Chapter 7

SOCIAL DYNAMICS OF WOMEN’S HEALTH
Whether it was the local novels or the research studies, those who attempted to grasp the dynamics and transition of the study villages and its neighbourhood, focused mostly on communities and households (Amir Ali, 1960; Biswas, 1976; Sen and Sengupta, 1985; Sengupta et al., 1997). Our study focuses on women's lives in the changing family and social situation. We also explore their perceptions of their own reality. Both these are integral to our approach towards understanding women's health.

The concept of health or ill-health has more than one meaning and interpretation. While studying restructuring of life that takes place around illness, Klienman (1987) argued that the meaning and experience of illness is nested in a complex personal, socio-economic and political nexus. The emphasis however, was on personal. Later, Anderson et al. (1991) argued that treating culture as a static 'objective fact' that determines illness meanings, illness behaviour and the restructuring of life, glosses over the harsh reality of poverty and oppression. They agreed with Brittan and Maynard (1984), who thought that culture does not have a free-floating reality independent of any structural constraints. In their own empirical study of immigrant women in Canada they showed that the experience and meaning of illnesses were actually determined by the material conditions, social relations and restructuring of life. They proposed that illness experiences of women were definitely not rooted in culture alone but within social, economic and political aspects of women's life.

While all these authors emphasised one or the other end of the scale, Johansson (1991) attempted to 'broaden the definition of culture, in the context of the discourses on 'inflation of morbidity during decline of mortality'. His definition of culture embraced the economic and other social realities of life. In response, counter argument has been raised by some fearing the amount of social responsibilities such a definition implies. According to them, if the definition of culture includes 'not only behaviour and beliefs but also a wide range of biological, medical, economic, social and even demographic forces' then cultural factors will count
for everything if they are defined broadly enough, and such broad definitions would be 'misleading and vague' to address the problem of high morbidity (Riley, 1992, p. 71). However, revealing the relationship between culture and socio-economic factors in the Indian context, Banerji has already shown that health culture of rural people is rooted in their socio-economic realities (Banerji, 1982).

Conceptualising women's health as an outcome of their social existence, our earlier exploratory study of Adityapur pointed out that though culture certainly has a socio-economic context, it was not necessary that changes at that level always changed cultural practices. In other words, once created culture by itself becomes a critical force in determining the context. This study also pointed out that cultural practices have two kinds of influences. Firstly, they maintain the status quo by keeping alive the traditional ideologies and their hold over generations. Secondly, through this they act as barriers for the external forces of change, both political and socio-economic. Our initial study helped us recognise the power of ideologies reflected in cultural practices and it also indicated how culture was in itself rooted in economic and social realities of the area. The present study of the villages in Bolpur block that have experienced social transition in a more intensive manner, explored the above relationship between culture and socio-economic realities of life and its findings reinforced Johansson's broad understanding of culture and Banerji's proposition regarding dynamics of health culture. Our present study of the health culture of people (particularly women), as a part of their total culture and its links with the socio-economic conditions, brings into focus this social dynamics of health and elaborates upon the processes that influence and shape intrafamilial gender relations. In-depth understanding of this dynamics also becomes a critical pre-requisite for any intervention in ill-health of people, specially the women.
WOMEN'S HEALTH AND FAMILY

The main features of health issues among the women in the area, as they emerged out of our data, brought out some very relevant patterns. The overall prevalence of chronic and acute illnesses reflected gender differentials against women. While these differences between women and men were statistically significant for only chronic illnesses in all economic categories, for acute illnesses the difference was statistically significant among the poor. Taking chronic and acute illnesses together, the women in the poor category were the worst sufferers as they also had to bear the maximum burden of illness. Besides the gender differentials, the women in the poor households had a statistically significant higher prevalence of reported illnesses as compared to the well-off women.

Distribution of illness symptoms also revealed certain interesting features. While the well-off revealed the highest prevalence of symptoms which were broadly classified as cardio-vascular disorders and aches and pains, the poor showed a similar preponderance in symptoms associated with reproductive disorders, weaknesses and respiratory problems. However, the middle category women shared the highest proportions of digestive disorders and other illnesses including eye problems. It was worthwhile noting here that while all these illnesses were very much associated with the specific circumstances the women lived in, the poor women had to carry the maximum burden of illnesses specific to women.

The state of women's health as reflected in the prevalence of illness, was not necessarily dependent upon the shifts in the gender gap across economic categories. Prevalence of women's illness could increase in various proportions from the poor to the well-off, accompanied by differing magnitudes of shifts in the gap in prevalence between sexes. In other words, gender gap alone was unable to explain women's status in health. What was more important was the magnitude of change in the prevalence of
illness in either sex, which in turn influenced their relative position. This also indicates that understanding the
dynamics of gender and ill-health of women requires not only an understanding of changing economic
realities but also health of men and other members of the family for whom women feel responsible.
According to our definition of health, the differentials of ill-health against women that is evident in our study
indicates a strong linkage between women's health and their relative existence within the family relations.

