Embodiment and Emotionality of Women Credit Clients: Scrutinizing Agency Constraints of Microcredit Clients in Sunamganj, Bangladesh

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Abstract
This paper unfolds how the agency practices of microcredit clients are produced and reproduced by the intended actions of agents in terms of ‘embodiment’ and ‘emotionality’. To justify the process, data of the present study were collected through in-depth informal interviews and an interview guideline was used for specific questions and issues in the view of analytical framework approach. Socio-cultural constructions within any particular society typify the agency exercise of a particular group of people involved in the process. In this regard, the study finds that ‘emotionality’ and ‘embodiment’ related issues are the confine factors of the clients; hence, are considered as socio-cultural barriers that are so important to grasp before development intervention and implementation. And the study also finds that the repayment pressure of credit brings emotional stress and anxiety in the everyday life of clients involved with microcredit system. Therefore, replication of microcredit operations should consider the internal structure of the particular social locale.

Keywords: Agency, Microcredit, Embodiment, Emotionality, Bangladesh

1. Introduction
Microfinance, as an effective poverty alleviating instrument, is the core of the largest NGO programs in Bangladesh. In recent years there have been significant advances in the ideas of poverty reduction policies and programs, but poverty reduction is not a simple formula; rather it is connected with larger socio-cultural and institutional complexities. Despite the NGOs and microfinance institutions boom in Bangladesh, the poverty situation in the country has not significantly improved (Sen, 2002). This is not only due to the failure of neo-liberal development strategy and discourse but also the lack of sociological understanding and research. Literature on microcredit clients underscoring both subjective and objective factors are really in dearth. Thus, it is important to uncover the relationships between structural constraints and enablement and the ability of exercising human agency by the micro-credit consumers. For the sake of this intention, the present study reveals the constraining factors of human agency as aftermath of microcredit program in Bangladesh villages. In other words, this research tries to explore the factors related to human agency that may hinder their practice of agency in a socio-institutional atmosphere. In doing so, Frances Cleaver’s (2007) theory on Understanding Agency in Collective Action is incorporated here. Specifically, this study shows interest to explain how embodiment and emotionality may affect microcredit clients’ agency and are also influenced by the social structure. More precisely, it does not concentrate on measuring; rather understands the process of poverty reduction in terms of the ability to exercise agency by the microcredit consumers. The present study selected BRAC (Bangladesh Rural Advancement Committee) microfinance clients because of its diversity in programs and people it reached. BRAC is an NGO which delivers ‘credit plus’ services to the poor. Its members have access to microcredit and savings which will further help them reduce vulnerability and support their self-employability through it’s ‘credit plus’ approach. In general, the study endeavors to understand the meaning of events, situations, experiences, beliefs and actions of the agents (credit clients) that may create implicit/explicit constraints in exercising agency and how agents’ own understanding influence their behavior.
2. Sampling and Data Collection

The present research prefers BRAC’s ‘dabi’ (credit ladder) clients as unit of analysis. Derai Upazila of Sunamganj district in Bangladesh was selected because this is one of the initial areas where BRAC took its first microcredit inception in 1974. Therefore, impact of microcredit program on the clients’ agency could be verified efficiently. Present study has employed convenience sampling in order to select respondents. There are 32 villages outside the municipal corporation out of 43 villages in total. Thus, according to one criterion of the research 3 villages were selected where regular and irregular clients are available. Under Derai branch, 2,518 of 3,468 clients are regular and rest of them (950) are irregular. The study identified each VO leader for all three villages (Hornagar, Rajanagar, and Hajaripur). Then respondents were purposefully selected for the interviews. For this study, 16 in-depth informal interviews were conducted. Among them, 4 from Hornagar, 5 from Rajanagar, and 7 from Hajaripur, Nayagaon. Data of the present study were collected through in-depth informal interviews under the interview guideline for specific questions and issues. Same basic style of inquiries was followed for each microcredit client. Researcher and two field investigators have used local dialects that lead a great advantage to understand clients’ real life actions, attitudes, beliefs and motives. All interviews were recorded through voice tracer along with field notes. During field work period, interviews were being processed to the portable computer for transcribing the data. After accomplishing the field work and transcription of data, each issue was categorized separately. After ending up transcribing and categorizing interviews, analysis of the data initiated under the auspices of Analytical Framework Approach through which data were organized to describe important processes of clients’ everyday life. For the analysis, this study divided each issue interviewed into two parts- descriptions and interpretations.

3. Conceptual Framework

Frances Cleaver (2007) puts forward an eclectic idea of understanding human agency in the management of natural resources. The core hypothesis is that through participation in collective resource management people can renegotiate norms, challenge inequalities, claim their rights and broaden their access where the central idea seems to know how agency shapes and, is formed by, social relationships and institutions (Cleaver, 2007). This idea has brought into the present study from Cleaver, but implies for different propositions. She applies six enabling/constraining factors in working out human agency, these are- local moral world views (cosmologies), complex individual identities, unequal interdependence of livelihood, structure and voice, embodiment and emotionality (Cleaver, 2007). The present research looks for the impact of rural microfinance on the clients in terms of two enabling and/or constraining factors namely, embodiment and emotionality. Undoubtedly, the research considers important to shed light on the theories germane to and concepts avowed by two influential theorists; Pierre Bourdieu and Anthony Giddens.

