

Examining middle-class women's reproductive agency in collective and patriarchal settings of urban northern India

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Abstract

This qualitative study explores how urban middle-class north Indian women from the states of Haryana and Delhi practise their reproductive agency within collective and patriarchal settings. Snowballing was used to recruit participants; 45 married urban middle-class women who have children were interviewed. Analysis was conducted using Pierre Bourdieu's concept of capital. Many studies take the view that Indian women's reproductive choices are controlled by their husbands and in-laws, suggesting that women are oppressed and without agency. However, this study indicates that women do receive support within their affinal families that influences their choices but does not necessarily indicate they are oppressed. These women, while practicing their agency, aim to achieve their interests through strategies of resistance and/or negotiation within the patriarchal settings of their affinal families. Their ability to both negotiate and resist suggests that agency is at once transformative and reproductive.

Keywords

Reproductive agency, capital, patriarchy, gender, Indian women, women's empowerment, bargaining with patriarchy, benevolent patriarchy

Introduction

In this article I discuss how urban married women in northern India practise their reproductive agency within highly patriarchal and collective settings. I argue that, while making choices, women both strategically negotiate with and/or resist patriarchy to attain desired outcomes¹. In this process of decision making, they accumulate social, cultural, and symbolic capital.

This analysis draws on qualitative research into married women having children living in the urban regions of Delhi and the Yamuna Nagar district in Haryana. These two states provided a useful site to examine how women's reproductive agency operates in highly patriarchal environments, as women in these regions are often under great pressure to produce a son. High rates of female feticide and infanticide are evidence of the patriarchal nature of these states where sons are preferred over daughters². Haryana, for example, has the lowest female child sex ratio in India, with 834 female children per 1,000 male children (Indian Census, 2011)³. Delhi also ranks low in its female child sex ratio, with 871 female children per 1,000 male children (Indian Census, 2011).

To obtain better insight into how women practise their reproductive agency by accessing different resources to achieve desired outcomes, I employed Kabeer's (1999) concept of three inter-related dimensions: resources, agency, and achievements. Resources⁴ can be understood as the access that women have to various material, social, and human resources within their socio-cultural environment (Kabeer, 1999). Access to resources enables women to exercise their agency (Kabeer, 1999; Malhotra & Schuler, 2005), and the participants in this study emphasised the importance of access to mainly social and human resources. This access was typically articulated in terms of the support (childcare, domestic help, and financial) they

received from their husbands and mothers-in-law, which aided them in making their choices.

Kabeer (1999) discusses the second dimension of agency as both negotiation within and resistance to patriarchy. Similar to Kabeer (1999), Unnithan-Kumar (2004) suggests that negotiation and resistance are important components of women's reproductive agency. This suggests that agency is both transformative and reproductive (Hays, 1994). Transformation can be understood as resisting patriarchal structures, leading to women's empowerment (Batliwala, 2013, 1994; Kabeer, 1999), whereas negotiation can be understood as women's bargaining skills within patriarchy. Women living in patriarchal societies strive to achieve their goals by practising their agency within the patriarchal constraints of family and culture (Chaudhuri et al., 2014). This can be understood as making 'patriarchal bargains', as suggested by Kandiyoti (1988). Women try to maximise benefits for themselves within an oppressive system and thus select what they find appealing or unappealing. In this paper, I discuss women's reproductive agency in terms of both a patriarchal bargain and resistance to patriarchy, using women's accounts to demonstrate both compliance and resistance.

Kabeer (1999) discusses the third dimension of achievements as outcomes of decisions. I outline outcomes of the decision-making process in relation to women's empowerment and achievement of personal benefits within patriarchal constraints. In this research context, these benefits could be understood as support these women receive from their husbands and mothers-in-law, and recognition of being ideal wives and good daughters-in-law within their families and social networks.

Theoretical framework

Social oppression of Indian women is often documented in feminist literature as women possessing low decision-making power in their families and societies (Jan & Akhtar, 2008). Similarly, Indian women's reproductive agency in relation to decisions around family size, family planning, and sex selection is usually deemed to be under patriarchal control; that is, women are generally seen to be pressured by their husbands or affinal family members, especially female in-laws (Barge et al., 2003; Char et al., 2010; Gupta, 2010, 2000; Gupte & Borkar, 1987; John et al., 2008; Puri & Adams, 2011). However, the argument that women are usually oppressed while making reproductive choices is problematic, as it portrays women as victims: repressed, without agency, powerless, and a homogeneous group. It is important to realise that these ideas represent a monolithic and simplified version of women's experiences (Cornwall, 2003; Patel, 1999), ignoring various socio-cultural aspects such as their class or regional locations. Furthermore, this argument frames decision making as a simplistic process, thereby minimizing the roles of women. Instead, I suggest that decision making is a complex and multilayered process in which women both negotiate and resist to achieve their interests. This complex interaction is explored in this article.