Apart from the differences in the prevalence of illnesses, a twin gap existed between women's
realisation of their illness and seeking out health action. While this gap was partly contributed by the family,
it was also due the women themselves. The delay by the families in taking initiative was mostly associated
with the levels of economic security of these families as well as with the criticality of women's labour there.
Delays by the women were associated with their concepts of severity, related knowledge and information,
their perception of self worth, economic constraints and men's illness in the family. After crossing the hurdle
of delays when the women did go or chose some healer and initiated treatment, the patterns of utilisation of
health care revealed that they were deprived of quality health attention. They got an inferior health care as
compared to their men. The poor access to health care was linked to a host of factors such as women's
secondary status, men's attitude, their self-perception, need of others in the family and its economic
constraints. The better-off women had better access to health care (source of healer, access and utilisation
patterns) as compared to women in different economic categories as well as the men within same
categories.

While this was the state of women's health and their access to health care, the use of modern
family planning methods and delivery provided by health care institutions revealed an overwhelming
acceptance. However, the provision by modern methods of family planning as well as medical attention
during delivery, were yet to include the poor to the extent it did the well-off. This reflected the importance
placed on women's reproductive role by the society (through its welfare investment in Maternity and Family Planning services) as well as the families in the well-off and middle categories.

Rest, leisure, nutrition, acceptance of illness by women, and access to services at family level are factors which, to a large extent determined the illness differentials. They were in turn, modulated by the family dynamics which is the outcome of resource and power base of a family. To understand the dynamics of women's health therefore, we looked at our data on families to comprehend how these units modulated the above determinants of health.

While the resource base of a family depends upon ownership of land, capital, permanent employment, wage labour, household based industrial production, power is linked to entitlements and traditional norms based on patriarchal ideology. Thus male domination, their control over family resources and their attitude towards women becomes critical in establishing an unequal relationship. Though women's household work is considered their 'natural' duty and no economic value is attached to it, their employment and wage labour or participation in household industry does influence the balance of power to some extent. Similarly, permission to women to spend their earning also reflects the possibility of a shift in power balance as women gain freedom to spend some part of their money and begin to handle cash and in the process learn about money transactions.

Our data indicated that the resource base of families and the traditional norms and ideology form the basis of intra-familial power relations and that both these aspects of family dynamics are influenced by two sets of mediators. While one set is of a number of economic forces, the other represents the social forces. Economic mediators include women's occupation, work, the economic categories to which women belong and market influences. Whereas the social mediators include age at marriage, education, social
norms regarding women’s roles and influences of commercialisation, commodification and consumerist values.

Though the larger economic, social and political changes in the study area have been significant, they have not changed the basic patriarchal structure of society and families. Shifts, however small, cannot be denied but these have not as yet touched the core of patriarchal relations which are rooted in a division of labour which gives household work, reproductive and caring roles to women and control over resources and responsibility for production in the social arena to men. We discuss here the evidence of shifts in family dynamics and its links with the social and economic forces which we identify as mediators of change. However small, these shifts at the family level confront women with situations which are different from the traditional norms. This forces them to reexamine existing norms and redefine their self-image as well as their role and levels of compromise. It is this totality within which at least a few develop the courage to assert their legitimate rights and articulate their problems. They feel empowered and they recognise the value of forces such as literacy, education, employment, delays in marriage etc. Majority of the women, despite the shifts, cling to old norms without questioning. Even if they work, it is out of the pressure of circumstances and not necessarily for their dignity, independence or self esteem.

It is also important to understand how these changes and shifts in resource base and relationships came about when there are rarely any impetus from within. Our data shows that most shifts are the outcome of influences of larger economic and social mediators of change. They change the parameters of power that regulate rest, recreation, nutrition, access to health services, perceptions of self worth and hence have a bearing on the patterns of illness and its burden and women’s access to health care across economic categories even when gender differentials persist in total prevalence of reported illness.
FAMILY DYNAMICS AND MEDIATORS OF CHANGE

Villages in West Bengal have experienced higher progress in many aspects compared to those in most other states of the country. This is evident in the shifts from home delivery to institutional delivery in rural areas. The average for institutional deliveries in Indian villages in 1979 was 11.1% and this figure rose to 16.2% in 1990. Whereas the figure for rural Bengal was 22.7% for the latter year (FRSH, 1995). Similarly, the average literacy rates in the state were 47.2% for women and 67.2% for men as against the national figures which were 39.42% and 63.86% respectively. Though these highlight a degree of development in West Bengal, the literacy figures for rural areas (38% for women and 62% for men) indicate that the urban-rural and gender differentials continue to exist (GOI, 1991). Thus, though there has been a degree of development in West Bengal, these highlight differential impact of socio-economic development on women in West Bengal.

The present study has identified certain mediators of change or social processes through which the changing socio-economic realities permeate and influence the culture of the family. It points to how the changing cultural practices on one hand created a pressure on patriarchal ideologies resulting in loosening of their hold on women, and on the other hand, part of these ideologies continue to exert control over the family culture and perception of 'self' among the women, deterring the forces of change.