3.1 Embodiment, Habitus and Body Hexis

Cleaver (2007) applies embodiment as one of the enabling and/or constraining factors in understanding agency in the management of resources. She incorporates habitus (Note 1) from Bourdieu in order to explain that accessing and using natural resources is often a very physical activity but human agency through ‘corporeal’ self is mostly neglected in social analyses (Cleaver, 2007). Able-bodied and disable-bodied could have different capabilities to exercise agency in terms of participating in the public event, accessing resources, interacting with other members of the society. Agents’ physical states, for instance, being hungry, tired, feeling cold, warm, wet etc. have detrimental effects on the agency (Cleaver, 2007). Therefore, this paper would rather be interested to see whether embodiment affects microcredit clients’ agency positively or negatively. In so doing, two connected concepts - habitus and body hexis (those are culturally inculcated and hence reproduced embodied world-views that may hinder people’s capability to exert agency in the social milieu) must be incorporated here. As explained by Bourdieu, habitus is the universalizing mediation which causes individual agent’s practices without either explicit reason or signifying intent (Bourdieu, 1977). Citing Bourdieu, Baert (1998) clarifies this concept as a generative scheme of disposition, tacitly acquired through early childhood and, therefore, considered durable. As a result, these dispositions, he adds, generate people’s practices, improvisations, attitudes or somatic movements (Baert, 1998). Bourdieu (1977) further asserts that habitus provides a ‘practical sense’ that allows people to develop an infinite numbers of strategies to cope with an unlimited numbers of situations. Hence, Bourdieu believes that habitus transmits without conscious intention (Throop & Murphy, 2002). On the other hand, body hexis is used by Bourdieu to indicate a variety of socially repeated ways an individual moves, carries, and positions his or her body in the lived world (Throop and Murphy, 2002). Bourdieu (1977) says that body hexis is the performing aspect of habitus as a durable organization of one’s body that is charged with the host of social meaning and values. As Throop and Murphy (2002) explain, body hexis is a collection of ways in which our bodies are conditioned to habitually stand, speak, walk and move, and, hence our identities become corporeally informed and grounded.
They also put forward, echoing Bourdieu’s opinion, that these forms of bodily automatisms are the main sources of our institutions, feelings and common sense. Moreover, the cultural distinction is reproduced in a society on the basis of spatial division between ‘male space’ and ‘female space’ (Bourdieu, 1977). The opposition between movement outwards (fields, markets, production and circulation of goods etc.) and movement inwards (accumulation and consumption of the products of work) corresponds to the opposition between ‘male’ and ‘female’ body (Bourdieu, 1977). Bourdieu (1977) says that the opposition between the centrifugal (male orientation) and centripetal (female orientation) is the true principle of the domestic space and this is the very basis of the relationship of each of the sexes to their ‘psyche’, consequently to their respective ‘bodies’.

The present research discusses whether people suffering from disease and other physical incapability have constraining or enabling impact on their agency as a result of rural microcredit. Cleaver (2007) also notes that frequently gendered bodies are constraining factors for women in accessing natural resources. Taboos around women’s behavior may also restrict appearance in the public place which may hinder their agency; therefore, this paper seeks to investigate as to how far rural microcredit programs affect these taboos. Moreover, this study seeks to explore whether pregnancy, child birth, caring for sick family members, large number of small children affect clients’ agency to attend social events and group meetings and other public events. How do they feel about these constraints? And do they explain their ‘practical sense’ defending their psychic situation?

3.2 Emotionality

Another potent and/or constraining factor is emotionality. For this factor, Cleaver (2007) recognizes the importance of unconscious motivations of conscious action as well as unconscious self disciplining of agents and internalization of hegemonic norms. Social theorists believe that not all individual acts are the consequences of conscious strategy; rather are the outcome of habit, routine and functions of the unconscious mind (Cleaver, 2007). We find this conclusion from both Bourdieu and Giddens’s theories on habitus and stratification model of action (Note 2) respectively. Cleaver (2007) says that both conscious and unconscious emotions are crucial in shaping people’s understanding of self-efficacy and social relationships; hence ‘imagined autonomy’ is an important factor in peoples’ understanding of their own agency. Thus, the present paper examines the processes and extent of the impacts of microcredit programs on the emotional bearing of the clients; and consequently their ability to cope with such situations. It is to note here that, ability to deal with the situation determines the degree and level of exercising agency. Cleaver (2007) remarks Giddens’s and Long’s affirmation that emphasizes the structural constraints within which agents act, the non-reflexive nature of much of everyday practice, and the intended and unintended effects of individual action. An individual actor has the capacity to practice social experience and to plan ways of coping with the situation even under the most coercive form (Cleaver, 2007). Giddens (1979) inclines towards an emphasis about the nature of agency as reflexive action. At this stage he conceives three types of consciousness—discursive, practical and unconscious (Giddens, 1979). According to Giddens, discursive consciousnesses are the actions and beliefs that agents are able to bring with reasoned scrutiny; practical consciousnesses are taken for granted everyday practices that are part and parcel of routine habit and are rarely subjected to scrutiny (Giddens, 1979). Giddens mentions that structures are unintended consequences of our daily practices and they also feed back into our everyday practices as unacknowledged conditions of next actions (Baert, 1998). In understanding agency of the microcredit clients, this paper also seeks to identify the emotional aspects of repayment conditions and its subsequent results on the individual and household matters. How do they discipline themselves and internalize the hegemonic norms of the society? Whether these forms of minimizing techniques are discursive or practical consciousness of the agents?

4. Description and Analysis

As a basic qualitative research, the conceptual framework of the present paper closely shapes the analysis of the data. Two primary sources of data for this analysis are—question guidelines that generated before field work and analytical insights and interpretations completed during data collection including observations. The paper describes different aspects of embodiment and emotionality followed by their specific interpretations for enhanced understanding of the facts. Thus, this study takes into consideration only those issues and matters which are central to the proposed conceptual framework. Therefore, an ‘analytical framework approach’ is used to describe and interpret data. The description of the present analysis starts with the ‘cross-case analysis’ (Note 3) and ends with the ‘case analysis’ (Note 4).

4.1 Sick Caring, Embodiment and Emotionality

In order to explore the embodiment related constraints to exercise agency by the female clients, several questions were asked through in-depth informal interviews. From the observations during field work, it was found that almost all of the BRAC female clients do not have direct control over their credit based activities; rather either their
husband or adult son uses the credit. Therefore, health related problems of other members of clients’ families affect the overall household activities (rearing children, poultry feeding, kitchen gardening etc.). The study explains some vital quotes of interviewees in relation to their daily lives. A client named Sumana who lives in Rajanagar village gives her testimony that if any of her children falls ill she faces trouble due to her unavoidable involvement in family matters (in the form of maintaining household’s interior activities). Sumana further adds that this has long been a common problem for many women who fail to show up in weekly meetings due to these kinds of family difficulties. This indicates that BRAC transfers their institutional transaction costs of lending to men through women in this way. Another BRAC VO member Jahanara, who lives in Hajaripur, village, says that her husband is paralyzed, and he cannot pull rickshaw (Note 5) regularly. Jahanara points out:

“Therefore, I feel pressure and I must do more works to maintain my cows”, she says. “I cannot give attention to other things. When my husband does not pull rickshaw I arrange kisti (premium) for repayment of loan by selling ducks. Even, sometimes, I arrange kisti by borrowing from others.”