It is important to note that the participants in this research came from collective and patriarchal settings. India has a collective culture in which relationships and family values play a crucial role in determining social behaviour (Guess, 2004; Konsky et al., 1999). In a collective culture, socialisation from birth is oriented toward ensuring individuals become 'integrated into strong, cohesive ingroups' (Hofstede, 1991, p. 51). Moreover, Indian society is largely patriarchal. Patriarchal and patrilineal joint families are typical in most parts of India, and women within these family settings usually join the husband's family after their marriage (Desai & Andrist, 2010; Shah, 1998). Patel (1999) highlights Indian women's agency in relation to class structure and culture and states that women negotiate and resist in a culturally

appropriate way that will not negatively impact their family lives. This could be understood as women bargaining within patriarchy (Kandiyoti, 1988) and reflects the influence of collective culture on women's lives.

However, women might not always consider patriarchal power and control as a form of oppression, as these power structures are often hidden behind ideas of virtue, love, and care. In their accounts, participants articulated these ideas by describing the power and control of their husbands and mothers-in-law as a form of love, care, and support. Mothers-in-law in India possess a great amount of patriarchal power over their daughters-in-law through their sons. As mothers-in-law also have the capability to replace a patriarch in the absence of a suitable male, I place mothers-in-law under the category of benevolent patriarchs in this article. This idea of articulating power as love and care could be linked to a benevolent patriarchy in which men are portrayed as loving, self-sacrificing, benevolent protectors, and women are portrayed as dependents (Young, 2003). The power may be obscured by love, care, and virtue but is no less powerful than dominative power (Young, 2003). Acceptance of this idea of benevolent patriarchy benefits women in terms of receiving support for themselves and maintaining harmony within their affinal families. These benefits help women to gain recognition at the social and family level and can be understood as different forms of capital, as suggested by the French sociologist Pierre Bourdieu (1986).

Bourdieu (1986) defined four forms of capital: economic, cultural, social, and symbolic. The main focus of my discussion is on social, symbolic, and cultural capital. Economic capital signifies money, property, or other financial assets that indicate an individual's class and status. Bourdieu explained that, beyond economic capital, cultural habits and dispositions play a crucial role in determining class and status. Cultural capital includes forms of knowledge, skills, education, intellect, and knowledge of religion, traditional rituals, and customs that indicate one's class and status and simultaneously confer status (Weininger & Annette, 2007). In this article, cultural capital could be viewed in relation to contemporary urban middle-class family values; social skills as a mother, wife, or daughter-in-law (giving primary preference to their families, earning and contributing to the family's finances, and maintaining harmony and peace within the family); providing a good education and other opportunities to their children; gender roles; and the gendered division of labour.

Bourdieu viewed social capital as a resource within one's network that is used by social actors to achieve their interests and to socially position themselves among their acquaintances (Ihlen, 2005). Social capital signifies having good networks, social connections, relationships, and support amongst family, friends, and acquaintances that enhance quality of life at different levels, such as professional, social, and individual (Bezanson, 2006). Owing to the feminist nature of the study and to women in India being considered 'paraya dhan' (someone else's wealth)⁵, it becomes quite important to understand, investigate, and unpack the social capital available for them within their matrimonial families. In this paper, the support women received from their mothers-in-law and husbands within the context of their prenatal and post-natal phases is understood as social capital. These forms of capital further lead to the accumulation of symbolic capital: prestige, honour, and reputation (Bourdieu, 1986). Symbolic capital, in this article, is mainly discussed in regards to having a son, a strong and supportive family, and a healthy marital relationship.

In this paper, I build feminist links with Bourdieu's concept of capital. My research is focused on middle-class urban northern Indian women; the different capitals that participants accumulate are class based. This aids in understanding that women are not a monolithic category and that they have the ability to gain various advantages even while operating within patriarchal constraints. In addition, owing to the patriarchal and collective Indian settings,

capital is mainly discussed by participants within their affinal family settings. Women join their husbands' homes after marriage; they are considered 'paraya dhan' from birth. This suggests that girls belong to their fathers' and later their husbands' families, and parents perform the role of caretakers until the daughters get married (Jain, 2006). After marriage, women are expected to prioritise the needs of their affinal families, and in turn these families look after them. I will highlight how women use this sense of belonging within their affinal family to gain support for themselves. The material, social, and human support received by these women is discussed as social, cultural, economic, and symbolic capital, and, as noted earlier, access to resources enables women to practise their agency. This signifies that the support women receive influences their choices.