The gender gap in the development processes is indicative of the inadequate penetration of social changes in traditional structures as well as norms. In this section, based on our findings, we put together the processes through which larger socio-economic transformations penetrate the family boundaries to some extent and influence them and their women.
The census data of individual villages has revealed two diverse trends in women's representation in the local workforce which indicate two major challenges for them. One outcome was that they were required to combine their traditional roles with the added possibility of economic activities outside home. This brought about a process of transition in their roles within the family. In another they were being drawn back into the household industries, as was evident in Ballabhpur and Binuria, and in the process ensured the families of their unpaid labour. This to some extent matched women's traditional roles in the domestic domain which was perceived as 'non-productive'. In effect, their homes actually generated more unpaid work for them through a diversified transition in the occupational structure of the family. Men's unemployment and under employment only increased women's economic activities outside and inside homes, and thereby increased the need and critical value of their labour without its acknowledgment. As the daily routines of the men and young children had become much more complicated and demanding due to employment, education, mobility and diversification of jobs, it added to the already existing pressure on women from the diversified employment pattern of their own work. Women's domestic work had to be often tuned to the clocks of others. Thus, despite joining the labour force, their secondary status was reinforced; women in household industry were faced with a new situation. They started seeing the value of their additional labour for the family and hence felt less hesitant to seek redressal of health problems. Though their concern for their health was still to serve the family interests but the feeling of 'sacrificing self' was less evident, given their contribution of cash to the family. However, they continued to perceive their domestic work as unproductive. This was visible in the middle category women and even among few of the poor families who worked in household industry.

The nature and conditions of women's work varied not only according to family resources but also to the nature of women's employment. The women who were employed, had combined both types of work
with great difficulty and stress. Those who had to go out to work, despite trying hard to work with greater efficiency, had to opt out of certain activities which required their emotional and physical presence at home at a specific time. As getting help from paid employees was directly associated with the socio-economic position of the family, all poor and most middle category women had to spend more physical labour in performing household tasks. Stress on women therefore, was directly linked with the economic status of their families. While the well-off women suffered mental stress but not physical, the middle category women were overwhelmed by physical stresses.

The patriarchal family continued to appropriate women’s labour for the family occupation without socially recognising it. Historically among the occupational castes, women had played an important role in the family occupation by contributing unpaid skilled labour. This practice still existed except in few families who were able to save their occupation from the onslaught of socio-economic transition. At the time of this study, women of the oldest generation were helping in the family occupation of the farmer, potter, washerman and small farmers through their skilled assistance. Due to the socio-economic transition, many castes had lost their traditional occupation (Kulu, Teili, Moira, Mochi), and some had taken up agriculture as a supportive alternative in the study area. In such families, while women carried the double burden of household work and family occupation, neither of these were recognised as their economic contribution. Only where women shifted to wage earning or into household industry there was a sense of contribution to the family in economic terms.

Despite doing so much labour for the family, women’s access to family resources across economic categories was largely and almost equally restricted. Proportions of such women were 93.5%, 92.7% and 86.8% in the well-off, middle and poor categories respectively. The family members considered the issue as unimportant and unnecessary. Though women did have some freedom for spending their own earnings, it
was mostly for others than for themselves alone. It is interesting to note that all the women in the middle and poor categories who had actually spent money on themselves or others did so on the advice of the family and they did not have the freedom to spend their own income as they wished. Therefore, women's spending was nothing but a mechanical execution of the task that was given by the family, mostly for buying small things. This, however, did not bring them power. But even the act of stepping out and marketing was an exposure and very often this was linked to handling cash alone as purchases were made through a third person.

Women had a wide range of relationships within their immediate families. Their family environment was an outcome of the simultaneous changes that had taken place in the lives of other female and male members of the family in response to the mediating social forces in the region. As a result, the members had occupied certain gender and generation specific positions and relative status in the family. Such arrangements had endowed various amounts of power to individual members. It was within such unequal power relationships that the changes created certain additional demands on or expectations from the women in terms of their physical labour and emotional care. The general trend was that despite women's additional burden of increasing work, the control over resources and ensuing status remained with men. Their protection, consent and approval continued to be a legitimising force for women. All decision making therefore remained with them. The consequence was that women were discouraged from even thinking about themselves. They were pressurised into accepting traditional norms and household responsibilities as their primary duties. Though very few compromises were made in this unequal relationship, some chinks were appearing. For instance, though women's socially defined roles were reinforced by shifting responsibilities of household work and additional labour demands on different female members, the families attempted to create new levels of arrangements wherein men were also involved in sharing household work. This however, was only to accommodate women's increasing economic contributions and was specific
to the poor and middle categories. The evidence of these shifts are there in our data (Table 19a). However, the well-off compensate by providing household help rather than male participation. By and large the gender inequality in relationships creates physical and mental pressures on women and thus influences women's health. Often the conflicts remained bottled up within individual women, sometimes they appeared between women and at other times in the family involving men as well.

Conflicts between women had many dimensions. Food processing and distribution was largely a female activity within the household. While earlier the mother, the mother-in-law or the eldest daughter-in-law (in absence of mother-in-law) was the authority who organised the labour of other women for this purpose. At present the organisation depended upon availability of paid employees, the autonomy enjoyed by other women in the family who may or may not be cooperative and the power relations between the male members. Depending upon these women either worked collectively to process, produce and distribute food or were solely responsible for their own nuclear units. This determined the possibilities of rest or relaxation, and had implications for their health. Thus the well-off women who had the privilege of employing paid help were also those who provided the space for close interactions between the two extreme economic categories. The maid absorbed the values and wove her ideal models or confronted the well-off with their own contradictions of exploiting her and not caring sufficiently. Often this in itself added to the tensions for women within well-off households. In the other two categories, the support for cooking and distributing food was provided by the family. Here too participation of male members was significant only in the poor households (23.1%). Very often this work was the cause of tension between women as well. Those of them who worked outside or the younger generation more involved with the outside world (through education, work, mobility or other social activities), shrugged their household responsibilities upon those who stayed at home. In the educated working women of well-off section it often created tremendous tensions for they were at times seen as irresponsible by those who stayed at home. Often these employed women attempted to
meet the expectation by denying themselves of a morning meal and using the time to complete household chores. The levels of tensions for such women were very high.

