The Demographic Category as Leaky Gender Boundary: Implications for Women’s Reproductive Health

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The project of demography entails both knowledge production and practice. In knowledge production, the focus has been on the statistical study of populations and population change through the processes of fertility, mortality, family formation/dissolution, population aging, migration, and social mobility. Gender and the bodily are clearly integral to the understanding of population change and processes, but deepening feminist conceptualizations of gender have yet to infuse the production of demographic knowledge. As practice, demography informs population policy and the framing of reproductive health issues. The demographic category, variously defined, is situated in, and socially constructed by, the macro-level stance of demography, consistent with development and international agendas, rather than by either women’s agency or the complex sets of power relations and socio-cultural systems that create, or are a consequence of, population structures and changes. Perplexing paradoxes emerge for women’s reproductive health, three of which are examined here: 1) a knowledge production project, the focus of which is women’s bodies in reproduction, adopting categories that skid by women as agents and socio-political actors; 2) a demographic practice that is political in origin (in disseminating ways of life from a culturally and economically dominant part of the world), not incorporating feminist knowledge of power to enhance understanding of reproduction and reproductive health; and 3) in the intersection of knowledge production and practice, not seeing both as active forces in shaping women as reproductive health agents and women as agents shaping demographic change. This paper offers a foundational critique of the demographic category as eclipsing of women’s agency, and proposes that constructive leaks have sprung in the gender boundaries demography has created, leaks that offer openings for enhanced understanding of women’s reproductive health.

“Laughter in the face of serious categories is indispensable for feminism.”
Judith Butler, (1990: p. x)

The project of demography, perhaps more than many disciplines, extends beyond knowledge production. Demography is a discipline but with a firm policy stance, with profound implications for women’s

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reproductive health. Demography, in its macro-level focus on population structures, changes and processes such as fertility, mortality, migration, population aging, is a place where women’s interests intersect and at times collide with social structures and policies. Yet the project of demography, both as a study and as a policy program and practice, has largely viewed women and women’s bodies as means to the ends of population control, as instruments and obstacles. Demography’s long-standing interest in ameliorating the overall conditions of societies through population policies, typically fertility control programs, can be and often is, antithetical to establishing and meeting women’s reproductive health needs. The intersection of the demographic research enterprise, aggregate demographic processes and policies, with individual women as respondents and subjects, constructs both bodies (embodied identities) and demographic categories. Yet, this intersection of demographic category with women and women’s lives has not been much examined in terms of implications for women’s reproductive health and for women’s health policies.

This article is an interdisciplinary social scientific examination of the project of demography and the categories that project creates, as situated in the tension between the push toward categorization to explain and to intervene and the current questioning/rejection of the categorization proclivity in favour of tracking self-identity/identification as malleable and of knowledge as socially situated. It is an examination of the stance of demography in defining and consolidating boundaries for bodies, for gender, for categories that become reified and determining through both disciplinary canon and applied practice.

Three perplexing paradoxes for women’s reproductive health emerge, which are examined here: 1) a knowledge production project, the focus of which is women’s bodies in reproduction, adopting categories that skid by women as agents and socio-political actors; 2) a demographic practice that is political in origin (in disseminating ways of life from a culturally and economically dominant part of the world), not incorporating feminist knowledge of power to enhance understanding of reproduction and reproductive health; and 3) in the intersection of knowledge production and practice, not seeing both as active forces in shaping women as reproductive health agents and women as agents shaping demographic change. This paper offers a foundational critique of the demographic category as eclipsing of women’s agency and proposes that constructive leaks have sprung in the gender boundaries demography has created, leaks that offer openings for enhanced understanding of women’s reproductive health and new approaches for the meeting of women’s reproductive health needs.
THE DEMOGRAPHIC STANCE

Demography is inherently broad and multidisciplinary. It has a consolidated knowledge base of large-scale surveys in almost every corner of the globe. It has long-standing close links to policy and to major international funding agencies. In recent years, it has begun to recognize the need for incorporating new hypotheses and new methodologies, including at rare times qualitative approaches, to better understand population dynamics (Presser, 1997; Presser & Das, 2002), although there is resistance to these changes (Presser & Sen, 2000; Wang & Pillai, 2001). These are strengths but weaknesses as well, as we shall see.