Methodology

This qualitative study was carried out within the urban regions of Delhi and the Yamuna Nagar district in Haryana in 2010 and 2011. The study was approved by the Human Ethics Committee of the University of Canterbury, Aotearoa/New Zealand, prior to fieldwork commencing. Participants were married women from urban middle-class backgrounds with children; the women had either had an abortion or their first child was a daughter. The selection of participants on this basis allowed for examination of these women's experiences of son preference, and how – in such highly patriarchal settings – they managed to restore support for themselves while making their reproductive choices. Forty-five women meeting these criteria were recruited via snowballing; I started by asking my acquaintances whether they would be interested in participating (if applicable) and asking them to spread word of my research within their networks.

I conducted semi-structured interviews in the Hindi language. Prior to conducting the interviews, I highlighted the issue of confidentiality to participants verbally as well as via the information sheet. In the following discussion, I have anonymised the identity of participants by using pseudonyms and changing some identifying details, such as their field of work or study. Since I used the snowballing method, failure to change these details may have rendered some respondents identifiable to others involved in the project.

Profile of the participants

Of the 45 participants, 43 were Hindu and two were Muslim. Despite their different religious backgrounds, all participants shared the same ideals around son preference (Unnithan-Kumar, 2010). Moreover, maintaining collective values and garnering support for themselves were also widely articulated in the Muslim participants' accounts.

All participants in this research were from a middle-class background. In India, middle-class is defined as those who have more than the basic necessities of life (food, clothes, and shelter), such as a car, mobile phone, laptop, air-conditioner, and fridge. In urban areas, middle-class groups are no longer limited to upper-caste Hindus but also consist of people from different religions and castes. Sridharan (2011) suggests three middle-class groups in India, based on yearly income: the elite middle class (more than 140,000 Indian rupee [INR] per annum), the expanded middle class (from INR 105,000 per annum), and the broadest middle class (from INR 35,000 per annum). Participants in this study belonged to the expanded middle-class group. Their financial status enabled them to access different reproductive and contraceptive technologies to achieve their reproductive interests.

However, it is important to note that class cannot be classified solely on the basis of economic capital, as cultural capital also plays an important role. Through practising specific cultural values such as providing quality education for children, maintaining a happy family life, being self-sacrificing mothers, and preserving a united family image (Kumar, 2005, 2011; Thapan, 2009), middle-class women are able to gain cultural and symbolic capital within their social networks. These economic and cultural factors contribute to the significant role that class plays in shaping women's reproductive agency (Donner, 2008; Thapan, 2009; Unnitha-Kumar, 2004, 2010).

Participants were from both working and non-working backgrounds. The working participants were either self-employed or working in public or private sectors in the fields of education, medicine, and law; 29 were in the paid workforce, and 16 were housewives. Most of the participants had more than basic education; only two participants finished studying in year five, and the remaining either finished their schooling (16 participants) or were highly qualified (27 participants): Some were doctors, lawyers, teachers, or professors, or had high-level jobs in the government sector.

In total, 25 participants had procured abortions, and 33 participants had a daughter for their first child. The majority of the participants (32) conformed to the modern small-family norm of two children, whereas 13 participants had more than two children. All participants with more than two children described their family size as 'large'. Twenty-one participants lived in a nuclear family, and 24 lived in a joint family on a regular basis, at least in some phase of their lives. Joint family is a common term in India, signifying a household consisting of more than a couple and their children. Usually the couple is accompanied by the husband's parents or unmarried sisters or married/unmarried brothers and their families. It is important to note that the participants who lived in a nuclear family on a regular basis were visited by their extended family members occasionally and also received different forms of support, including both moral support and practical help in the form of child rearing. This signifies the importance of extended family and collective values in the participants' lives.

Findings

The first key finding is that participants, while making reproductive choices, avoided overtly confronting their husbands. This often helped maintain family harmony and meant they were able to garner support from their husbands in child-rearing tasks. Though the participants in this process widely articulated the ideals of collective values, mutual respect, and bonding, they often resisted their husbands' patriarchal authority in a culturally appropriate way by making their individual choices covertly.