It was a norm in the well-off as well as in the middle category households that the married women always ate after feeding their respective husbands and children. As a consequence, women were not only the last to eat, but also often got the least share of food. This obviously had direct implications for their health. The middle category women were particularly affected as for them not only variety but also quantity of food often fell short. For the well-off, though basic food was adequate, special dishes often fell short.

Older women often used their status to transfer the burden of work on younger women. In this process, often conflicts and tensions mounted between women, at times affecting their health. Mother's-in-law role was perceived to be of interference rather than sharing the burden of labour with women in the domestic world. A few women party explained mother's-in-law role of interference as a consequence of their experience and age and partly due to their superior generational status in the family. Both these factors together provided the mother-in-law with the privilege of being less involved in household work as reflected in the data on women's work. An interesting counter position was reflected by a group of older women who felt threatened by their daughters-in-law. They were so totally dependent on the son that any shift in his attention was seen as disempowering and a rejection. Thus, in a relationship mediated through dependence on males, the mother-in-law and daughter-in-law failed to see each other's vulnerability and perceived each other as opponents.

In the intra-familial struggles of younger women, mothers played an important role which actually reflected the relationship between traditions and the emerging forces of change in the family. They either were supportive of their daughters and helped them face changes in their lives or had deterred them from
facing the fast changing world and growing more independently. The teenage daughters who were yet to experience life and form their own ideas were also helped by their mothers who were already influenced by the mediators of change and had seen much of life. While this was true for women irrespective of the economic position of their families, the processes varied. The influence of social mediators of change on women varied between these two generations. When the daughters were more exposed and influenced by the mediators as compared to mothers, conflicts were severe. In situations where daughters were ahead, and the mother were also at least mentally convinced about the direction of change, the family situation was conducive to solidarity between the two generations. Influenced by the mediators, the mother though she could not act in her own life, used her emotionally critical position to convince the male members of the family (who were often against change in women's traditional roles) of the need to give girls some opportunities and freedom. However, there were situations which were just the reverse. The young girls rejected the independent views of their mothers and opted for marriages that brought in comforts rather than dignity. At times, mother's radical actions like leaving home with another man made daughter emotionally and socially vulnerable. Occasionally, the brothers and fathers were lenient towards change in younger women's lives while the mothers were not.

Besides being a mother, some women not only provided physical labour and mental support to the family, but were also socially accepted to be more concerned for their daughters' well-being. This was mostly because of the similarities in women's experience of gender both as wives and as daughters. It was for the 'good of their daughter' that they wanted her to be more accommodative and less independent. In such situations, despite the men in the family being more supportive of change, the power to influence the girls was more with the mother who deterred or delayed her growth as an independent individual. However, there were also few occasions where the mother was progressive and could foresee their daughters' life through their own values and attempted to intervene by using their own power. But daughters refused to
accept the ideas of change from mothers and thus at times they themselves contributed to the delay in change. The tensions between younger women and mothers often fed into the continuation of men's control over decision making regarding education, marriage or health care of these girls. Mothers' secondary status and their views further undermined their relations with their daughters. Thus we found that not only tensions increased and affected both younger and older women. Wherever these conflicts were sharp they also acted as deterrents to change. Supportive relations of women on the other hand were conducive to smooth shifts and healthier intra-familial environments.

Change in women themselves was also an outcome of the constant interaction between the socially set norms regarding roles and their perceptions of themselves, arising out of the experiences of life which made them think. Confronted with realities in the immediate family environment, they mostly accepted the restrictive family norms. Those who became critical about it, could not always act. And the few who acted, did not necessarily break the barrier of traditional norms. As such, actions were quickly accommodated within the 'acceptable tradition' as far as they did not challenge the basic premise of patriarchy. Now women's employment, education and their presence in labour market was accommodated as far as the basic balance was not compromised. Despite all the accommodative processes women's participation in work outside and in home based industry, their education, delay in age at marriage and greater exposure did bring about shifts in self perception and self worth. This was particularly true in the better-off sections. This small shift in awareness did make women more conscious of their health needs and helped them express their sufferings more than the very poor.

Women continued to assess and explain their lives in terms of their abilities to fulfill the reproductive and household roles. They accepted their glorified roles of motherhood, housekeeping along with production of unpaid labour, unquestioningly. Wherever the social mediators touched women's life in families, it brought
about conflicts between the traditional norms and the forces of change. Declining economy of the family, women's education and employment, together with delayed marriage sometimes made them anxious for freedom. Thus, while women's acceptance of traditional norms during socialisation was opposite to the forces of change, their worries for freedom as an impact of the mediators facilitated the process.