Shahina cites another former BRAC client (Saleha) who works (as a chef) for BRAC office now. She says that her husband had gone (as and when she is talking with the researcher) outside to pull rickshaw in the rain. She scared off, if her husband falls ill, she will not be able to repay the loan’s premium due in the next week. Shahina says:

“Saleha took many named loans from BRAC and that is why she was unable to repay the loans in the due course. Now, she is working for BRAC staffs. Her husband was sick; therefore, she worked in many others’ homes.”

Sometimes, BRAC gives credit to a woman who has a physically disabled husband provided that she has an able son who can work. Sneha of Hajaripur village says that her husband is sick, aged and paralyzed. She says that she is lucky because she has an adult son. That is why they (BRAC) gave her loan. Now, if her son falls in sudden ill, she will have no way to continue her household activities. Karimunnessa relates her experience on these facts in a little different tone than others as she reveals:

“While my husband was unwell I tried maintaining all things for my household well-being. I worked in others’ households even though I had small children. I think if one wants to work, nothing can stop him/her. Stopping a work showing excuses is tantamount to thieving. When there was no chaal par deya (machine for grinding rice), I did it manually. And in many homes, I weaved kantha (Note 6) (quilt) also.”

An irregular client, Shamsumnahar, who is 32 years old, lives in Guchchagram village says:

“Usually, we did not miss the shaptahik kisti (weekly premium repayment). Once, my husband was affected by hridroog (heart-disease) and then we had to spend around Taka 30000 to Taka 40000 (Note 7) for his treatment. We faced really a serious trouble in repaying since at that time he could not work for his health condition. Therefore, we were unable to continue credit. Finally, we repaid them as I collected another credit from ASA (Note 8) to repay BRAC.”

Amina of the same village says that if someone in the family falls ill, she borrows money with imposed shud (Note 9) (high rate of interest) from a mahajan (money-lender) of her locality.

Concerning embodiment and emotionality this study gathered some embodiment-related issues that constrain clients’ room to exercise agency. Clients feel that loan repayment is the most crucial indicator of their human capability as other daily activities depend on the promptness of credit repayment. But, it was observed and found that this capability is constrained by disease and sick caring of family members. Because, women are only borrowers and their capable adult male family members are the users of these credits. Therefore, able-bodied clients’ agency may be constrained by diseases of other family members. Moreover, women clients sometimes cannot attend their VO meetings due to these difficulties; hence they are not able to share their experiences and problems in the gatherings. On the other side, there are very few clients who can work during their pregnancies or with small children. One client was found who copes with her difficult times through reflexive consciousness as she sees ‘there is no problem if one wants to work’. This woman sustained her capability to work even though she had little children while her husband was sick. In his theory, Giddens (1979) sees reflexive consciousness as agency of individual agent. Therefore, it can be said that this woman can, at least, exercise a part of emotional aspect of agency which seems to be exceptional. This study also explores the embodiment-related constrains of a former BRAC client during their membership to VO. They also say that they were let down by the failing health of their male family members which, in turn, forced them to borrow credit from another NGO in order to repay...
BRAC *kisti*. Sometimes, they collect money borrowing from the *mahajan* (money-lender) available in their villages to pay back the *kisti* (premium or installment), which, in fact, adds to their tally of the existing loans. This strategy, in a sense, can be dubbed as *discursive consciousness* but it gives further constrains to them in the form of repaying more credits than before (multiple in place of a singular shot), which, nevertheless, can be seen as unintended consequences of that conscious action.

4.2 Health Practice, Embodiment and Emotionality

At the time of illness of clients themselves or their nearest family members, visiting doctors/hospital/healthcare center etc. is a kind of exercising agency. But, frequently, these practices are handicapped by the traditional and routine beliefs/attitudes of the clients. Therefore, the role of traditional health behavior, knowledge and attitude to illness and disease hang on existing health problem which, in turn, affect exercising agency by the clients. Disease is often conceptualized as the notion of being in suffering caused by ‘illness’ because it refers to the functional capability of the body. From the field visit, it was found that the common traditional treatments (Note 10) include *pani para* (water incantation), *jhar foo* (oral incantation), *tabij kabaj* (sacred amulet), *tel para* (oil incantation) etc. Most of the credit clients practice the traditional treatments followed by comparatively modern treatment (allopathic treatment). As Karimunnessa briefs:

“We go to doctor if we have disease. Look, this child (showing a young boy nearby her) is affected by diarrhea. My son will take him to a doctor. We do not go to *kabiraj* (ayurvedic practitioner); rather we go to the hospital. They (that child’s family) collected *pani para* but it did not work. Does this *pani para* work nowadays? We always go to doctor long before we started taking credit from BRAC. When there was no doctor in the past, we went to *bangali kabiraj* (Note 11) (ayurvedic practitioner). They are not available now. Bangali Kabiraj mediates for *upri roog* (Note 12) (invisible disease). Now, people go to doctor for all diseases. People do not take *tabij kabaj* (sacred amulet) nowadays.”

Another client Rupbanu says that usually they are not suffered from any diseases by the grace of Allah (God). If they feel feverish, they usually go to doctor, she adds. Anwara and Afia of the same village (Hornagar) give the same opinion. Women of the studied area gave justification that they do not go outside alone for the treatment of their small children. They allege that sometimes doctors give them wrong treatment. If they visit a doctor, they usually go with the senior male member of their family. As Sneha of Hajaripur, Nayagaon says, “we do not go outside. Their (children’s) father would have done this if he does not feel sick. He is now paralyzed.” The same testimony is given by Sharnalata of Hajaripur, Nayagaon. Amina, who was a client of BRAC few years back, says that she goes to the government health complex in Derai Upazila. She explains:

“In this village BRAC has no health program. We know it is available in other villages. Sometimes people from ‘Family Planning’ come to us and they give few medicines to us. There is no program from *pusti* (Note 13). People from *pushti* give vaccines to the pregnant women of those villages.”