Indian mothers are usually the primary caregivers and socialisers of their infants and children. Despite this, only two participants agreed that it should be a woman's sole decision when or when not to have a child, as her workload increases (childcare, domestic work, as well as work outside the home where she is employed). All other participants insisted on collective values and ideas stemming from love, care, and mutual respect while making reproductive choices. They stated that husbands should be consulted while making such crucial decisions. Kitty, a mother of a girl, who was working in full-time paid employment, commented,

I agree that it is the woman's body and she is the one who plays a major role in a child's life from birth to all primary care. Yet, I believe that the decision to have a baby has to be mutual, because, before becoming parents, the two individuals had tied the knot to become one. They should be one spirit dwelling in two bodies.

Women discussed the utopian view of marriage where both husband and wife make decisions

based on collective understanding and mutual respect. Interestingly, participants who said they made independent decisions in one or more of their pregnancies also insisted they believed in mutual decision making. They explained that, because of their personal circumstances, such as financial or health problems, they had to make independent decisions. For instance, Kanu was working and was the key decision maker in her family; she made an individual decision to abort her first pregnancy without disclosing this to her husband. She commented,

Anyhow, the husband should also have the right in the decision-making process. But, when I got married my situation was quite difficult and serious. I knew that I had to make that decision on my own, and I made it. But, it should be a mutual decision.

This suggests that women have the skills to practice autonomy and are empowered to resist patriarchal authority when it is beneficial to them, but in a culturally appropriate way. Most participants often avoided direct confrontation with their husband while making reproductive choices and insisted they were upholding collective values. They claimed they were building a strong couple relationship through mutual respect, mutual understanding, and mutual decision making.

Ironically, even participants who held strong views about mutual respect and decision making did not want their own roles to be minimised within the decision-making process. For example, Mira stated,

This decision [reproductive choices] should be made by both husband and wife. Because only if he is capable of reproducing then only they can have a child together. But, sometimes she might have some problems with her body and [if] he still pressures her, then it is wrong.

Like Mira, most participants articulated collective ideas about reproductive choices in such a way that their own role in decision making would not be minimised. Mira, for instance, clearly rejected the idea of pressuring a woman into pregnancy. She accorded immense importance to respecting women's bodies and views, but she did not articulate similar ideas of ensuring men's physical well-being during reproductive decision making. Interestingly, no participant discussed the possibility that men's physical well-being and health needed equal respect. This could be because women viewed only their bodies as affected in the physical reproduction process. Moreover, this suggests that participants were quite capable of prioritising their reproductive, physical, social, and emotional wellbeing within collective and patriarchal settings. For instance, many of the participants obtained an abortion or adopted a contraceptive method without informing their husband when they doubted he would approve of their decision. The participants rejected their husbands' authority over their bodies and choices covertly because they did not want to affect the harmony of their family lives by confronting their husbands directly.

At the same time, participants viewed their husbands as equally responsible for children's social upbringing, and not just as mutual decision makers in the reproductive decision-making process. They stated that if both of them shared childcare responsibilities, then both should have the right to decide when to have a child and when not. An example is Tara, a mother of two children, who held a very high position in the public sector. She provided a clear exposition of these shared responsibilities:

A woman's body is hers, but not all men are unsupportive. You need a lot of physical and mental support from men [husbands] as you cannot bring up the children on your own. One needs a husband's proper support because if we [wives] make decisions on our own then it won't work. It should be a mutual decision and not a lady's sole decision. Because they both have to live together and share responsibility together except for the physical [the gestation period, labour pain, and breastfeeding]. Other things like money and psychological support are needed, so decisions should be mutual. It shouldn't be a man's or a woman's sole decision only. Otherwise it will be difficult.

Tara highlighted the difficulties women face in the absence of their husbands' support. She also criticised generic gender stereotypes regarding men's unsupportive attitudes and focused on men also having paternal responsibilities, particularly the importance of financial support received from men to raise children. Many other working participants shared similar ideas of men as key earners. For example, Sonia, despite earning a handsome salary, mentioned that it is solely a 'father's responsibility' to bear children's financial expenses, such as providing good schooling and education.

A few of the participants mentioned that women should work to support their husbands and not challenge their authority or supremacy. For example, Anu has one daughter, is highly educated, and works. She mentioned that 'One [a woman] should not feel that I have started working and now I can overshadow my husband ...'.

The importance of families was prevalent in the stories of all the participants. Many had rejected promotions at work so they could balance their family and work lives more easily. On the other hand, many participants sought to improve the family's well-being and provide better lives for their children by starting paid jobs or by setting up their own businesses.