Our qualitative data does however, reflect that the hold of patriarchy or the dominance of men over women was loosening slowly over generations. More women were now working outside their homes where such opportunities existed. The women were gradually replacing the men in performing tasks such as purchase or collection of raw ingredients for preparation of food. Younger women started relieving men by taking up extra burden of work. Thus, our data reveals a prominent shift in the resource base accumulation process where the participation of women has very definitely increased through wage labour and employment in occupations outside their homes as well as into agriculture and household industry, apart from their traditional household and other occupations. Thus, while women contribute extensively to economic survival, the awareness of it is not as extensive. As a result, though shifts in relationships and organisation of household chores do take place and even men begin to participate in it, the essential patriarchal values continue to dominate. Thus decision making and control of resources remains with men. Among the well-off, gender relations of male domination retain an economic basis where women are not working but among other economic categories, the ideology of male domination persists despite a lack of objective economic basis. The poor women contribute to household keeping through their wages but still accept traditional gender relations. The change within the family therefore is constrained by unchanging relations based on control over resources and not earning or production of resources.

These unequal shifts between the process of building the resource base and its control on the one hand and the ensuing slow change on the other, increases physical and mental burdens on women and
increases stresses. It also forces women into new situations in which they are forced to rethink their survival strategies. It was this process which changed women’s health seeking behaviour in the better-off categories, opened up channels of communication between women and men and at times gave women the strength to seek direct redressal to health problems. Where such perceptual changes had not taken place (as in the poor), women’s knowledge of health as well as their health seeking behaviour continued to be guided by their disregard for self and the family’s economic constraints.

SOCIAL TRANSFORMATION AND WOMEN

Historically, little is known about the life of women of Bolpur block. The scattered data revealed that status of women till the Forties was higher for Birbhum district as compared to that of the state of West Bengal. Later, although the situation in Birbhum remained better than West Bengal, the sex ratio showed a gradual decline. The overall situation in the sub-division of Bolpur has worsened significantly during the Eighties as compared to the Seventies. In brief, the available information revealed that the higher social status that was conferred on women in Birbhum district till the three early decades of this century, has gradually weakened over the following decades. In Bolpur, at present, women work in agriculture, as wage earners, in household industries, government and private institutions and a few are also money lenders. Their social status, however, continued to be secondary to men.

In the area under study, the changing dynamics of the larger social forces has pulled women of different generations out of the boundaries of their families. It has linked and integrated them to the market though the extent of their integration was much less compared to that of the men. There are also visible changes in the power and resource base of families. The change at the family level however, always
seemed to follow the former though at a much slower pace. Moreover, the changes in women's lives within families, as the outcome of transforming larger social forces, have also been in response to changes in the lives of their men. A number of social mediators have emerged in our study, which significantly affect the family units. These mediators were complexes of multiple forces that started influencing people's life in the study area at different points in the transition. Thus while women's employment, education, physical mobility and age at marriage were the factors that influenced lives of women of earlier generations, forces such as information through mass-media, market culture and commercialisation appeared at a later date and added to the complexity of the earlier forces which continued to remain dominant. Other forces like men's attitude and people's aspirations to live the lives of their 'upper middle class models' also changed in response to the transformation of other forces.

The mediating forces that initiated change in the lives of the women, were not equally strong. For instance, employment, economic position and education were the most influential forces in women's life and were consequently followed by their increased mobility and delayed age at marriage. Our study also revealed that the nature of the mediators and the pace at which they influenced the life of women varied across social categories. In the categories where mediators could not penetrate the family boundaries, the nature and degree of change were also found to be marginal or inadequate. We discuss below the mode of action of the social mediators of change, the changes they induce at the family level and its impact on women's roles, status and perceptions.

Women's gradual involvement in employment and wage related work has brought major change in their lives by bringing them out of the traditional domestic domain. Over time however, valuation of women's work by the society as well as the women themselves, their sense of independence was born out
of the work they do or the role of their work in organising themselves and making them more aware of gender struggle which was varied across social categories.

Our data highlights certain trends that are worth noting. The valuation of work outside home not only depended upon the skills required and the nature of work but was also related to the levels of securities at which women's families were surviving. This was particularly true of the 'Kantha' industry where the poor women's exploitation was very evident. The rates of payment for them were low and often they were not even paid fully. The middle category women who got work from well off families made better profits out of their contract and often they sublet work. Thus despite labouring much harder, the poor women did not get adequate returns. Their family economics remained restrictive and, given the penetration of their poverty, the shifts that the work brought about in the middle and well-off women's family dynamics, were not very visible among the poor women.

The participation of women in work outside home revealed a differential across economic categories. The better-off were represented largely by 'non-working' women, the poorer section was marked by the 'working' women. The perception of the need to work might have strengthened the class struggle in the area, but had not yet been conducive to women's struggles. Our data brought out the interesting contradiction between objective reality of work participation and the subjective perceptions of women. There was a difference between the perceptions of the two sections, their meanings and visualisation of the value of work and the perception of needs and necessities. While many women of the poorer section had the notion, "Why should women of better-off section need a job?!", the better-off women for whom job was not a survival necessity, often sympathetically said of the poor, "In their families, women have no other alternatives than working (meaning work to earn cash)". Thus neither of them saw work as fundamental to women's empowerment, dignity and self realisation. As a result, in reality this had created an
under current of division between the working and non-working women. This also explained why despite shifts in family resource base and women's contribution to it, women never really asserted themselves to the extent their objective conditions permitted.