Demography in its aggregate but non-collectivist stance, has created a discourse in which individuals and their agency are more than eclipsed, they can be rendered virtually invisible. This is not an unintended consequence, as new analyses are revealing, but part and parcel of the demography project, its stance and historical origins. As Presser argues, “[i]deology has played a role in how the discipline has formed, financed and rationalized key demographic agendas.” Those agendas, suggests Riedmann (1993, p.107), are clear: “Over the past five decades demography has exemplified what Thomas S. Kuhn termed ‘normal science:’ practitioners have shared a taken-for-granted world view, articulating the modernization-intervention theoretical paradigm; demographic research has been highly technified ‘mop-up work’.”

With respect to the subjects of both research and intervention, there is an “educative” and “reactive” function. Riedmann shows in the Changing African Family - Nigeria project (CAFN), for example, how questions asked in demographic surveys guided how respondents were expected to plan their families, how they were being taught to live more like the westerners who designed the surveys. “...[T]he CAFN projects implicitly challenged indigenous local norms and behavior —without regard for potential negative consequences” (Riedmann, 1993, p.99). “The authority of worldview demography to penetrate... Third World regions has been interpreted ... as an extension of the right-to-invade that was militarily established during the historical period of European economic and social expansion” (Riedmann, 1993, p.96). Subjects then in demographic surveys speak less of their own lives in their contexts than are spoken to about First World norms and how they ought to comply. Links between demographic surveys, economic programs of “development” and international or global agendas of population control reinforce the imperative to comply, to modernize, to “choose” children or not and how many (Kabeer, 1994; Furedi, 1997).
The category in demographic discourse, then becomes the reality, or at least a significant reality on the “radar screen” of the population project. Women in demographic surveys or in population control programs are seen through their socio-demographic position, defined elsewhere for them, with little or no input from them. They are reduced in their sense of their own contextual agency, although paradoxically, the demographic/population project argues that by giving women the ability to control pregnancies and births, they will have more agency. The contradictions of this argument are vividly revealed in reliance on the term “choice” to capture reproductive rights, particularly access to abortion in the United States. “When Americans,” says Solinger (2001, p. 21), “began to refer to reproductive liberty by the simple name ‘choice,’ they obscured the fact that millions of women in the United States —and abroad— lived in conditions of poverty and oppression that precluded many of the kinds of choices that middle-class American women thought of as a matter of personal decision making.” Choice is a term that characterizes the economic, a rational consideration of alternatives and consumer choice made by informed agents who are presumably empowered to act in their own best interest. Reproductive choice, conceived in this way, is elusive for most women in the world, certainly not representing the kind of choice-making that many Third World women would see themselves doing (Ferber & Nelson, 1993; Folbre, 1983; 1994). At the same time, choices about reproduction made by Third World women are not those likely to be apparent to, or endorsed by, the demography/population project: “In nations where there is little or no provision for any equivalent of social security for old age or where parents need children’s help to accommodate subsistence-level survival, the question arises whether demographers ought rightly to be involved in persuading these parents to have fewer children” (Riedmann, 1993, p.100). Fertility in this socially situated reality, is survival, for women.

That women in Third World regions are seen as the appropriate subjects for intervention is the first level of demographic category as determining. Their indigenous values about family, gender, links of reproduction to the ancestors become secondary, if seen at all. This tendency is perhaps most pronounced in the labelling of women in pre-selected age categories as reproducers. Fertility control programs focus on reductions in birth rates, particularly among the poor and “unfit,” as most if not all women in Third World regions are thought to be by the demography/population project (Kabeer, 1994; Furedi, 1997; Mason, 1986; 1987). Little heed is paid to women’s own reproductive or reproductive health needs, their empowerment or their individual wishes or desires. Their bodies and identities are usurped by the category of “females of reproductive age,”
defined not by individual attributes or by reproductive health, but by normative fiat by population policy interests elsewhere (Kabeer, 1994; Furedi, 1997; Presser, 1997; see particularly New York Times, 2003).