Both working and non-working participants supported the traditional ideology of men being the primary earners and women looking after the domestic sphere. For instance, Isha, with one child, is highly qualified and a housewife. She noted that having a job boosts confidence but did not believe it to be the best option for her as it would be difficult to create a balance between her family and work. Neha, also a housewife, shared similar ideas. She commented that she felt good that she was not working, as working women cannot give quality time and attention to their children. In relation to having her third child she said, 'I just had to give birth. Children are brought up [financially mainly] by their dad's efforts'. Neha gave importance to men's ability to financially support the children in the context of reproductive decision making. She made a clear distinction between men's and women's roles, and explained that the social upbringing of children is a man's primary role.

The second key finding reveals how most of the participants developed strategies to receive support from their mothers-in-law in domestic and childcare tasks. The participants continued to accept help from their mothers-in-law even when they were not fond of them, as it alleviated their work burden and made their lives easier.

This support was most often in relation to child-rearing tasks; however, a few of the women stated that their mothers-in-law were quite unsupportive and exploitative. The participants who did not receive support from their mothers-in-law rejected their dominance overtly as they did not find any benefit for themselves in this relationship. For example, Kanu and Tanya both were working and were living in nuclear families. Kanu, on the birth of her third daughter, and Tanya, on the birth of her second daughter, preferred to receive support from their maternal family rather than from their mothers-in-law. Each was scared of receiving ill treatment from their mothers-in-law as a punishment for producing only daughters. Tanya mentioned that her mother-in-law always gave her a hard time, especially after the birth of her daughters; her mother-in-law would taunt and curse Tanya for only producing daughters. As a result, Tanya preferred to stay away from her. Despite this, Tanya was able to provide a good upbringing for her daughters.

Kanu also discussed her mother-in-law's dominating and exploitative nature when she gave birth to her daughters. She stated,

I was wondering that maybe my mother-in-law would not even give me food to eat, so I called my brother's wife. I did not call my mother-in-law the third time because I saw her reaction the second time. She [her mother-in-law] used to say that there was no point of putting desi ghee [clarified butter] in panjiri [a post-natal Indian diet]; rather it should be cooked using Dalda [vegetable butter]. At the third time [when her third

daughter was born] I thought that it was a daughter again so they would treat me badly. I was scared that she might kill my daughter. Once she gave opium to my second daughter. She was quite young and was crying, but she [mother-in-law] would not even let me buy any medicine.

The mother-in-law compromised the participant's post-natal diet because Kanu had borne a daughter. Post-natal diets in India are given to the new mother so she can recover swiftly and become healthy and strong. These diets also make a mother's milk richer in nutrients, enhancing the health of the infant. Since a daughter's health is often of lower value than that of a son's, Kanu's mother-in-law did not provide her with a quality post-natal diet. This was a form of punishment towards Kanu and her daughter.

Even worse, Kanu's daughter was poisoned. Kanu managed to save her by buying medicine for her. Interestingly, she never told her husband about this incident, as she was scared of her husband severing relations with his mother. This is another example of women considering collective family values, even when they live in a nuclear family, to maintain peace and harmony in their families. Furthermore, Kanu did not abort her third pregnancy out of fear of her mother-in-law. She had the ability to save her second daughter and give birth to her third daughter by excluding her mother-in-law. This suggests that some women are able to challenge exploitative power relations and patriarchal ideologies. However, participants who did not get support from their mother-in-law considered themselves unlucky and felt envious of those who had a supportive mother-in-law.

Most study participants considered their mothers-in-law to be very supportive, even when the participants gave birth to daughters. Kitty, for instance, was living in a joint family and explained that she and her family (in-laws) were eagerly expecting a son, as her elder sister-in-law already had a daughter; but then Kitty gave birth to a daughter:

I had my daughter in a caesarean operation, and my mother-in-law took very good care of my daughter and she never said anything [criticism for reproducing a daughter]. I said to her once 'sorry, mummy, you wanted to have a grandson, but I couldn't give you one'. She kissed my forehead and said 'no worries, daughter, our granddaughter is also very lovely'.

In Kitty's case, unlike Kanu and Tanya, her mother-in-law showed her support by providing post-natal care to her and her daughter. Simultaneously, Kitty presented herself as a concerned daughter-in-law by discussing her desire to produce a son to provide a successor to her family and her feelings of guilt when she did not do so. Interestingly, in her interview, Kitty mentioned that she was quite educated and was aware that the sex of the child is determined by male chromosomes and not the female. This indicates the dominance of traditional popular views, which can result in even educated women, who are aware of the process of sex formation of the foetus, holding themselves responsible for determining the sex of the child.