In addition to the differences in occupations with changing economic positions of the households, there was also a lack of organisation wherein women could be considered a social group and strategies of struggle developed taking both the economic as well as gender differentials into account. The better-off had larger proportions of 'non-working' women who rarely felt the need or expressed their right to employment. Though a small proportion, yet there was a group of women in this category who were mostly employed at government institutions. The organisation at the governmental institutions made them aware of their rights as workers within their respective working sectors. Similarly, the household industries had immense scope for organising women as at the initial level it gathered women at a common place of work for the day, away from their families. However, it later got co-opted by the patriarchal family norms by creating pressures of adjustments and related tensions at home which compelled the women to return to the family fold. As an option the women preferred to take work home rather than gathering at the site of work. The poorer women who were working mostly as wage labourers were protected by the organisational network that was protecting their men who were also in the same occupation. The worst sufferers were those who worked as maids in the better-off households. Despite being a totally gendered occupation and representing a considerable proportion in the female work force that was contributing to the upkeeping of their families and that of their employees, the maids were neglected by organisations. A local social worker recalled the panic created among the women of the better-off section in her past attempts at merely forming a platform of interaction for both the maids and their employers.
Our explorations thus reveal the extremely critical influence of socio-economic status of families on women's work, occupation and their entitlements and vice versa. It determined the extent of women's participation in work, the nature of their work and the terms and conditions of it, which in turn, influenced power balance and adjustment of power at the family level. While the work of poor women was characterised by its insecurity and daily wage basis, the women of the upper categories held the secure government jobs. The middle category of women who actively participated in agricultural and home based activities, were treated as 'non-workers', despite the fact that their hours of work were long and strenuous. Outside work was critical for household economies of the poor but not for the well-off. Still there was a visible trend of women seeking employment among the latter. This trend was also distinctly visible across generations among the well-off where it also generated tensions and conflicts within families. Among the poor there was not much difference in proportions of working women nor did the level of conflict and tension change very much over time.

The nature, terms and conditions of work in various economic categories determined the amounts of time and labour spent by women and the level of independence women enjoyed after long hours of work. This included not only leisure time but also whether they were able to think of themselves. The better-off women were constrained due to their sense of responsibility toward the family, whereas in the poorer section the women were burdened with physical labour and had little time for themselves. Hopelessness of life made them think of 'death' as their independence or an ultimate escape from such life. These deep rooted perceptions contribute to the acquired imperviousness of the family which remains shielded by these patriarchal values.

At individual level, the better-off women who were also educated and had better information could easily articulate women's problems giving examples from their own life experiences. Idea of a women's
movement, however, did not bring much excitement to them. Only some of them who were associated with organisations reluctantly responded to its calls and were often dragged to meetings. The middle category of women agreed that organising women in household industries would improve their situation but were not sure how it was going to do so. Initially, the industries functioned from small centres where women came to work which had created a space for women themselves as well as provided scope for organising women. But soon there were pressures from families and women had to take work home where they could combine it with the domestic roles. This had not only reduced the scope of organisation but also perpetuated the profit making market culture into the villages by inviting a category of middlemen who placed orders at home and collected them from there. The advantage of this new system for the entrepreneurs was also associated with low wage for women and high profits for the investors. Moreover, it ensured the family of women's labour. The implications of these were obviously not favourable for the women who remained trapped within the family with increasing work burden and little relief.

The poorer working women were mostly aware of the 'unionism'. They were generally sure of the long term success of such organisational attempts as their families had already experienced land reforms. But the little attempts that they made at earning together were not always successful for various reasons. The struggle of the maids against the demeaning terms and conditions at work which women perceived as comparable to the occasional strikes of their men for increasing the agricultural wage, had failed. Though initially they withdrew from work, later they started going back as it created extra tension and pressure on the families which were dependent not only on their monthly earnings but also for some amount of daily food. Thus while women's work did not bring major shifts in the family power balances it did create some readjustments as we saw in the previous section. Also, the exposure to work outside the boundaries of home did bring fresh experiences and ideas to women.
Education and information were other major mediators of change that influenced women's lives within families in the study area. Over time, while there was much expansion in the sources or avenues of education and information, they had contradictory influence on women. For instance, formal education has been a privilege only for those women whose families had resources and did not require to withdraw them from educational institutions at an early age and draw them into family labour or economy. There is no doubt that formal education did offer certain academic knowledge and awareness but it had little to offer in terms of creating self-esteem among the women that would help them act to change their own oppression. There were women in our study area who despite having post-graduate or doctorate degree, could not translate their awareness of women's disadvantageous position, had hesitation to act for themselves or for others.