During the field visit it was remarked that clients seem to be affected by many diseases. Recurrently, if they feel sick, they are used to practicing traditional treatment for disease. Although traditional health practice beliefs sometimes work for people, but the study shows that these conventional approaches result in prolonged illness which consequently may intensify constrains over practicing conscious treatments. This is significant in understanding clients’ agency because illness of family members constrains women to exercise other economic and noneconomic agency. Additionally, erroneous conception (grew through everyday practice) about disease also promotes to practice traditional treatments. Visiting doctor during illness is hampered by these traditional and routine beliefs of treatments. One of the most frequently used traditional treatments, as mentioned above, is ‘water incantation’ which is regarded as the first hand treatment for all diseases in the majority of the villages. The notion of this type of practice is, in fact, tacitly acquired, habituated and is transmitted to their beliefs without any conscious scrutiny. Sometimes, the habitual conception of the causes of disease constrains somatic movement of female clients. Therefore, relationships of ‘body-space’ and disease are culturally constructed. Not only for *purdah*, but women cannot go to some unacceptable places at any undesirable time in the day to avoid the risk of *upri roog* (unknown diseases affected by invisible spirit). Because, young women’s uncontrolled corporeal movement may affect them by invisible spirit (*upri roog*). Thus, the notion or cause of disease is acquired and is transmitted through everyday social life without any reflexive meaning and values. But, interestingly, former BRAC clients (those who are not BRAC clients anymore) go to the hospital in the study area. They know that BRAC and other NGOs have no program on health facilities in their own village or the other. This conscious information about health care provided by NGOs is quite contradictory to the BRAC’s announcement.
4.3 Clients’ Disability, Embodiment and Emotionality

The study also took a look at possible illness or disablement of the female clients themselves. The present study did not find any BRAC client who is mentally impaired, single-widowed, aged couple, disabled and pregnant women. But, there are clients who are widowed with adult children who get credit from BRAC. It is one of the objectives of the present study to find out whether there is any client with above mentioned criteria. Furthermore, the study also explores opinion of current and former BRAC client about those cases. Current BRAC client Sumana of Rajanagar says:

“BRAC does not help widowed and pregnant women. Though there is no woman with this type in this village, I think they must be given credit because they have nobody in their family who can take care of themselves.”

Bimala from the same village says that she continued credit during her pregnancy. She worked with BRAC credit during her pregnancy and at that time she had small children also, but she did not face any problem. Shahina informs that BRAC gives credit to pregnant women too. She says:

“If they (BRAC) think that credit will not be lost, they give it to the women those who are poor. Saleha had two young children and that is why Saleha got credit from BRAC during her pregnancy.”

Maleka lives in Hajaripur, Nayagaon. She mentions that BRAC had a policy to give credit to widows. Now, BRAC verifies who will run (take care of) credit before finalizing credit scheme, as she further adds on this: “there must be a man with those women to be eligible for credit. ‘The fact that at least one must be ‘male’ and capable in the family which is not fair’, she views. Karimunnessa of Hornagar says:

“As far I know BRAC did not give loan to a woman who has not husband and adult children. These women do not draw credit from BRAC. How will they return the money? I think if a woman thinks that she will be able to maintain the credit BRAC should give her credit. If these women work hard they will be able to repay BRAC’s credit.”

In the studied villages, no client was found who is mentally impaired, widowed, aged or pregnant. Therefore, the present study does not support the results found by Matin and Hulm (2003) about widows and abandoned wives. They considered a better personal agency for these kinds of clients in IGVGD program of BRAC in Matlab (Matin & Hulm, 2003). Note that, the BRAC staff says that they give credit to all women who, at least, seem to be capable. In the present study area, some of them were pregnant previously and they have experience of running credits during their pregnancies. Other clients give their opinion on delivering credit to pregnant and widowed women. One client utilized BRAC credit discursively (through conscious emotion and insight) during her pregnancy as well as while rearing a little child at the same time. Others give mixed opinions on that issue. Some of them think women are not capable during their pregnancy and the rest of them consider that it is not fair if BRAC does not give credit to women who are expecting. In Matin and Hulm’s (2003) study, it is also found that the priority of delivering credit goes to widowed and abandoned wives in terms of sympathy which stems from social values. But, for this present study, empathy goes to those women not from BRAC but from women clients. It might be that BRAC do not trust on women’s ability of running business/enterprise successfully; rather they use them to deliver the credit to the capable male members of the society. Through this strategy BRAC reduces its transaction costs in recovering credit installments. This idea can be found in Rahman’s (1999) study where he termed Grameen Bank’s strategy of loan repayment and targeting women as ‘hidden transcript’. In rural Bangladesh, women are commonly identified with modesty and purity and this social reputation is closely connected with the responsibility of social collateral described by Rahman (1999). Therefore, BRAC would have applied this idea as their ‘hidden transcript’ to collect repayment of the credit with the highest success (According to BRAC Annual Report 2007, their loan recovery rate is 99.54%).

4.4 Clients’ Physical States, Embodiment and Emotionality

Opinion about the relation between physical state and credit utilization and attending group meeting were given by BRAC clients of studied area. They also expressed their attitude about attending social and public events. Generally, a group meeting is held in the VO leaders’ homes. All other VO members attend the meeting weekly. Sumana has some literacy (primary education) and knows sewing. She earns extra money by sewing inside the home. Sumana says:

“Group leader is my ‘jaa’ (wife of husband’s brother). She is our neighbor; therefore, I do not feel any problem attending the group meetings. Usually, VOs are located inside the village so that women can easily attend the meeting every week. If a VO
meeting is held far away from our home then other people might comment otherwise if they see me walking on the village street.”