If women failed to accommodate these dominant ideas, it might affect the extent of the help received from their mothers-in-law. For instance, Kirti, a mother of a daughter, was living in a joint family. She often had conflicts with her in-laws, especially her mother-in-law, because she overtly resisted their dominance over her life choices. Because of this, she was often criticised by her affinal family members and within her social networks as lacking cultural values and being unable to respect the elderly. After the birth of her daughter, she neither expressed a desire to have a son nor grief at not producing a son. Both she and her husband wanted to challenge the son-preference ideology by setting an example within society to demonstrate that daughters are equal. By showing culturally inappropriate behaviour, Kirti was not able to garner much support for herself from her in-laws, although they continued to pamper their granddaughter. An important point to note here is that although Kirti and her husband mutually decided to not have more children, she had to face much criticism from her in-laws, and her

relationship with them was affected, whereas her husband's relationship with them was not. This shows that women are socially expected to adhere to the traditional gender roles of a submissive and obedient daughter-in-law.

Conversely, Kitty, by showing a culturally appropriate attitude, was able to gain support for childcare and for herself as well as acknowledge the power her mother-in-law possessed over her and the reproductive responsibilities she had towards her affinal family. For example, both Kitty and her husband mutually decided to have a baby after a few months of marriage. Prior to Kitty getting pregnant, her mother-in-law had been keeping track of her period dates. This reveals some kind of control, at least insofar as her mother-in-law was privy to her reproductive cycles and as such pressured her to reproduce as soon as possible. However, Kitty portrayed her mother-in-law as supportive, loving, and caring, suggesting that power relations within patriarchal and collective settings can be concealed under love, care, and virtue. In some cases, accepting a mother-in-law's dominance can be beneficial to the daughter-in-law.

Many of the participants did not share feelings of love and care for their mothers-in-law; rather, they mentioned using collective values to receive their support. Thus, Riya, a mother of a girl, was working and living in a nuclear family. She asked her mother-in-law to help her in bringing up her daughter and invited the mother-in-law to her house. Her mother-in-law supported her in domestic chores and in the up-bringing of her daughter. Riya clearly stated that she did not like her mother-in-law because of her attitude; nevertheless, she did not hesitate to accept support from her. All of her other sisters-in-law had sons and because of this, her mother-in-law discriminated against her. She said,

When my daughter was born, our maid said congratulations to my mother-in-law. She said it would have been better if it would have been a boy. I immediately interrupted her and said "you don't say like this to anyone because we have to bring her up". After that she hasn't said anything in front of me.

Riya resisted the patriarchal notion of son preference by confronting her mother-in-law but continued to take support from her. This demonstrates the importance of support from her mother-in-law, albeit her beliefs and values differed from Riya's.

Even non-working participants preferred to receive support from their mothers-in-law. Ruchi, a housewife, mentioned that she disliked her mother-in-law. In spite of this, she planned her pregnancy in such a manner that her mother-in-law would be able to provide her support. She stated,

My mother said to me that it was intelligent to have a kid at that time, as my mother-in-law would help me in raising my children, which won't be the case after a few years. Because my brother-in-law would get married too, and she would have to look after his children as well. She said that if I would have my second child at that time then I did not have to do anything – not to give the child a bath or clean them, or to take them to the toilet – as my mother-in-law would do everything for me.

These accounts suggest that women develop strategies to negotiate and resist within patriarchal and collective constraints in a manner that ensures they can still fulfil their interests. They can gain social support and respect within their families and social networks by pretending to be good daughters-in-law and ideal wives. They aim at keeping their family together and maintaining harmony, even being nice to their mothers-in-law despite not being fond of them. This allowed them to receive support for themselves and their children.

Discussion

The women in this study generally upheld the major middle-class values of maintaining family harmony and family image (Thapan, 2009) while making their reproductive choices. As such,

participants preferred to avoid direct confrontation with their husbands while practising their individual reproductive choices. This is quite common in patriarchal and collective settings (Silberschmidt, 1992). Avoiding direct confrontation with husbands or posing a direct challenge to patriarchal structures could be understood as a strategy to maintain harmony and avoid conflict within their families. Happy and united families are a matter of pride, prestige, honour, and recognition among the middle-class and thus bring cultural and symbolic capital for middle-class women within their networks.

