## Chapter 1

## Introduction

The centrality of both women and men in the traditional Islamic family unit derives from the essential complementarity of their customary roles and responsibilities (Rugh, 1984). Men are seen as the protectors of the family and must provide for its maintenance. Women, on the other hand, are absolved of the burden of providing for their own and their family's economic needs since they bear the responsibility of procreation and rearing of a generation (Hashemi, 1981; Rugh, 1984; Moghadam, 1992).

Although this complementary gender-based division of responsibilities is likely to have the purported effect of sheltering women, it undoubtedly also mediates women's access to the outside world, and legitimizes a decision-making process that places the right to make key decisions affecting women's lives in the hands of male kin. Socialization in this tradition is unlikely to encourage in women a desire to take direct control of their own lives and resources without the intervention of male kin. A desire for autonomy, especially outside the domestic realm, is more likely to be seen as a threat to the assigned mutuality of male and female roles.

Despite the apparent rigidity of traditional roles, however, there are several reasons to expect a large amount of variation in female autonomy even within Islamic society. Female autonomy is not unidimensional (Mason, 1987), and even the traditional role assignment, which gives women little control over most spheres, is compatible with at least some female autonomy and control within the domestic sphere. Further, differences between women in socioeconomic status, education levels, and exposure to nontraditional thinking are also likely to translate into differences in female autonomy in both the domestic and the nondomestic sphere (Rugh, 1984). In addition, the imperatives of changing economic and social conditions, often outside the control of individual family units, may require women to take on responsibilities outside their traditional realm. These factors suggest that there should be variation in the degree of autonomy desired and exercised even within the system of complementary traditional roles.

Additionally, there are also likely to be situations, such as when women are abandoned or widowed, wherein the mutual system of obligations that is the foundation of the traditional complementarity of gender roles is violated, forcing women to fend for themselves and their children. Thus, even within a social system in which female autonomy may not be a culturally coveted virtue, we are likely to find a large amount of variation in autonomy, both because overall autonomy levels will vary across women according to individual circumstance and opportunity, and because autonomy is multidimensional so that women could exercise autonomy in some spheres and not in others.

This study explores the multidimensionality of female autonomy in Egypt by defining three different measures of autonomy based on questions asked in the 1988 Egypt Demographic and Health Survey. Using empirical tools of analysis, the extent of variation in each dimension is modelled and evaluated in terms of several modernization, economic, and cultural factors. The study also examines whether each of the different dimensions of autonomy is associated with two demographic outcomes in Egypt, contraceptive use and child survival. Whereas a higher rate of child survival is widely accepted as a socially desirable demographic outcome, raising the rate of contraceptive prevalence is a stated objective of Egypt's population strategy (National Population Council, 1991). A positive association of female autonomy with these demographic outcomes even within a setting in which such autonomy may not be considered culturally desirable, will suggest that female autonomy can at least be recommended on desired demographic grounds.

To this end, we define in Chapter 2 the three different measures of autonomy. Two of these measures index the degree to which women believe that they should have a decision-making role within the domestic and the nondomestic sphere; the third measure indexes women's degree of realized autonomy. In Chapter 3 we examine the association of all three dimensions of autonomy with two demographic outcomes, contraceptive use and child survival. The objectives are to determine whether higher levels of autonomy are associated with desired demographic behavior and whether this association varies by the dimension of autonomy being measured. The rest of the study is devoted to examining the factors that help explain variation in the different dimensions of autonomy measured by the three autonomy indices. Thus, in Chapter 4, we use existing literature to develop theoretical hypotheses about the factors that should explain the variation in autonomy levels in Egypt. Variables and methods used to test these hypotheses and results of the multivariate analyses of the three different dimensions of autonomy are discussed in Chapter 5. Finally, in Chapter 6, we summarize the results and evaluate their implications.

Egypt provides an ideal setting to study the interrelationships between tradition, development, demographic behavior and female autonomy. Egypt is an Islamic society with relatively rigid norms about gender roles (Rugh, 1984) combined with relatively high levels of fertility, infant mortality and adult illiteracy. Simultaneously, it is a country with a medium level of economic development and urbanization. In 1988, Egypt had a per capita income of U.S.\$660 and was ranked among the middle income economies of the world (World Bank, 1991). Half of its 50.2 million population lived in urban areas. However, the total fertility rate was 4.5, the infant mortality rate was 88 per 1000 live births, only 38% of married women of child-bearing age were using contraception, and about two thirds of adult women were illiterate.