



International Journal of Advance Studies and Growth Evaluation

Women Empowerment in Rural Bihar through Direct Selling: An Analysis with Reference to DXN Marketing India Ltd.

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Article Info.

E-ISSN: **2583-6528**

Impact Factor (SJIF): **6.876**

Peer Reviewed Journal

Available online:

www.alladvancejournal.com

Received: 25/Oct/2025

Accepted: 24/Nov/2025

Abstract

This study analyses the role of direct selling in empowering rural women in Bihar, focusing on the model employed by DXN Marketing India Ltd. In a context where women's workforce participation remains low and mobility is constrained, direct selling emerges as a flexible and low-capital livelihood option. The analysis highlights how DXN's approach—characterized by low entry barriers, digital enablement, localized training, and ethical compliance—enables women to gain economic agency, social mobility, and new capabilities. Using illustrative vignettes and contextual data, the study demonstrates that direct selling enhances income, digital literacy, confidence, and decision-making power among women, while also promoting responsible consumption of wellness products. Critical to success are transparent onboarding, micro-inventory models, peer-led training, and integration with local ecosystems such as Self-Help Groups (SHGs) and rural markets. The study emphasizes that small, consistent gain, when built on ethical practices and community support, can cumulatively lead to meaningful empowerment. Policy implications and practical playbooks for scaling direct selling in rural Bihar are also discussed.

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Keywords: Women empowerment, direct selling.

Introduction

Women's empowerment in rural India is often discussed in terms of three intertwined capabilities: the power to earn (economic agency), the power to decide (intra-household and community voice), and the power to aspire (shifts in self-perception and social norms). Any intervention that wishes to be transformative must touch all three. Direct selling—where individuals market products directly to consumers outside of fixed retail premises—has emerged over the past two decades as one such pathway. In states like Bihar, where women's workforce participation remains comparatively low and mobility constraints are real, direct selling offers a flexible, low-capital, relationship-based livelihood option that can be layered onto existing roles. Sharmila and Pragodi (2020) observed in their research paper that direct selling is one of the fastest growing method of sales in the world and millions of people across the world specifically women taking its benefits. They also observed that products of the direct selling companies are women centric, attracting more women than

men in the industry. This essay analyses how direct selling can enable empowerment among rural women in Bihar, focusing specifically on the model and practices associated with DXN Marketing India Ltd. (hereafter “DXN”), a wellness and personal-care direct selling company. The discussion is analytical and context-sensitive, using DXN as a lens to examine opportunities, constraints, safeguards, and policy implications.

Literature Review

Not enough literature is available on direct selling and its impact on women except annual reports of the All India Direct Selling Association and related institutions. Some of the reviewed literature is furnished below:

Siwan Anderson (2024) observes that India scores very highly with regard to qualities of civil liberties and the political participation but falls below global average with respect to equal access to economic resources and protection from gender based violence. Mal and Saikia (2024) investigate the

caste/tribe disparity in women's empowerment by region, correlate each domain of empowerment and associated women empowerment with nutritional and healthcare access outcomes specifically anaemia, menstrual hygiene, and institutional delivery. Page and Czuba (1999) opine that empowerment is a multifaceted social process that empowers people to take charge of their lives and address issues that are important to them. In order to analyse the current state of women's empowerment, skill development and employment creation in rural areas, Gupta *et al.* (2024) examines data that is available in variety of formats and found that despite women centered policies, challenges persist in enabling rural women to recognise the potential of remunerative skills for improving their lives. Kumar and Mondal (2024) attempted to analyse National Family Health survey-5 (NFHS-5) data set to delineate interstate disparities in women empowerment and revealed that Goa, Punjab, Chhattisgarh and Sikkim had comprehensive levels of women empowerment whereas Rajasthan, Andhra Pradesh, West Bengal and Bihar had significantly lower levels.

Research Gap

Researches on the impact of Direct Selling Company's product line, consumer perception and business development module are very negligible. Company specific study is on the subject matter is sharp absent. Though its presence in the day to day life of the people of rural Bihar quite visible in specifically the districts of Bhagalpur, Katihar, Purnea, Saharsa, Begusari, Nawada, Siwan, Munger, Jamui, Lakhisarai etc.,

Objective of the Study

- To find out if DXN business model helps in empowering women economically in rural Bihar;
- To analyse the model with respect to intra-household empowerment of women in rural Bihar;
- To study the impact of the DXN Model on women with respect to capabilities expansion; and
- To analyse the sustainability of the women empowerment as a whole.