Karimunnessa says that she attends weekly meetings regularly. She says, women who live little far away from group leader’s (president of VO) home also attend meetings regularly. She adds that does not feel tired or annoyed and must attend meeting as she takes credit from them (BRAC). She gives important information about attending meeting of those members who fall sick:

“Those who are sick or even pregnant request others to take care of their kisti (credit premium). Sometimes we all arrange their kisti then they repay us later on. The most important thing is to repay the credit; therefore, if one does not appear in the meeting it does not bring any problem if she pays her kisti through other.”

When women clients were asked about attending social and public events, almost all of them said that they do not get invitation for social events (marriage ceremony or the like events). Some say there is no custom to invite women in their village. They relate these phenomena with their movement outside home. As Suchitra says:

“We do not go to social events, but, if an event is organized by nearest relatives, then we go. In this village, people invite only male family members. We have no tradition to invite women here; we will go if and when the time (generational tradition) comes in our society. Our father-in-laws did not bring us to any home even four homes away from our home to attend social events. Now we can go even beyond four homes. Our sons’ wives will enjoy this if ‘time’ comes.”

Another villager of Rajanagar, Bina, shares the same line of thinking. She states apparently that people invite males only. She says that she does not get upset for this because it is the tradition of the society. VO leader Jahanara says that no practice of inviting formally exists in this village. Bimala expresses her opinion about this phenomenon in the following way:

“I do not go to social events because of so many difficulties in my family. I must take care of family matters, and if I go outside my husband will ask me how the family will be run.”

In understanding human agency, it is also important to explore the physical states and freedom of movement of clients because these may hinder their presence in weekly group meetings and other social events. Clients do not face any trouble in attending the meeting because all VOs are placed inside the villages (sometimes, very near to their homestead) so that they do not have to walk a far. Therefore, they see, there is no constraint to attend the meeting. However, practically they think that they might face problem if a VO resides far away from their home. In this case, pregnancy of a woman obstructs to attend meeting. Here, mutual trust among the clients plays a role. If any woman cannot turn up in a VO meeting due to physical states, other members take care of her kisti which she later pays through another. Alternatively, the woman who is pregnant cannot share her participation in the meeting and hence may lose her agency in shaping the social relationships. In the studied area, women clients do not attend any social events even inside their village territory. There is no custom to invite women for social events which constrains women’s movement outwards. They see it as a regular and routine phenomenon. Even they do not feel unhappy when they get invitation in their husband’s name. Therefore, clients internalize themselves for this routine phenomenon through the hegemonic norms (‘male orientations’) of the society. Quite interestingly, some of them yet seem to be optimistic for an evolution towards more freedom of movement for the next generations which indicates their conscious disciplining by themselves with a conscious hope. With respect to these phenomena, women cannot interact with other villagers except for some authorized individuals. As a result, even though weekly meetings give women a chance to show up their own identity outside family, they are not exposed to other social events.

4.5 Work, Embodiment and Emotionality

Women clients of BRAC in the studied area provide their attitudes/opinion, specifically, their psyche about the relationship between ‘sex’ and the preference to do a ‘type’ of work. Almost all of the interviewed women clients opine that women have a different type of work than that of men in the society. In the society, they perceive recognized customs of doing work by each of the sexes. It was observed from the field that those women who are widowed work outside the home. On the other hand, those who are poorest of the poor also work outside. They work in the soil digging, tree plantation and constructions sites. One VO leader of Hajaripur, Nayagaon, Jahanara, says:
“I have leased a piece of land from another villager but I do not work in the field. In our society, women do not work in the field. If I feel confident then I work only in the interior of the home, for instance, household tasks, maintaining cows which I bought by the credit, etc. We have no purdah because we are poor.”

Shahina, who lives in the same village, says that she works in the field. If she works in her own (family owned) land nobody will say anything, she adds. Maleka says carefully:

“Women can work together but the form would be rather different. If a woman wants to survive along with her children, she must work. But, I must say that women cannot plough, they can at best assist their husband by bringing food in the field at the time of lunch.”

Karimunnessa says that men can do all kinds of work but women cannot. She points out that women can do some works such as cutting soil, planting tree on the roadsides, building construction, etc. along with working at other’s homes. But, she identified some works not for female as she says:

“Some of the works I mentioned are actually for men. Some women can go outside and work. A widow can work outside. Nobody will treat her as a bad woman. I think everybody works with her maan shomman (social honor). I worked at peoples’ houses during my tough time before. I maintained my maan shomman too.”

Amina of Guchchagram village says that she looks after their cows as she illustrates:

“I and my husband, we both, look after our household matters. If my husband comes home late, I bring in cows from the grazing land. We cannot keep our cows in the haor (Note 14) overnight, can we?”

Shamsunnahar says that she faces problem in rearing child, and hence she has not much time to help her husband’s business (her husband’s business is a kind of petty trade of dry fish. He ferries business door to door). She says in her own language;

“Should I help my husband in his business? It is not possible. Even, I did not do this kind of work when I was in my father’s house before my marriage. I only do work inside the homestead area.”

In the study area, women are the borrowers and their male members of households are the major users of that credit. It was observed from the field that barely a few clients assist their husbands’ activities (for instance, collecting raw materials for their enterprise or assisting them in the field). It was found that women clients run their enterprise, if it is close to their homestead area, and help their husbands or other male members of the family. Thirty eight years old Rupbanu who lives in Hornagar says that they have small grocery shop close to the home area. Her husband runs a business. She claims:

“I help my husband when he goes to the bazaar (Note 15) (market place). I do not face any trouble because the shop is adjacent to our home. We do not go outside. I have a son by the grace of Allah. He goes to bazaar also.”

Some other clients do their different works. Sumana is quite different since she is the only client who seems to be sufficiently independent. She says:

“After finishing household task, I do shelai kaaj (sewing). I got sewing training from IRA (Note 16) (Integrated Rehabilitation Approach). When I have spare time I do it and that is why I can assist my husband financially and mentally. We cannot meet our daily necessity with his income only. He sells sit kapor (low cost cloths) from door to door in the villages. When my husband goes to the town for different purposes, he buys raw materials for sewing. Moreover, he is experienced because frequently he buys things (cloths) from the town.”

