

Women's Empowerment on Modern Contraceptive Use in Poor-Rich Segment of Population: Evidence from South Asian Countries

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Abstract : Background: Less than half of women in South Asia (SA) use any modern contraceptive method which leads to a huge burden of unintended pregnancies, unsafe abortions, maternal deaths, and socioeconomic loss. Women empowerment plays a pivotal role in improving various health seeking behaviours, including contraceptive use. The objective of this study to explore the association between women's empowerment and modern contraceptive, among rich and poor segment of population in SA. Methods: We used the most recent, large-scale, demographic health survey data of five South Asian countries, namely Afghanistan, Pakistan, Bangladesh, India, and Nepal. The outcome variable was the current use of modern contraceptive methods. The main exposure variable was a combination (interaction) of socio-economic status (SES) and women's level of empowerment (low, medium, and high), where SES was bifurcated into poor and rich; and women empowerment was divided into three categories: decision making, attitude to violence and social independence. Moreover, overall women empowerment indicator was also created by using three dimensions of women empowerment. We applied both descriptive statistics and multivariable logistic regression techniques for data analyses. Results: Most of the women possessed 'medium' level of empowerment across South Asian Countries. The lowest attitude to violence empowerment was found in Afghanistan, and the lowest social independence empowerment was observed in Bangladesh across SA. However, Pakistani women have the lowest decision-making empowerment in the region. The lowest modern contraceptive use (22.1%) was found in Afghanistan and the highest (53.2%) in Bangladesh. The multivariate results depict that the overall measure of women empowerment does not affect modern contraceptive use among poor and rich women in most of South Asian countries. However, the decision-making empowerment plays a significant role among both poor and rich women to use modern contraceptive methods across South Asian countries. Conclusions: The effect of women's empowerment on modern contraceptive use is not consistent across countries, and among poor and rich segment of population. Of the three dimensions of women's empowerment, the autonomy of decision making in household affairs emerged as a stronger determinant of mCPR as compared with social independence and attitude towards violence against women.

Keywords : women empowerment, contraceptive use, South Asia, women autonomy

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