Data and Methodology

The study is exploratory in nature supported by empirical data collected through questionnaire sent over mobile. Online data collection through WhatsApp Group has been utilised for the purpose where Google form was provided and requested distributors to respond the questions. Their meeting in the peer group has been used to physically observe the improvement in this field. Various websites have been searched to derive secondary data and consequently draw conclusion of the study. A sample of 185 DXN female distributors have responded to the questionnaire out of the population of about 1900 DXN distributors of the districts of Bhagalpur, Katihar, Purnea, Saharsa, Begusari, Nawada, Siwan, Munger, Jamui, Lakhisarai of Bihar, India.

Context: Rural Bihar's Socio-Economic Terrain

Bihar's rural economy is characterized by smallholder agriculture, seasonal wage work, and substantial out-migration. Women's labour is often unpaid or under-recognized, concentrated in horticulture, livestock care, and home-based activities. Barriers to entry into formal employment include limited local jobs, low asset ownership, constrained mobility, and persistent norms around women's visibility in public markets. At the same time, there are

important enabling factors: dense social networks (self-help groups, panchayats, microfinance collectives), growing smartphone penetration, and a steady rise in demand for affordable wellness, nutrition, and personal-care products. Any livelihood strategy that leverages trust-based networks, requires modest capital, and allows flexible working hours can therefore be well-matched to this landscape.

Table 1: Women's Socio-Economic Indicators in Bihar (NFHS-5, 2019–21)

Indicator	Bihar	India (Average)
Female literacy rate (age 15–49)	55.0%	71.5%
Women with bank/savings account that they use	77.1%	78.6%
Women employed in last 12 months	19.2%	25.6%
Women owning a mobile phone	49.3%	54.0%
Women participating in household decisions	84.4%	89.0%

Source: National Family Health Survey-5, 2019–21

Insight: Women in Bihar lag behind the national average in literacy and mobile access, but decision-making participation and bank account ownership are encouraging.

Table 2: Growth of Direct Selling in India

Year	Industry Size (₹ Crores)	Women Share of Workforce	Health & Wellness Share
2015–16	8,308	58%	42%
2018–19	12,620	60%	55%
2020–21	17,000	65%	60%
2022–23	20,105	66%	61%

Source: AIDSA & PHDCCI Reports

Insight: The direct selling industry has been steadily expanding, with women forming nearly two-thirds of the distributor base. Health & wellness products dominate – aligning with DXN's portfolio.

Table 3: Potential Market Ecosystem in Bihar

Factor	Status in Bihar	Implication for Direct Selling
SHG Membership (JEEViKA Program)	1.4 crore women (2023)	Large ready-made network for product distribution & peer training
Rural internet penetration	~42% households (TRAI, 2022)	Enables digital ordering & mobile payments
Remittance-dependent households	~25% households	Women manage remittances, scope for retail income diversification
Weekly rural haats (markets)	12,000+ registered	Ready spaces for product demonstrations
Population density	1,218 per sq. km (highest in India)	Dense markets reduce distribution cost

Source: Compiled by the researcher

Table 4: Empowerment Outcomes from Direct Selling

Empowerment Dimension	Before Joining Direct Selling	After Joining (Average Impact)
Women earning independent income	18%	72%
Monthly personal income (₹)	< 1,000	3,000 – 7,000
Women using digital payments	21%	63%
Confidence in public speaking (self-reported)	Low	High
Say in children's education decisions	55%	82%

Source: Compiled by the researcher

Direct Selling: A Short Primer

Direct selling typically involves individuals becoming distributors/associates of a company, purchasing products at a discount, and earning margins on retail sales to end consumers. Income may also come from performance-linked incentives. The model is fundamentally relational: it relies on person-to-person marketing, product demonstrations, and after-sales service. For rural women, three features are salient:

1. **Low Entry Barriers:** Joining costs are usually limited to registration and initial product purchase; infrastructure requirements are minimal.
2. **Flexibility:** Distributors can choose when and how much to work, aligning sales activity with domestic and agricultural calendars.
3. **Skill Spillovers:** Selling cultivates public speaking, bookkeeping, customer service, and digital skills (e.g., mobile payments), which are portable to other livelihoods.

However, not all direct selling models are equal. Ethical practice requires clear income disclosures, no compulsory inventory loading, consumer protection, and compliance with India's direct selling rules. The quality of training and local leadership also determines whether participation is empowering or extractive.

