly vulnerable group.