However, avoidance of direct confrontation does not imply that participants are incapable of resistance. Rather, most participants typically resisted at a covert level to achieve their reproductive interests. For example, Kanu made an individual choice to abort without informing anyone. It is important to reiterate that resistance does not necessarily indicate direct resistance; it can be covert. Scholars in the field of Indian feminist studies have also mentioned women resisting secretly. For example, Agarwal (1994) and Thapan (2009) note that women in the Indian subcontinent often practise their choices secretly from their husbands or in-laws. Agarwal (1994) argues that the absence of overt protest does not mean 'an absence of questioning inequality' (p. 431), nor does it mean women cannot resist or are unable to empower themselves through covert resistance. The transformation of patriarchal structures is still taking place to an extent, as women challenge patriarchal authority over their bodies and their fertility. Further, whether resistance is covert or overt, it provides women with a feeling of self-worth (Thapan, 2009, p. 162). 'Both silence and words can be a means of resistance and protest': women will not always show their resistance openly (Agarwal, 1994, p. 427). Moreover, by resisting covertly, participants were able to simultaneously gain cultural and symbolic capital and achieve their reproductive interests within patriarchal and collective confines. Therefore, covert resistance is a way for women to bargain within the patriarchy while achieving their desired outcomes.

Covert resistance helped the participants gain cultural and symbolic capital by maintaining a happy and united family image; they were also able to accumulate social capital by receiving support from their husbands in child-rearing tasks. By doing so, women continued to make their husbands feel that they preferred to make mutual decisions most of the time. This challenged one of the most popular stereotypes in patriarchal settings, that men do not help their women in any kind of domestic or childcare support (Moser, 1993). Rather, it is common for Indian men to support their working wives in childcare activities (Chandra et al., 1995; Rao, Apte, & Subbakrishna, 2003). However, in my study, husbands also shared childcare duties with their non-working wives. Both working and non-working women appreciated the help as it decreased their work burden. This provided a benevolent image of their husbands, and women spoke of their husbands as very nice and helpful. Interestingly, men performing domestic duties or childcare tasks are often viewed as doing so as a favour to women. In contrast, participants viewed women generating financial earnings more as a woman's responsibility towards their families than as a favour to their husband. This is because, socially, professional women within contemporary Indian society are constantly expected to continue to perform traditional gender roles such as undertaking all household chores (Kumari, 2010; Mathu & Jain, 2008)⁶.

This scenario of husbands supporting their professional wives could be understood as benevolent patriarchy at the socio-cultural level: a good husband and father who performs his duties towards his family (Shepherd et al., 2011; Young, 2003) and allows his wife to work (Ramu, 1987). Men whose wives are working enjoy economic benefits and an image of being benevolent and open-minded (Ramu, 1987). Young (2003, p. 6) argues that, under this form of patriarchy, power operates under the mask of 'virtue and love'. This is similar to pastoral power, as it might appear gentle and benevolent both to the patriarch and to those who are

under its sway, but it is no less powerful than dominative power (Young, 2003). Moreover, the loving, caring, and supportive husbands provided cultural, symbolic, and social capital to the participants.

Strengthening a woman's economic status often improves her situation and empowers her, albeit simultaneously intensifying the demands on her (Batliwala, 1994; Byrdon & Chant, 1989; Gupte & Borkar, 1987; Sen & Grown, 1985). Participants with supportive husbands were able to compartmentalise their lives into traditional gender roles and work responsibilities and were better able to juggle home and work pressures. Moreover, they appeared to conform to cultural expectations; women who place too much value on their careers can find their social networks raising questions about their commitment to ideal motherhood (Roopnarine et al., 1992). Being a self-sacrificing mother is central to Indian middle-class values, and adhering to this norm allowed participants to gain cultural and symbolic capital (Radhakrishnan, 2009). This is because women operating within traditional feminine roles often accumulate cultural capital, which is then converted into symbolic capital (Lawler, 2000; Thorpe, 2009). This illustrates that women are not merely operating within the gender hierarchy. Rather, they bargain within contemporary patriarchal structures in a manner that will alleviate the additional burdens on them and help them achieve a quality harmonious family life.

A similar pattern of resistance, benevolent patriarchy, and bargaining within patriarchy was evident where women received support from their mothers-in-law. For example, married Indian women are deemed to derive status from having a son; women who have female children do not usually get any help from, and are ill-treated by, mothers-in-law (John et al., 2008; Sandhya, 2009; Sudha & Rajan, 1999). Participants who were ill-treated by their mothers-in-law at the birth of their daughters overtly confronted them as they did not see any benefits (household and childcare support) from enduring this behaviour. This also signifies their ability to empower themselves by challenging dominant and oppressive structures within patriarchal and collective settings. On the other hand, participants who received support from their mothers-in-law did not overtly confront their mothers-in-law and tried to have healthy relationships with them.