DXN Marketing India Ltd.: Model Elements Relevant to Empowerment

DXN operates in the wellness and personal-care space-segments that fit household consumption patterns and lend themselves to repeat purchases. Without relying on proprietary claims here, we can outline typical DXN-like elements that matter for rural women:

- **Product Portfolio Fit:** Consumables (e.g., beverages, nutrition, personal care) that households use regularly help distributors build stable repeat-customer bases, reducing the pressure for constant new customer acquisition.
- **Training and Mentorship:** Structured onboarding, product knowledge, and soft-skills training (often peer-led) are central. For women in Bihar, local language training and women-only cohorts can lower confidence barriers.
- **Digital Enablement:** App-based ordering, e-learning modules, and digital payment options shrink geographic constraints and reduce the need to hold large inventories.
- **Compliance Orientation:** Alignment with India's direct selling regulatory framework and clear distinction from pyramid/chain referral schemes is essential to protect participants and ensure sustainability.

These components, when executed well, create a platform for women to participate on their own terms, leveraging social circles (mohalla networks, SHGs, kirana linkages) to seed micro-enterprises.

Pathways of Empowerment

1. Economic Agency

Income Diversification: Direct selling can complement seasonal farm earnings, smoothing cash flows across agricultural lean periods. Even modest, regular margins from repeat customers contribute to a woman's discretionary spending power and savings. This matters in households where women's contributions are often in-kind and unremunerated.

Asset Light Entrepreneurship: With low fixed costs and minimal infrastructure, the model allows rapid testing of product-market fit. Women can start with small order books, reinvest margins, and scale gradually. Because consumer goods are familiar, the perceived risk of stocking a limited range is lower than for unfamiliar products.

Local Value Loops: When distributors source orders locally and deliver to neighbours, cash circulates within the village economy. Small transportation costs (cycle, e-rickshaw) are manageable, and women can coordinate deliveries with school timings or household routines.

2. Social Agency and Mobility

Negotiating Space in Public: Regular customer visits, product demos in SHG meetings, and participation in local fairs normalize women's presence in community marketplaces. Visibility earns legitimacy; over time, family members recognize the value of her network and negotiating skills.

Collective Identity: Cohorts of women distributors-especially when connected to existing SHGs-build peer accountability and mutual learning. Group targets and recognition ceremonies reframe success as a shared achievement, reducing social stigma around women "doing business."

Household Decision-Making: Cash income, however modest, tends to increase a woman's say over expenditures (children's education, health purchases). The feedback loop is clear: better product knowledge on wellness often elevates her role as a household adviser, reinforcing respect for her judgment.

3. Capability Expansion

Skill Acquisition: Product literacy, persuasive communication, simple bookkeeping, and digital payments are core competencies. Women learn to manage order pipelines, reconcile payments, and use messaging apps for customer engagement-skills transferable to other enterprises (tailoring, home-based food processing).

Confidence and Aspiration: Repeated small wins-closing a sale, hosting a demo, solving a customer issue-build self-efficacy. Recognition in monthly meets or social media shout-outs can be disproportionately empowering, especially in settings where women's achievements are rarely spotlighted.

Health Spillovers: Selling wellness products can prompt households to adopt better routines (hydration, hygiene, nutrition supplements). While health outcomes depend on many factors, distributors often become local health influencers, circulating basic preventive care messages.

Measuring Empowerment: A Practical Dashboard

To avoid confusing activity with impact, programs should track outcomes across economic, social, and capability dimensions:

- **Economic:** Net monthly income after costs; customer retention rate; inventory turnover cycle; share of sales via repeat customers.
- **Social:** Self-reported say in household purchases; mobility indicators (number of independent trips per week); participation in community forums.
- **Capabilities:** Digital tasks completed (UPI, spreadsheet entries), confidence in public speaking (self-rating), problem-solving instances (customer complaints resolved).

- **Safeguards:** Share of sales to end consumers vs. to downline; incidence of returns; training completion rates; grievances resolved within set timelines.

Limitations

- **Market Saturation at Village Scale:** Too many distributors in a small catchment can compress margins and trigger conflict. Territorial planning and rotation can help.
- **Norms Change Slowly:** Income gains may precede shifts in household decision-making. Patience and family engagement are essential.

- **Health Product Sensitivities:** Avoid overstating benefits; anchor messaging in responsible use and encourage customers to consult healthcare providers where appropriate.
- **Digital Divides:** Not all women have personal phone access. Shared devices and assisted ordering mechanisms should be accommodated.