The State's efforts to cover the poorer people who were left out of formal education, through the National Literacy Mission, revealed another reality that women had to grapple with. At the time of the study, there was organisational inadequacy and lack of voluntarism of the better-off women in revamping the weakened literacy programme in the villages. Moreover, the experiences of women belonging to the middle and older generations made them realise the limited use of such programmes in their life specially as it did not help them in the economic struggles of their families. Instead, women appreciated the institutionalised transmission of skills like 'kantha embroidery', leather or pith works etc., which were linked to income generation. However, these opportunities were more for the lower middle category women and the Muslim women from the poor category who were more restricted within the domestic arena. Thus, while on the face of it formal education did little to make women stronger and assertive and the poor rejected it for skill based training, it was evident that formal education opened up opportunities of employment, mobility and interaction with the outside world which indirectly shifted the power balance within families.
Increased flow of information in the area created an influence on women's awareness and aspirations. While the traditional sources of information for women like the annual fair or political organisations had the potential for raising women's consciousness, these were overtaken by the market culture that seeped in through the mass media like TV, films and video shows which unlike a fair or political meeting became part of the daily lives of women. Women were also attracted to these for entertainment. As a consequence of women having more interaction with the urban and market culture through the daily mass media rather than with higher political consciousness through fair or political meetings, their views on women's situations were determined by the TV serials or films. They also appreciated the modern tips on women's beauty consciousness and other market goods and a culture which came through these media added something new to their life style and values. Thus influenced by the urban standards, younger women preferred a service holder husband over an agriculturist. On the other hand, such interactions helped them outgrow casteism and other reservations. These values influenced men as well and contributed to shifts in their attitudes towards women and their expectations of them. Such exposures and the day to day living experiences of women in changing social situations made them learn from their struggles in life. They developed strategies to cope with their changing life. While confronting the restrictions, discriminations and adversities in life they started thinking and questioning the traditional norms within families. While few attempted to break the barriers in various ways, most of them accepted or tolerated it.

Women's education along with work became a powerful indicator of change. Women's assessment of education was primarily in terms of its economic benefits. According to them while higher education enriched their knowledge and created some kind of awareness, they realised its full benefits only when they had the economic entitlement or power over their own income and were accepted in the family. It gave them bargaining capacity in the family. In the well-off category women explained their work as a key to fulfill their wishes independent of their men's opinion. The younger women also saw their work as creating some space.
in their lives where they can take refuge, while avoiding humiliating social norms. These norms humiliated women as they tended to assess them with the same traditional criteria while their lives were changing in response to the social mediators like delayed age at marriage and higher education. In the middle category also women valued the economic freedom and independence that their employment in household industry or other institutions had brought them. A few women also thought that women's employment is natural while men were going out to work after receiving education.

There were certain mediators of change which came as a consequence of men's concern for better job opportunities and higher education, women's employment and education and information. Our study revealed that Mobility and Age at marriage were two major mediators of change which influenced women's perceptions. It is already evident that change in women's life followed that of men. Mobility, as a mediator, was more active among women in the better-off sections. Initiated by men's education, employment and movements across the decline, the women were also compelled to follow as they were forced to wait for matrimonial alliances while respective grooms were being educated. This not only influenced socialisation of young girls who got a more liberal environment in the parental household for a longer period but also managed to acquire education. For the poor however, mobility was never restricted as they had to earn for the family under any circumstance and therefore, often moved frequently. Their mobility however, was of a very different type as initially they moved between nearby villages and later to the town and continued to hunt for wages. Mobility therefore changed only to the extent that now urbanisation offered diversification of employment but this only required skills not education. Among the poor therefore, women experienced little change in wage, illiteracy, mobility and age at marriage. Unlike the well-off therefore, for the poor women these mediators of change had little to offer.
Women had spoken about 'mobility' in terms of physically moving out of the boundaries of the household. On the one hand, the diversification of economy, the growth of educational institutions over generations and women's increasing participation in these institutions were associated with higher mobility of women to a considerable extent. On the other hand, the families also had loosened their restrictive norms while coping with the changing social environment. They allowed their women to move out. Women's experience of these changing purposes of 'mobility', however, varied with the socio-economic categories. As the study area came under the growing influences of urbanisation and modernity, other forces which joined the major mediators were those of women's entitlement or access to resources, growth of markets and consumerism and men's attitude.

Increasing participation in the work force did not mean women's full or increased access to their income or family resources. In families their access is still controlled by men. Though the poor women are allowed to handle resources to a certain extent and spending money for the family their expenditure is guided by the family. Though only a few widows had entitlement to land, its impact on their status and independence provided an indicator of possibilities.

The growth of markets has inculcated a new culture among women, that has altered their values in life. As women in the better-off section started earning on their own and acquired some freedom to spend, they wanted to have a scooter for easy mobility. Other women looked for employment opportunities and started their own business of catering meals to the households of working women or invested in 'Kantha' work. Profits in these businesses, however, were made partly from the low payment of labour, which was provided by the local poorer communities. Besides, as the women moved out of the house, they interacted with the urban culture and also received consumerist messages through cinema and television advertisements. Their taste for dresses, jewellery and their sense of beauty changed to a great extent.
Simultaneously craze for using new cosmetics, furniture and household goods like television, refrigerator etc. also increased. A retired school teacher said, "Television directly enters into the head" of women who develop their needs according to the TV norms. However, the women who had adopted the consumerist norms rationalised these as their needs emerging out of the 'changing times'. While such was the impact of the markets on the values of better-off women, women who could not extensively purchase (the poor women) were very negatively affected. This was due to the fact that when they indulged in consumerism they spent a very large proportion of their total resources. This affected the family and its consumption patterns and distorted women pushing them into earning easy money. Still the poor women could hardly satisfy their desires due to the situations of poverty they lived in.