It was discovered during interview that she does not buy any raw material for her sewing activities. Her husband brings these things. Other clients (Jahanara and Shahina) maintain cows and sell milk to the villagers. Some others do not use the credit for productive purposes (for Anwara and Afia). They take credit to rebuild their house or for accomplishing their girls’ marriage ceremonies or the like events. A very few use this credit in order to arrange funerals (shraddya) of close relatives (Bimala’s father-in-law) and to maintain personal temple (house of worship for Arpana). Some of them work at others’ houses in order to sustain and repay the credits.

From the above description, another constrain in exercising human agency for microcredit clients is identified as the customary conception of the relationship between the ‘sex’ and the type of work. This kind of psyche of women clients about gendered occupation constrains them to exert agency in broader public spaces. Particularly,
there are institutionalized customs of doing work by male and female differently. There are some exceptions also. Among the clients, relatively poorer and single widows can work outside and at other’s houses. Note that, social honor is very much important for all clients and it depends on the type of work. Women do not, and obviously, cannot challenge these norms. ‘Public’ and ‘private’ spaces for women clients are socially constructed by themselves and all other members of society. Therefore, this is a kind of *body hexis* because clients pattern their behavior through culturally constructed and informed spatial configuration bringing social meanings and values. They interiorize themselves by the prevailing norms, but do not think microcredit is positive for them. In this point of view, a little different result was found for this study. Because Kabeer (2001) observes, according to testimonies of women clients, that women are happy with their adherence to *purdah*. Kabeer prefers to call it *doxa* because of the systematic difference between ‘male’ and ‘female’ occupation and their consequent confinement towards inside household. This is true for former BRAC clients also. Occasionally, they go to the field. They are circumscribed by their everyday learning about ‘male’ and ‘female’ work and their acceptable and unacceptable spaces. Clients assist their active credit users on the basis of the same distinction between two spaces. Thus, the distinction between *centrifugal* (male occupation or public space) and *centripetal* (female occupation or private space or domestic space) is habitually conditioned to clients’ everyday somatic movement. Even, those who are relatively efficient do not assist their male credit users outside home though they help them doing some extra income generating works inside home. Clearly, these kinds of performing aspect of *habitus* create constraints on clients’ economic agency; therefore, they remain dependent on their male household members.

4.6 Land Ownership, Embodiment and Emotionality

In the selected villages, very few of the credit clients enjoy lands albeit these are owned by their husbands. It was revealed from the fieldwork that women who were inherently favored by the religious and state law (Note 17) have their own lands. Clients give their opinions and attitudes about the land ownership and possession. As Sumana observes:

“We have no lands except homestead. I do not possess any land because in our religion woman cannot have land unless she does have any sibling. But, I think women can possess land irrespective of stated or not stated in my religion about land possession by women. I can own land; even I can buy land in the name of my children.”

Arpana has 10 acres of lands. Her husband died few years back and that is why she is owner of those lands according to the state law. She avows that women must obey the rules of the religion. On the other, Sneha says that all lands are owned by her husband. She asserts:

“Women do not have any access to land in ‘Hindu Shastra’ (Note 18) (Sacred texts in the Hindu Mythology). This is the rule of the religion. Women who are Muslim can get land at the time of marital contract. We do not raise any question about it because it is the matter of religion.”

Generally, ownership and possession of lands are additional indicators of agency. Most of the clients believe that they cannot own and possess land due to the strictures in religion. Although the state law of inheritance favors some of them, nevertheless, most of them discipline themselves by the hegemonic norms of the religions. Here, the present study finds a strong cultural association between ‘men’ and ‘land ownership’ like what Kabeer (2001) finds in her research. Very few clients come up their reasoned opinion on the existing inheritance law in Bangladesh which contradicts with Kabeer’s (2001) findings that women have better knowledge on inheritance law due to the credit program.

4.7 Repayment Pressure and Emotionality

Emotionality is a subjective state of agents. It was observed that women clients show up their emotion in many different ways rather than just uttering. However, this study explores some of the emotional situations of the clients. The major emotional matters are attached to clients’ many-faceted difficulties in everyday life in which they try to cope. As Suchitra views:

“We have many problems. *Kisti* is one of them. But, by the grace of Thakur (one of the Goddesses), we overcome the problem. Bhaghwan (God) shows us the ways.”

One of the most remarkable respondents of this study is Arpana who maintains a personal temple. She says that, she invests the credit to maintain the temple. At first glance anyone may think she is affected by many critical diseases. But, she elucidates:

“I do not feel sick. Thakur takes care of me. Look, a lady of the next home is going to pass this evening without taking food because she does not have work for today. But I do not have any
problem. I invest my money for ‘Thakur’. You can ask anyone, I do not have any kisti left or dropped even in the month of ‘Chaitra’ (twelfth month in Bengali calendar which also represents the sunny-dry season). ‘Baba’ (another identity of God) manages my kisti. Worshippers donate money to maintain this temple. I am happy. Many people from unknown places come here for worshipping. A lady came here to worship with her husband because she is infertile. If they worship here they will have a child and it happened before for many others."

Bimala of Rajanagar says that she is passing her life in a well manner by the grace of God (‘Thakur’). Just after few seconds, she utters that it is very tough life for her; and, therefore, she must pressurize herself physically. But she believes it is better off than before. In her past time, it was her life maintained from mere hand to mouth. Now, she can change life to a better track (she says ‘bochhor ghurano’). She says that using the first credit she observed first funeral of her father-in-law. She justifies her belief by telling that it is the most important task for her. On the other, Bina says that she prays to God for her better life free of credit. She says having a deep sigh:

“It (credit) burdens extra pressure on me. Sometimes, it brings chaos in our family. We are poor. Credit does not do anything good for us. Now, it is a routine duty to take credit and pay back to BRAC, we do not have any significant change.”