A managerial calculus is created by which demography and its application in population policies, foreclose on other ways to define. The centrality of the project of demography in globalization and global homogeneity, prior to its becoming fashionable in recent years, has meant that knowledge of the demographic has been transformed into powerlessness by the demographic subject (Foucault, 1980). The focal point is the category, women as mothers or potential mothers, “[a]t the same time, women as mothers or would-be mothers are rarely perceived as competent actors, capable of making responsible choices in their own or families’ interest” (Kabeer, 1994, p.188). The demographic subject recreates herself in the image of the demographic construction of her:

The gaze now cast over the subject body is that of the subject herself. What is demanded of her is that she should police her own body and report in intricate detail its failure to meet standards of normalcy, that she should render herself, in effect, transparent (Shildrick, 1997, p.49).

Categorization by demography has produced knowledge but largely at the cost of human agency, particularly gendered agency, we shall show. And it is knowledge that creates women’s reproduction for its own policy agendas.

“DE-GENDERED” CATEGORIES SKIDDING BY WOMEN AS AGENTS/ACTORS

Demography is an intellectual and policy project the focus of which is the bodily, particularly women’s bodies in reproduction, which adopts categories that are “de-gendered” (neutral or neutered) and skid by women as agents and socio-political actors. There is the perplexing paradox of a discipline whose focus is, in part, explicitly on women and their reproductive behaviours, adopting an analytical stance that is essentially neutered of the very dimensions, socio-cultural and structural, that it purports to examine and explain.

The eclipse of gender occurs on at least two planes. Women as gendered subjects are deliberately sidelined with their interests and self-reflexive responses discounted or seen as extraneous to demographic research. Riedmann (1993, p.98) argues compellingly: “My evidence suggests that
the Changing African Family - Nigeria projects exploited their subjects by pursuing the primary aim of the research —to gather data— even when doing so went against respondent’s wishes, constituted culturally aggressive invasion of subjects’ privacy and disregarded their beliefs.” She cites the example of many Yoruba women who said “...they could not reveal the number of children they wanted because it was against their religion to do so and they feared retribution” (Riedmann, 1993, p.98). In seeking, as Paul Demeny has argued, through international demography, “...predictability, control and subservience...” (as quoted in Riedmann, 1993, p.105), the agency and particularly the gendered agency of individual demographic subjects, women, is skidded over.

On a second structural level, too, gender and agency of women as subjects is eclipsed by the demography/population project. Gender has become in many social sciences the lens by which we understand and interpret not only ourselves and our own lives but socio-historical shifts, gender structural regimes, knowledge systems and global processes. Gender does not always signify difference, suggests Marshall (2000), but is productive of difference. Fox (2001, p.374) shows in a Canadian study, how “...motherhood may be the most gender-enforcing experience in the lives of many women.” The degree to which women are embedded in gender structures and processes tends to be also sidestepped in the demography/population project.

Kabeer (1994, pp. 193-195) examines, as an example of gender structural embeddedness, the problem of access to contraceptive technology through the lens of needs interpretation. The political status of a need must first be established, then the struggle over interpretation of that need ensues, followed by struggles to secure or withhold the resources for the meeting of the need. The processes are socio-political and revealing of underlying gender structures. A relatively recent shift in the demography/population project has occurred, to focus on primary health, but as a means to fertility control and population growth reduction (Furedi, 1997; Kabeer, 1994). Both the population establishment and many women’s health advocates have agreed on the need for contraceptive technology in the Third World, but beyond that, they disagree profoundly: “Most feminists have struggled to give women’s need for reproductive technology a political status as one element of their broader rights to exercise control over their bodies and their lives” (Kabeer, 1994, p.193). But the official population project approach has been to conflate women’s needs for contraception with the policy needs of population control. “Consequently, official population policy has frequently operated as a denial of women’s choice, rather than as an enhancement” (Kabeer, 1994, p.193). Most feminists, with due attention
to the structures of gender, argue that redistribution, equity and improvement in the position of women should be the key goal of policy (Furedi, 1997, p.128). When in the CAPN project, some respondents did raise “structurally embedded concerns” such as “needs for more equal access to formal education, better medical care, especially to combat infertility and child mortality, expanded employment opportunities and more money” (Kabeer, 1993, p.104), fieldworkers trained in the demography/population project model by outsiders, described these complaints as “rascality” (Kabeer, 1993, p.105).