The onslaught of the consumerist culture however, undermined the social security and protective influence of the traditional culture. The little that these women could afford in terms of luxury was organising contributory video shows of mostly Hindi films or going to the theatre located in the town. The worst impact, however, was various expressions of social commodification of the poorer women which were evident in marrying off daughters to aged and unknown men and various kinds of sexual exploitation. The faith-dimension of the religious identity of women was manoeuvered by offering magic solutions to their personal and familial problems, through a religious outfit of 'Shakti'. Thus while urbanisation helped women's capacity to challenge the weakened traditional norms of patriarchy that were dominating in our Adityapur study, market influences, commodification and exploitation of the poorest women replaced the relative security of community life that protected them prior to urbanised influences. Urbanisation of this kind therefore was a double edged sword for the women (specially the poor) of Bolpur. These commercial and consumerist influences broke traditional norms in the poor easily where women's exploitation by the market was rationalised by its economic returns, absence of social support and at times by camouflaging trafficking girls into respectable marriages. In the name of providing employment or finding match women were taken away...
by known men, but many never returned to the family. The families deprived of resources, information and power had little idea about how to get back their daughters. Also poverty weakened their strength or resistance. Among the well-off women, the market forces created tensions between generations where the older generation was gradually losing the battle and letting the younger generation change. On the other hand socially conferred roles and responsibilities had not only kept women in a subordinate position but it had also made them more vulnerable to growing violence and exploitation in relation to the larger forces of change. A major factor in family violence against married women was the unfulfilled consumerist desires for material possession or economic insecurities of the husband's family across all socio-economic category.

We found a continuous interaction between individual families and the larger social processes. The most important link among these were economic forces which determined women's work, occupation and entitlements. These together created differing social situations for women in different economic categories both outside and inside the family. Economic position of the family also determined women's educational status, access to information and their assimilation into the larger process of commercialisation as well as their imbibing market values. A second set of social constructs that acted as mediators of change in the social life of women were the societal attitudes that determined age at marriage, the prevailing life styles among the well-off that greatly influenced other sections and men's attitudes towards women across economic categories. These processes influenced women's lives within the household by influencing the traditional power balances of the patriarchal family.

Influence of women's outside view or 'models of living' or aspirations was an important force that acted on family dynamics and influenced women's life. While the women were first to be influenced, who then attempted to accept and practice in their lives, others in the family were often the last and the least to do so. For some it was reinforcing their traditional roles and education, information or employment did not have
a stronger impact. Whereas for many others it brought about tremendous possibility for change. The transformation, however, was faster and less tense in the families where the mediating forces of change had penetrated the family units sufficiently and had altered family attitudes (specially of men and older women) towards younger women. The net dynamics of relationships at a time was in tune with the changes at the larger social level at that time and its influence on women of the younger generation. Favourable family environment had enabled women to go ahead with greater conviction for achievements in social spheres.

We see then a mosaic of positive and negative impacts of larger socio-economic change on women mediated through women's participation in work, prevailing social norms regarding women's roles, their education and processes related to urbanisation such as increased consumerism and mobility. While the balance between the positives and negatives continued to restrict women and perpetuate the basic patriarchal structures and values, we have evidence to argue that in Bolpur a certain degree of change is eminent in women's lives. This is reflected in the contributions they now make to the economy of the family. Though marginal it provided some access to their earnings and a chance to handle money for purchasing household goods and above all, a collaboration of men in completing the household chores, particularly among the poorer households. In the better-off, this is compensated by men through permitting employment of maids for helping their women. It is significant to note that while in the well-off homes there was an economic basis for ideological subjugation, the unequal relationship between women and men was perpetuated even among the poor where there was no economic logic for the same.

Shifts could also be perceived in age at marriage and educational status of women, in their values vis-à-vis employment relationships, domestic work and their responsibilities towards the family. These shifts, forged at the larger level of social and economic life of Bolpur, had great significance for the family dynamics. They not only altered the resource base of the family through contribution of women but also influenced
women's relationship within families. Our data has also illustrated the impact of larger social mediators on
women's perception of their needs and status. These shifts within the intra-familial dynamics impinged upon
the indirect determinants of health which we had identified as women's decision making powers, their control
over resources, their information base and knowledge and time to relax and take care of their nutrition and
health. While these first two indirect determinants were only marginally affected by shifts in family dynamics.
The other determinants were critical in creating conditions conducive or otherwise for health.

We find that other than gender, economic status of family played a crucial role in determining
reported illness and gender gaps were very often the outcome of increased illness of men creating a gap
against them and sometimes the gender gap was a result of shifts in reported illness across economic
categories. We therefore argue, that to conceive of illnesses only as a biological process without grasping
the perceptual issues and the social context of illnesses can be counter productive. For success of all
technological interventions, a full grasp of social dynamics of ill-health of women is a basic necessity. We
also argue that the current strategies for empowering women through improving their 'reproductive health'
are not new as our data reveals that these are the only successes that the organised health care can claim.
Expanding services into other areas of 'reproductive health' without actually understanding the process of
empowerment can be wasteful and ineffective. We would like to emphasise that women's empowerment is a
complex and comprehensive process of social change and that till the mediators of change are not
strengthened to further alter the balance of gender relations within and outside families, mere technological
inputs will continue to be absorbed within the overall patriarchal structures.

We are sharply aware of the fact that, some of our very critical findings are at the qualitative level
and need much more extensive quantitative analysis. Still our study provides new insights into processes
that control the health and lives of women. While the findings of the study are relevant for those who are
interested in understanding issues regarding women's lives and health in transitional rural societies which
are urbanising at a fast pace they also offer some avenues for those who may wish to act locally.