Jahanara says that kisti is the main problem for her. She says that if her husband cannot go out to pull rickshaw she borrows money from others. Moreover, if someone fails to repay the credit she faces trouble because she is the leader of the VO. She shows her helplessness in asking “can poor people lead a good life?” She also informs that sometimes failure to repay interrupts domestic peace in many families. She cites example of Anwara of Hajaripur, Nayagaon. Clients also explain their strategic mode to get release from that stressful situation. Shahina gives more severe information as she says that some clients pass their daily life without taking food if they fail to repay their kisti. She informs that approximately 30% of women clients are in this type. Furthermore, Maleka says that BRAC does not give them any chance to defer the date of weekly repayment. Even they did not do it when we were preparing for the funeral of my mother-in-law, she adds. Maleka also shows her naive confession that kisti creates hue and cry in the family. She says that there is no way to quit from this kisti. Another VO member Sneha opines:

“If we do not give their kisti they (BRAC staffs) will be sitting here even till 10 pm at night.

We give the kisti even without taking food because we do not want to lose our maan-shomman (dignity in the society). People will taunt us if they see BRAC staffs are waiting at my door.”

Sharnalata says that loan be obliged to be paid in due time. She says sometimes they pay credit in exchange of selling household things to others. Exceptionally, Karimunnessa tells quite comfortably that she can repay the kisti regularly without any pressure. But, she also admits that one must repay even if it takes quitting food. Rupbanu says that it is natural to repay because they take credit from BRAC. She says, clients must repay even if they face trouble.

It was observed from the field that clients do not know why women are the target clients for microcredit. Few of them say that women are available to BRAC staffs for credit repayment. Some say that women are reliable to the BRAC. Others say that if women fail to repay the credit and then BRAC staffs come for kisti to their home, other people of the society will treat this incident badly. Therefore, that family rushes for credit repayment to keep their maan-shomman to other people in the society. Rupbanu and Karimunnessa express their opinion that if BRAC officers come at home and ask for kisti senior male members in the family see it as shomman hani (loss of dignity in the society). They say that men give kisti back under the pressure of retaining maan-shomman. Karimunnessa states that sometimes BRAC staffs report to the office also. Fifty years old Sneha says that she does not think about why they give credit to women only. It is their system, she thinks. Maleka says that she takes credit from BRAC for her brothers because she lives with her brothers. She illustrates her attitude:

“I do not know about kisti and credit because my brothers give the kisti to the BRAC. I went to BRAC Derai Upazila office for taking photographs because they have new rules to provide pictures of women and men (who takes care of this credit).”

One former member of BRAC VO is Shamsunnahar, who lives in Guchchagram, informs that she is no longer with BRAC because they pressurize her when her children fell sick and was planning to go to the doctor. She shows her anger telling about this occurrence:
Amina of the same village gives description of a dramatic event. Amina says that her husband called upon other the incident:

“I told them I will return the kisti just after coming back from doctor. BRAC officer said that kisti was more important than visiting doctor. Thus, I took another credit from ASA and paid back the kisti to BRAC.”

Regarding credit repayment pressure, most of the clients show their practical consciousness. Some clients overwhelmingly rely on the grace of the God rather than their imagined autonomy. People’s understanding of their own efficiency is undermined by their non-reflexive actions and beliefs. Because according to Cleaver (2007), both conscious and unconscious emotions are decisive in shaping people’s own agency. The present study shows clients’ conscious and practical actions which support Ahmed, Chowdhury and Bhuiya’s (2001) findings where they find only few clients try to be active in order to get rid of the stress. In present study, the most expected way of coping with that situation was found to be praying to the God for a life free of trouble and sorrow. Some clients also discipline themselves without taking food. Other put their physical labor stressfully in order to tackle the hardship. Former BRAC clients of this study are among them who give BRAC up by borrowing credit from other NGOs. So far, most of the clients are not conscious about why BRAC offers credit only to women. Still some clients draw relations between giving credit to women and their social standing in rural Bangladesh society in terms of social honor, collective responsibility and mutual trust. If we understand these phenomena under the auspices of ‘public’ (Note 19) and ‘hidden’ transcript, we find that BRAC has its public transcript to empower women through micro lending. But, on the other hand, like Grameen Bank (as Rahman finds in his study) BRAC also applies ‘social collateral’ as a strategy for ensuring credit repayment. The cultural foundation of this idea is that women’s honor and its protection is highly valued in rural Bangladesh. Therefore, women want to repay their installments in timely manner to avoid humiliation in society (Rahman, 1999).

5. Conclusions

After a brief overview about the elements related to embodiment and emotionality, it can be concluded that clients are constrained by multi-faceted difficulties around their social surroundings. A widespread dilemma for many of the female clients is that they cannot show up their agency due to the health related problems of their family members. It influences clients develop their habitual tendency to borrow money from other formal and informal lenders. This ‘practical sense’ seems to be a very common strategy to handle the troublesome situations both for regular and irregular clients. Paradoxically, clients think this practice as their conscious action. However, it has unintended consequences also, for instance, more credit from other lenders may multiply their further hardship in the daily life. Therefore, even if a woman is able-bodied she may not be punctual to repay the credit installments. Moreover, traditional health practice behaviors are seen as constraining factor which prolongs the illness of the clients and their active family members. Consequently, these habitual health practices intensify constraints over practicing comparatively modern treatment. Actually, this learning and believing of customary health practices are acquired implicitly through the cultural settings without any conscious reason. Sometimes these kinds of beliefs establish cultural relations between the ‘body-space’ and the ‘causes’ of disease. Female clients cannot go outside to some unpermitted spaces at some unrecognized time in the day. Thus, women’s somatic movements are also affected by the traditional notion of the causes of disease which can be seen as a non-reflexive action of the clients and their families. The study also concludes that the clients’ physical status is also connected to their utilization of credit and participation in group meetings, social events and the like. Attending group meetings is not problematic for the clients because of its adherence to clients’ home location. But, pregnant women cannot attend meeting; hence fail to share any difficulties with the fellows. Pregnancies of female clients are seen as incapability by clients themselves. Another cultural aspect that creates constraining condition for women’s movement outwards is that females do not attend any social events in the studied area and they discipline themselves by internalizing the hegemonic norm of the society feeling that it is a natural and regular phenomenon. Clients have their own embedded beliefs that there are systematic differences between ‘male’ and ‘female’ work. Thus, the relations between ‘sex’ and the ‘type’ of work play a decisive role against women’s chance to open up their potential agency. The ideas are constructed through body hexis. These distinctions between centrifugal and centripetal meaning of gendered mobility hinder women’s practical movement toward public spaces. As a result, they lose their economic
agency which leads them to be remaining dependent on their male counterpart. With few exceptions, female clients cannot own lands in the studied villages. They closely and unconsciously control themselves by the stricture of religion though the religion does not prohibit owning lands. Clients believe in a strong corollary between men and the land ownership. This is because women’s loyalty to their husband is highly valued in rural society in Bangladesh. The last, but not the least, factor of emotional stress of the clients is connected to the loan repayment pressure. Clients are unable to rely on their ‘imagined autonomy’. The most frequently practiced coping strategy is to praying to the God in order to get rid of the grief. This can be seen as a practical consciousness of the clients. Clients also skip themselves without taking food to protect their social dignity. Failure to repay the credit is the loss of the dignity to them. Even, clients do not feel or think discursively about loan repayment pressure. They see it as routine activities to borrow and pay back their credit repayment to the BRAC. Taking embodiment and emotionality of the microcredit clients into consideration, this research suggests some recommendations and avenues in order to achieve better efficacies in the poverty reduction strategies. Social embeddedness of any particular society is existed with its specific nature. Therefore, microfinance institutions should pay attention on the program design, performance and local social context for every locale differently. There are numbers of replications of microcredit projects around the world. But micro-lending institutions must consider the local institutional complexities before any development intervention. It is claimed that ‘credit plus’ approach might be a successful model for microcredit institutions. But outcomes of the present research demand a re-thinking on its effects to the poor people at least considering their opportunity to exercise agency. Therefore, ‘credit plus’ approach also needs to be adapted to the particular contexts. ‘One formula fits all’ may not be a magical solution to eradicate poverty.