The demographic is a place where gendered bodies and gendered actors intersect with macro structures and policies. Fertility, for example, has been the focus of much demographic interest, but it is fertility in the aggregate with the ways in which families and women make choices, indeed whether they have choices to make and the contexts in which such choices are negotiated, largely omitted from the analytical screen. Certainly, gender as a structure, as a social relation, as a self-identity and as a bodily manifestation of sex and sexuality (see Keller, 1989), have been overlooked almost completely by traditional demographic approaches. Some such as Kabeer (1994), Riedmann (1993) and Furedi (1997) might argue that they have been suppressed, or walked over by preoccupation with women as demographic category to be targetted.

The categorization quest, characteristic of quantitative methodology dominant in demography adds to the “de-gendering” of the discipline, or its lagging far behind other social sciences in adopting gendered perspectives (Chafetz, 1997; Mason, 1986; McDaniel, 1996; Presser, 1997; Presser & Das, 2002; Watkins, 1993). The question of methodologies is a complex one, particularly when methodologies are seen as windows to the theorizing of a discipline (Acker, Barry & Esseveld, 1991; Fonow & Cook, 1991). If, for example, the theoretical interest is in the relationship of economic development to population structural change, the research problem is defined to make large-scale data analysis essential. Issues of individuals or gender as an identity or a socio-political force are simply excluded from consideration. Inclusion of women as one-half of a dichotomous variable “sex” is mainly called for and perhaps “status of women,” variously captured later when it becomes overwhelmingly evident that something about gender matters to both economic development and to population change. This is something even less than the much maligned, “add women and stir” approach. It is more gender as an add on, after the variable “sex” has analytically framed the research question and led to uncompelling answers. The World Bank, for example, argues Furedi (1997, p. 130), has no development perspective on women, it just sees them as a means to reduce fertility rates.
Impositional claims then are made on women as demographic subjects. For example, a rationality of discourse on sexuality and contraception in which women are expected to see their own lives and significantly, reproduce in words and images acceptable to demography, the ways in which their reproductive lives exist (see Folbre, 1994; Hanson, 2002; McDaniel, 1996). Sexuality in the demographic project becomes clinical, a process whereby details are obtained about the bodily, about contraception, sexual practices, knowledge and beliefs, but curiously without an infusion of sexual politics or gender contexts (see Hanson, 2002; Mason & Taj, 1987). Sexuality through demography becomes a tourist trip, observed but not examined or analyzed, the academic equivalent of the bare-breasted women in National Geographic or on PBS when the pictures are pored over but the text of their meaning is obliterated by the reader/viewer. Women as a category are literally spread out for prodding in the interest of population studies and policies, as they have been in biomedical research and medical practice (see Hanson, 2000; 2001).

Gender as a social relation has been hidden from view as well by the demographic category (see Riley, 1997; Presser, 1997). For example, women’s membership in family, community or socio-political groups as a means by which identities, meanings as well as behaviours are constructed, reinforced and reinvented (see Kaler, 2000) has been largely ignored or unseen in demographic research. Focussing on the level of social groups could reveal both the strengths and limitations of women’s agency and women’s embeddedness in social structures beyond their demographic categories.