The Case Study

Profile of the respondents

Table 5: District-wise Respondents

Districts	Respondents
Bhagalpur	76
Katihar	10
Purnea	28
Saharsa	5
Begusarai	6
Nawada	15
Siwan	12
Munger	16
Jamui	7
Lakhisarai	10
Total	185

Source: Compiled by the researcher

Table 6: Educational Profile

Education	Respondents
Upto Class 5	74
Class 6-8	33
Class 9-10	32
Class 11-12	32
Graduation and Above	14
Total	185

Source: Compiled by the researcher

Table 7: Professional profile

Profession/Employment	Respondents
Homemaker	111
Small Business	25
Domestic Help	43
Government Service	3
unemployed	3
Total	185

Source: Compiled by the researcher

Table 8: Economic Empowerment Indicator

Monthly Income	Before DXN	After DXN	% increase/Decrease
0-5000	138	0	-100
5001-10000	27	66	144.44
10001-15000	20	62	210
more than 15000	0	57	Havoc Increase
Total	185	185	

Source: Compiled by the researcher

Table 9: Statement of Social Status and Capability Enhancement Indicator

Attributes	Before DXN			After DXN			% increase/Decrease		
	Yes	Sometimes	No	Yes	Sometimes	No	Yes	Sometimes	No
Use of Digital Platform	35	0	150	141	0	44	302.86	0	-70.67
Financial Decisions in the family	47	23	115	146	20	19	210.64	-13.04	-83.48
Educational Decision of Wards	54	50	81	135	31	19	150	-38	-76.54
Public Addressing	29	0	156	181	0	4	524.14	0	-97.44

Source: Compiled by the researcher

Analysis and Interpretation

Profile of the Respondents

The study covered a total of 185 respondents drawn from different districts of Bihar. The respondents represent diverse socio-economic and educational backgrounds, providing a comprehensive base for analysis.

Professional Profile

The professional composition of respondents reveals that a majority were homemakers (111 respondents), followed by domestic help (43) and small business operators (25). A negligible number were engaged in government service (3), while an equal number were unemployed (3). This distribution indicates that the study largely focuses on women from economically vulnerable and informal employment sectors.

District-wise Distribution

The respondents were primarily concentrated in Bhagalpur (76), followed by Purnea (28) and Munger (16). Other districts such as Nawada, Siwan, Katihar, and Lakhisarai contributed moderate participation. This geographical spread reflects representation from both developed and relatively backward districts of Bihar.

Educational Profile

Educational attainment among respondents was relatively low:

- 40% (74 respondents) were educated up to Class 5,
- 33 respondents studied up to Class 6–8,
- 32 respondents each completed Class 9–10 and Class 11–12,
- Only 14 respondents were graduates or above.

This highlights the limited formal education among participants, making the impact of economic and social empowerment interventions more significant.

Economic Empowerment Analysis (Table 8)

The income distribution before and after association with DXN demonstrates a remarkable improvement in monthly earnings:

- Respondents earning ₹0–5000 per month reduced from 138 to zero, indicating a 100% decline in extreme low-income status.
- The ₹5001–10000 income group increased by 144.44%.
- The ₹10001–15000 group recorded a 210% increase.
- Notably, 57 respondents entered the “above ₹15000” income category, where none existed earlier, indicating a significant economic breakthrough.

Overall, the data clearly establishes that association with DXN resulted in substantial income enhancement and financial upliftment.

Social Status and Capability Enhancement (Table 9)

Use of Digital Platforms

The number of respondents using digital platforms increased from 35 to 141, registering a 302.86% increase, while non-users declined sharply by 70.67%. This reflects enhanced digital literacy and confidence.

Financial Decision-Making

Respondents participating in family financial decisions increased from 47 to 146 (210.64%), while those excluded dropped by 83.48%, showing improved bargaining power and autonomy within households.

Educational Decisions of Wards

Involvement in children’s educational decisions rose by 150%, indicating a positive shift in parental confidence and awareness, while lack of involvement decreased significantly.

Public Addressing Ability

The most striking change was observed in public addressing skills, where affirmative responses rose from 29 to 181, marking a 524.14% increase. This demonstrates a dramatic improvement in self-confidence, communication ability, and social participation.

Conclusion

The case study conclusively demonstrates that DXN participation has played a transformative role in the economic empowerment, social status enhancement, and capability development of women respondents. The intervention not only improved income levels but also fostered digital inclusion, decision-making power, educational awareness, and public confidence. These findings strongly support the role of alternative livelihood models in empowering women from economically and educationally marginalized sections of society.

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