A few of the participants said their mothers-in-law were very loving and caring even when they possessed at least some of kind of power over their lives. This could be related to power relations in benevolent patriarchal family settings where power is accompanied by love, care, and virtue (Young, 2003). Moreover, by accepting this dominance as love and care, the participants were able to restore support for themselves and their children; Kitty, for example, gained cultural, social, and symbolic capital. Kitty and other participants similar to her were viewed as having a strong sense of collective family values and respect, which brought recognition to them as ideal daughters-in-law. By contrast, participants who overtly challenged their mother-in-law's authority were usually criticised within their families and social networks for being a snob, creating disturbances in their family, and lacking a sense of cultural values. Moreover, most of the time, they were not able to receive much support for themselves compared with other participants. Women who adhered to traditional gender roles usually received support and were treated benevolently within their families and social networks; those who did not often faced resistance and criticism (Kabeer, 1999; Shepherd et al., 2011).

This brings me to the point that femininity is class-based; women from different class backgrounds respond to their situations according to their class positioning (Skeggs, 1997). Middle-class women understand this traditional gendered division of labour and can use certain aspects of their femininity, such as being ideal wives, mothers, and daughters, to form an important part of their cultural and symbolic capital by prioritising their family and

domestic chores over paid work⁷. In this process of choice making, they empower themselves and strategize and negotiate within the patriarchy.

Conclusion

This article suggests that women develop strategies and resist in both culturally appropriate and non-culturally appropriate ways within their social settings to meet their interests. They often choose to resist in a culturally appropriate manner because this helps them gain cultural, social, and symbolic capital. The covert resistance of women should never be interpreted as meaning they are subordinate, oppressed, or unable to practise their agency. Subordination implies 'authority, control, and coercion' (Connell, 1987, p. 96–97). Instead, participants tried to bargain with different forms of patriarchal control and used the resources and available social system for their benefit. Therefore, in contrast to what has been suggested in previous studies (Barge et al., 2003; Char et al., 2010; Gupta, 2010; Puri et al., 2011), women should not always be considered oppressed and subordinated. Women are a diverse group; a range of factors, such as their class, education, and urban or rural residency, affect their decision-making processes. This article explains how educated middle-class north Indian urban women have used their cultural skills of resistance and negotiation, and access to resources, to meet their needs and to facilitate their empowerment.

This study is also relevant to the Indian diaspora community in Aotearoa/New Zealand, because similar patterns, family dynamics, and patriarchal issues might be visible in women's negotiation and strategising skills while making reproductive choices in this context. Aotearoa/New Zealand is increasingly multicultural, with new immigrants arriving, and the Indian community forms a large part of this group. Son preference remains prevalent within the Indian diaspora communities in the UK and the USA (Purewal, 2004; Puri et al., 2011). Therefore, it is quite likely that Indian women living in Aotearoa/New Zealand face similar challenges of upholding the social expectations contained in certain cultural values and the resultant pressure to produce a son. This research therefore opens opportunities for further research within Indian diaspora communities in Aotearoa/New Zealand.

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Notes

- 1 Desired outcomes here refer to the benefits that women can derive through the choices they make within their socio-cultural environment.
- 2 Female infanticide refers to the killing of female infants after their birth. This practice is the consequence of patriarchal settings in which male heirs are more highly valued than daughters. This is largely because sons provide old age support to the parents and bring their bride into the family, whereas daughters join their husband's family after marriage, and also because of practices such as dowry. This practice of preferring male children over female is called son preference. With the introduction of reproductive technologies, infanticide has largely been replaced by female feticide. However, feticide is illegal in India under the Prenatal Diagnostic Techniques Act 1994. Despite the legal provisions, the laws remain ineffective at curbing the problem.

- 3 India has the second lowest female child sex ratio in the world after China. India is among those few countries where the female child sex ratio is counted as the number of females per 1,000 males in the age group 0–6 years. Therefore, sex ratio is a useful indicator to assess the relative excess or deficit of men or women in a given population at a point in time.
- 4 Access to resources is crucial for women's empowerment. However, as mentioned earlier, empowerment is a process in which challenging patriarchal ideology remains of paramount importance.
- 5 That is, parents are just caretakers of their daughters until they get married, and wives belong to their husbands' families.
- 6 This phenomenon is quite common in contemporary India, where matrimonial advertisements in the newspaper under the 'Bride Wanted' section can be seen asking for brides who are a perfect blend of modern and traditional values. By modern, they mean an educated and working woman who can speak fluent English, and a sense of being able to conduct herself well in different social gatherings. Tradition indicates that the bride should have the basic knowledge to perform routine domestic chores and should respect and look after her in-laws. These advertisements are usually placed by middle-class families.
- 7 Studies on Indian working class women, such as Thapan (2009), have noted that these women's husbands often have drinking problems and do not work. These women work for the financial survival of their families. This study involves middle-class women, for whom working is not a matter of survival.

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