A POLITICAL PROJECT ESCAPING POLITICIZATION

Demography, as a project, developed from its historical inception as politically conservative and imperialistic (in disseminating ways of life and ways of creating families from a culturally and economically dominant part of the world to the rest) (Kabeer, 1994; Presser, 1997; Riedmann, 1993). Yet demography as a discipline has escaped a thorough-going infusion of feminist knowledge. As Presser and Das (2002, p.165) argue: “...about the importance of gender issues in the population field, we have a long way to go to fully incorporate this view into our research and writing.” As a practice, however, it has not escaped politicization so easily, as evident in the various world population conferences held in recent years, most notably the 1994 Cairo Conference on Population and Development (see Furedi, 1997; Keyfitz, 1995; Presser, 1997).
Answers as to why demography has not thus far been infused with the perspectives, sensibilities and theories of politics and particularly of gender and feminism is multifaceted. A full answer may not even be possible. However, numerous potential explanations can be proffered. The history of demography matters, as well as its cultural roots. Early demographers in the United States, for example, formative in the creation of the Population Association of America (PAA), were, according to Hodgson (1991) self-identified as scientists but actively pursuing a eugenics agenda with the stated goal of “improving the quality of the population.” They excluded Margaret Sanger, the well known birth control advocate and crusader for women’s rights, from being considered a demographer and therefore from running for Vice-President of PAA “because of her strong advocacy of the spread of contraceptive knowledge and methods to poor women... an agenda the field was later to acquire, but from a population control rather than a women’s rights or individual welfare perspective” (Presser, 1997, p.299). This debate has continued and become more active today as feminists contend with the population project establishment for legitimacy and power.

Cultural roots matter because of the zeal in the 20th century in the United States for eugenics (Wahlsten, 1997) and large-scale international “development” projects that often had (and still have) population control as their cornerstone, as we have seen. The world system demography project, as Riedmann (1994, p.103) terms it, has defined the need to limit Third World fertility as unquestioned orthodoxy. This is to be achieved by targetting women of childbearing age. Little time has been given to other theories, even the world systems theory itself or various development theories which would contextualize and deepen the project (Riedmann, 1994, p. 107). There is a casualness of treatment of non-demographic contextual factors and policy variables on the one hand, that juxtaposes the demographic quest for greater precision and accuracy of measurement on the other (Riedmann, 1994, p. 107).

Conservative tendencies and male standpoint epistemology pervaded the development demography as a discipline, giving it an air of moral entrepreneurialism. The latter emanates from the distancing stance of elite men in the First World over women in the Third World. It is a well documented stance in demography (Furedi, 1997; Mason, 1986; 1987; Presser, 1997). Many would argue that this has not changed much in the ensuing decades (McDaniel, 1996; Presser, 1997; Watkins, 1993, among others). The conservative agenda focuses more on the macro aspects of society (the overall well-being of societies or the world economy, for example) rather than on social change, or the well-being or betterment of women or other minorities per se.
The interest in demography was and is, on women’s changing and changed fertility and contraceptive behaviours, but with an explicit concern with *entire populations*, not with women’s rights and women’s agency as core focal points. Women’s issues and gender as a potential lens by which to see population, are therefore obscured by a veil of “national interest” or “world problems of population,” as defined by distant “others” to the women being studied. “For the population establishment, the issue is control over women’s bodies and reproductive capacity; for feminists, it is women’s right to control over their own bodies as an essential aspect of their sense of selfhood” (Kabeer, 1993, p. xvi). And control is filtered through socio-cultural and gender structural meanings. It may mean, as it did for women in the CAFN project, to define themselves as having the numbers of children God wills so as to not to stifle their opportunities for reincarnation (Riedmann, 1993, p. 98). It goes beyond demographic categorical approaches.

Indeed, it has been strenuously argued by some in the population establishment that explicit resistance to feminism and feminist categorization is crucial to the very integrity of the population field. Concerns about women’s rights, women’s health services and the call to end female genital mutilation, it is argued (see Westoff, 1995, for example) overlook the basic interest of population studies, population growth and how to limit its consequences. Westoff (1995, p.179) agrees that women’s inequality and all that it entails may be legitimate concerns, but he argues that focussing on women’s inequality would “ignore or minimize population growth and its perceived consequences.” His view is that the problematique of demography is population growth and how to limit it for the good of preserving the “basic conditions of life” (Westoff, 1995, p.181). Women’s rights issues then become subsumed under the overall goal of societal good, with the paradoxes remaining that it is women’s reproductive behaviours that are key to achieving the much sought goal and that eradication or at least reduction in gender inequalities is defined as apart from the calculus (useful categorizations) leading toward the “basic conditions of life” (Wang & Pillai, 2001).