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References


Notes

Note 1. Bourdieu (1977) emphasizes the body in his discussion on ‘habitus’. According to his opinion, human body is an important signifier in social interaction.

Note 2. Replacing the traditional psycho-analytic distinction between ‘ego’, ‘super ego’ and ‘id’, Giddens argues for his ‘stratification model of action’, as he asserts that practical consciousness requires to be distinguished from discursive consciousness or the unconscious.

Note 3. Cross-case analysis is the grouping of answers from different people to common questions or analyzing different perspectives on any central issues. Patton (2002) says that for open-ended interviews or interview guide approach, it is easy to do cross-case or cross-interviews analysis.

Note 4. Case analysis means writing a case study for each person interviewed or each unit studied (e.g, each critical event, each group or each location, etc.).

Note 5. A three-wheeler vehicle runs without engine and driven by an individual who push the pedals physically. This vehicle is very common and cheap mode of transportation for a short distance in Bangladesh.

Note 6. Kantha is embroidered quilt. Sometimes it is made with traditional fashionable design which is also known as Nakshi Kantha. Nakshi Kantha is a folk art that has been passed down through generations of Bangladeshi families. The art of Nakshi Kantha or embroidered quilt has been flourishing in rural Bengal for centuries. Its exquisite beauty was brought to the notice of city-dwellers, and to some extent, to the outside world. An embroidered quilt said to be indigenous to Bangladesh.

Note 7. Taka is the currency of Bangladesh. One Taka is equivalent to 0.01457 USD as of August 19, 2008.

Note 8. ASA is one of the mainstream Microfinance Institutions in Bangladesh. ASA stands for Association for Social Advancement. ASA is already recognized as an International Technical Service Provider (ITSP) under UNDP's MicroStart Program in The Philippines and Nigeria. Please refer http://www.asabd.org for more information.

Note 9. ‘Shud’ comes from ‘Mahajan’ or money-lender who gives credit to the villagers with a very high rate of interest in rural Bangladesh. In Bengali lexical meaning, ‘interest’ is termed as ‘shud’ in Bangladesh.

Note 10. Religious verses and other sacred books are the main sources of different types of incantation in the Indian sub-continent. These incantations are believed to infuse the spiritual influences into the body of a patient.

Note 11. Bangladesh is characterized by the availability of multiple facets of treatments. There are well-known practices of *ayurveda*, *unani*, *hekim* and many more.
Note 12. It is attributed to various diseases. It is an intangible spirit, sometimes considered a disembodied soul, devoid of any corporeal existence. It wanders through wind, penetrates human body (especially young girl) through its unlimited apertures.

Note 13. ‘Pushti’ is a program run by Biomedical Research Group (BMRG) of BIRDEM (the central institute of the Diabetic Association of Bangladesh) in Bangladesh. BMRG of BIRDEM started back in 1997, a comprehensive program on nutritional evaluation of local food materials with particular focus on chemical analysis and on glycemic index (GI) which has direct implication for prevention and management of DM (Diabetes Mellitus) and metabolic syndrome in general. For more details, please see website of ‘Pushti’ http://www.pushti.org

Note 14. ‘Haor’ is a large saucer-shaped flood plain depression located mostly in north-eastern region of the country covering about 25% of the entire region. In the dry season, it is partially used as a grazing land also. There are altogether 411 haors comprising an area of about 8000 km2 dispersed in the districts of Sunamgonj, Sylhet, Moulvibazar, Hobigonj, Netrokona & Kishoreganj. For more information please consult official website of Bangladesh Water Development Board. http://www.bwdb.gov.bd/haor.htm

Note 15. Bazaar is a permanent marketplace where goods and services are exchanged and sold. A bazaar is located commonly in the city center or center of any locality. The word derives from the Persian word ‘bazar’.

Note 16. This approach has come to be known as the integrated rehabilitation approach (IRA). The IRA consists of services at BRCT (Bangladesh Rehabilitation Centre for Trauma Victims) including counseling, medical care, physiotherapy, psychotherapy, and legal assistance. The IRA also involves group and family therapy, follow-ups including home visits. For more information please see BRCT website http://www.brct.org

Note 17. State law for land possession varies on the basis of inheritance laws on Muslim and Hindu Family Laws in Bangladesh.

Note 18. Shastras are the sacred texts in the Hindu Mythology which contain rules of conduct and rites.

Note 19. James Scott (1990) defines public transcript as the way of describing open interaction between subordinates and those who dominate.