Westoff is not alone in taking this stance. Several demographers who actively joined in the dissent about the Cairo Conference Program of Action, argued that shifting terminology from the traditional “family planning” or targeting of women by demographic category, to reproductive health, for example, would deflect attention from the more important issue of population growth *per se*. To focus on gender inequality, it is thought, draws away from other kinds of inequality. Evidence, the population establishment argues, is not fully in on the importance of gender inequalities to population and development. So,
preoccupation with women’s inequalities is unfair to men (see Presser, 1997, p. 315-317).

van de Kaa (1996), for example, expresses concern about the implications of shifting the focus of population study away from population growth and explicit population policies to reproductive health and population-related policies. While seeming to be a small change, the broader focus brings in issues related to the status of women. This worries van de Kaa (1996:33) because it, to his perception and that of other demographers, first deflects attention away from the traditional demographic focus on population growth per se and second, “the effects of improving the status of women upon population dynamics have not been sufficiently specified and quantified.” If the focus of demography has not been on capturing the status of women as an important dimension related to reproductive health and “basic conditions of life” (relying again on Westoff’s phrase), then the effects of women’s inequality on population dynamics indeed might not have been fully examined. The social construction of the demographic category excludes this consideration.

The debate sparked by the Cairo conference has opened a constructive leak in the gender boundaries established by demography as a discipline in several ways. Attention is focused in this debate on the demographic category and what is important to measure and why. The issue of vested interests in the categorization schemes relied upon by demography also arises. A third issue highlighted in the debate is the centrality of gender as a structure determining opportunities rather than as a variable or a biological category. In all of these constructive leaks in the boundaries of gender is represented the abiding disembodied morality of what demography should be and study.

On the front of demography as an applied practice, other constructive leaks have opened in relation to the categorization of gender. A central challenge for demographers, largely U.S. based and often working with international funding agencies such as the Ford Foundation, the Rockefeller Foundation, or the Population Council, was to convince leaders in less developed countries that population control was in their interest (Hodgson, 1991). With the advent of structural adjustment programs in many less developed countries (LDCs) in the 1980s and 1990s, this imperative became less vital, as population control was built into structural adjustment plans by international agencies such as the World Bank and the International Monetary Fund, largely indicating the success of the demography project (Furedi, 1997).

At the same time, international and national women’s movements along with the emergence of new mega-research findings showing the vital importance of women’s issues to the success of modernity projects,
have been very effective in placing issues of women’s welfare and gender equity centre-stage on the population policy agenda (Furedi, 1997; Pillai & Wang, 1999; Presser & Das, 2002). This was vividly apparent at the Cairo Conference and in new research findings which clearly indicate that women’s status is key to socio-economic development and well-being (see Chow & White-Berheide; Mason, 1986; 1987; McDaniel, 1996). This has meant that even as the project of demography has succeeded in its population growth focus, its own categorization and definition of the problematique has been contradicted by a contested categorization of gender, one which is involving of women’s agency as intertwined with and indeed contributing to, societal well-being and economic growth (see Ginsberg, 1989, for example).

THE GENDERED WOMAN USURPED IN/BY THE DEMOGRAPHIC

In the encounter with the demographic, in surveys or censuses or as the subject of population policy intervention, the woman as gendered agent (see Delphy, 1993; Ferber & Nelson, 1993; Flax, 1990; Folbre, 1983; 1994) is supplanted by the category female. More than the categorization of woman as female, demography seems to presume a transcendent essentialism of sex as a defining attribute of women —all women. Women, for example, are of interest in fertility surveys and studies only if they are of childbearing age. It matters not that some women in the category, “childbearing age” may be infertile, celibate, perhaps intersexed, or lesbian. It matters not that she may not see herself at all as a childbearer, let alone first and foremost, or alternatively that it is childbearing or parenthood that place her in the category “female,” in the first place, enforcing and intertwining her sexuality with lack of choice. The demographic category “childbearing (or potentially childbearing) age female” is constructive of her identity and subsequently of her potentiality and agency. Hanson (2002) adds that clinical pathologizing follows from defining fertility in relation to maternal (or of course, non-maternal) age. Without seeing fertility and its potentiality as a social relation, Hanson argues, infertility may be inappropriately diagnosed and treated. The research category, in this sense, becomes defining of the social terrain it purports to study and usurps the agency of its subject.

Women are categorized by essentialist “sex” as suspended in time and space. Since pre-pubescent and post-menopausal women are of little demographic interest, they are excluded by categorical fiat from the purview of study. Further, the construction of demographic analyses has
largely worked toward statistical credibility based on large-scale surveys at one or several points in time. The same individuals are seldom followed throughout the life course, until very recently with the advent of life history analysis and longitudinal data. This has meant that women, categorized as female, rather than as gendered persons with human agency, are also suspended ahistorically, at one moment in their life course. They do not become childbearing women through a social process taking place in historical and cultural contexts that shift, they simply are childbearing women for the purposes of demographic analysis, by the abstract process of demographic categorization. The suspension in space occurs as those classified as “childbearing women” are presumed to be comparable across the world and indeed comparability is seen as a desirable outcome of demographic research. It is simply and largely without interrogation, presumed that the categories demography constructs are real, meaningful and comparable.

The relation of core or existential gender identities as constructive of socially crucial trends and differentials may be excluded by the practice of demographic categorization. For example, it has been asked why it may be easier for women in “traditional societies” than for women in the West, to claim positions of political power (see Lorber, 1996, p. 151). It is argued, significantly for the interests of the project of demography, by Kopytoff (1990) that the core of womanhood (or immanent or existential being as a woman), socially defined, in many Third World countries, is childbearing. Everything else then for women becomes praxis and socially negotiable. Because childbearing is not childrearing, women may be more “free” in these societies to assume other roles. The paradox is that the existential centrality of childbearer may be the very springboard from which social opportunities arise.

The ways in which societies organize around childbearing is yet another plane of explanatory potential that with demographic categorization is simply unseen. In terms of women’s reproductive health, if women are defined as immanently reproductive, then services and access to technologies may seem redundant and granting to women power to change. Kopytoff (1990, p. 91) argues:

The crucial question... is this: granted that most and perhaps all societies posit that being a woman is an existential identity with a set of features immanent in it, how many such immanent features are there and what are they? Or, to put it most simply, the problem of women’s roles is not whether a society recognizes women as being different from men (they invariably do) but in how it organizes things around the difference.
In organizing around the presumed difference, gendered bodies and reproduction become pivots for societal stability, not readily altered without serious consequences.

In moving beyond the usurping of women’s agency by demographic categorization, there is more required than the deconstruction of the essentialism of sex. There is a sense that the essence behind the term “female” marks a set of truths to be unveiled by demographic analysis, to be discovered as real and universal. The role of the demographer or the survey/census fieldworker, in creating that truth is obscured and then denied. We have observed how that took place in the CAPN projects, for example. Practices are not seen as constructive of categories; they are given and imposed, cookie-cutter like. Knowledge found in the demography/population project is not thought to be provisional or contingent, but applicable in other contexts, generalizable. In the process of revealing this knowledge, revelation or exploration of contingencies is not possible. Choices obliterate along with human agency, except in the sense that respondents then become targets, as demographic categories, of international population and economic policy actions. Their potentiality for local actions is usurped by the process of categorization by powerful outside “others” (see Greenhalgh, 1990; 1994).

THE CATEGORIZATION DEBATE/POST-MODERN CHALLENGE

Categorization is central to all human knowledge, certainly central to knowledge about the social. Yet, in the contemporary debate in the social sciences between the centrality of category and identity, it has become less and less clear that category matters in any fundamental social or analytical sense. In debating post-modern stances on identity (see, for example, Jenkins 1996; 2000, among others), it is argued that emergence of self-identity, particularly Giddens’ notion of the reflexive self (1991) may be less characteristic of modernity than is social categorization. Yet, discussions of identity construction back firmly away from categories and categorization and into the emergence of individuals as agents of self-identification and, importantly, of social change.

This paper, in asking about the pivotal place of the demographic category as constructed by the demography/population project and its implications for women’s reproductive health, situates itself in the lively debate over post-modern identity creation and the role of the category and categorization as determining of the social sciences. In many ways, it is the emergence of a focus on the self and the production of narratives as a means of giving both meaning and ontological security amidst massive
social changes (see Giddens, 1992; Smart & Neale, 1999), that has brought
the bodily, intimacy, sexuality and reproductive health back to the centre-
stage of social discourse. An opening is offered to bridge the individual
with social structure, agency with social change, on intimate frontiers.

The demographic provides fertile terrain on which to explore the
category and identity because the demographic tends to create pure (or
almost pure) categories as part of its practice of social analysis. In this
sense, it parallels medical practice and social policy (see Hanson, 2000;
2001). The category usurps the individual and agency, but also creates
agency and identity in reaction to it. Identities form and re-form in
relation to official or biomedical categories and categorization. We come
to know who we are because categorizers tell us and we then respond and
recreate the imposed categories.

The categories demography manufactures become “hard-wired” as
reveals compellingly how the ethnicity category works in ways to create
and maintain identities. Rosenberg and Wilson (2000, p.10) show that
“[t]he surveys we use structure the very nature of the interpretations we
make...” both by the variables statistical agencies construct and by how
analysts choose to use variables in developing their analytical stances.
They show, for example, how reliance on “white” or “non-white”
categories for social analyses of health and poverty studies simply leads
axiomatically to the meaningless conclusion that whites are better off,
reinforcing crude and categorically imperative universalisms.

This article focusses on the demographic category as constructed by the
demography/population project as both binding and leaking boundary.
“Disciplines function as enabling forces for inciting and stylizing that
which they also come to regulate” (Singer, 1993, p. 6).That this is the case
with the demographic category as constructed and utilized by the
demography/population project has been explored. In constructing and
shaping women of childbearing age as subjects, the
demography/population project has denied both reproductive rights and
access to reproductive health resources. It has tended to impose an
external regime on women as demographic category, a regime that
recreates them as choice-makers and as consumers of an agenda not their
own.

CONCLUSION

This paper has provided a foundational critique of the demographic
category as eclipsing and sometimes as creative of women’s agency in
reaction. It is proposed that constructive leaks have sprung in the
boundaries and categories demography has established, leaks which can develop into a new feminist demography, the beginnings of which are emerging. These leaks reveal insights into the construction of women’s reproductive health needs. There is much that is post-modern in the leaky gender boundaries emergent in the demographic. There is the theme of a non-mechanistic and usefully contradictory, infusion of women’s agency onto the stage of major societal transitions in population, as well as in democratization, emergence of national identities, or identity movements such as feminism, among others. Among these are empowerment movements for women’s reproductive health, emerging in large part from the packaging of women into demographic category and their resistances. There is the theme of the body and its capacities as a social construction, enabling women to “take back” the construction and make it their own.

There is the important theme of gender as an identity, rather than a biological category or a demographic essentialist property, or an analytic variable. In this, gender affects demographic change; it is more than an obstacle or an instrument to ends defined by others, elsewhere. And there is the theme of epistemological claims made by the socially marginal, for example, women from Third World regions, in challenging the epistemic privilege of the dominant powers in the world. This is most vivid in the cries of respondents for structural change, not more research that defines and prepackages them into demographic categories. Among the structural changes women seek are access to reproductive health resources, on their terms for their ends and purposes. Social knowledge can be gained by engagement of women’s agency with the demographic category of gender/sex, knowledge too important to overlook by strict and rigid adherence to outdated and imported categorization schemes and global policy agendas written in the First World. Making gender and indigenous women’s voices from a feminist perspective central to the project of demography/population is a significant way to achieve new levels of women’s reproductive health worldwide.
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