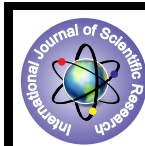


Study of Participation of Adolescents in Household Decision Making Process



Medical Science

KEYWORDS : Adolescents, decision capacity, household decision, adolescent's participation.

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ABSTRACT

Background:

Adolescence is an important period of growth in which healthy transition from dependence on family ideally occurs. Recently there has been considerable interest in adolescent participation, largely due to the widespread ratification of the Convention on the Rights of the Child (CRC). Section 3 draws on the recent literature on child rights and development to present a synthesis of several key aspects of participation. Aims and objectives:- 1. To study the participation of adolescents in household decision making 2. To study gender related issues in participation of decision making process 3. To study different factors affecting decision making process

Material And Methods:- Study design :- a cross sectional study .Study period:- 1 Aug 2013 to 30 November 2013 Study setting:- 6 junior colleges were selected randomly to participate in this study. Sample collection:- An interview of 300 adolescents was taken after obtaining their consent. After getting permission from the principals of respective colleges, 1 class from each college was selected randomly for participation in the study. Interview of all the students of selected classes who were present on the day of visit was taken with the help of pre designed pretested semistructured questionnaire. Statistical Analysis: Mean, average, percentage, chi-square test Results: This study reveals that 74% adolescents participate in household decision making. Percentage of participation in boys was more than girls, also decisions of boys were more accepted than girls. Decision acceptance in Hindu religion(49.4%) was more than Muslim religion(32.3%). Participation and acceptance is more in literate families. Personal factors such as age, working status & addictions also influence the process of decision making among adolescents. Conclusion: This study concluded that education of parents and economic status of family are key elements for deciding participation of adolescents in household decision making process. More importance is given to the boys in household decision making as compared to girls.

INTRODUCTION:

In the present era of fastest growing young generation in terms of technicalities, responsibilities and about self decisions. A widespread practice has emerged in recent years, which has been broadly conceptualized as "participation", This term has evolved and is now widely used to describe ongoing processes, which include information-sharing and dialogue between children and adults based on mutual respect, and in which children can learn how their views and those of adults are taken into account and shape the outcome of such processes.⁽¹⁾

Whilst 'participation' is the most common term used for the process of listening to and engaging with children, the exact definition remains contested⁽²⁾. There is no one fixed meaning or definition which has universal agreement. Participation works has adapted Treseder's definition of participation, which is a process where someone influences decisions about their lives and this leads to change.⁽³⁾

We are interested in not just whether children can freely express themselves, but also if this has influence on a decision and brings about change. The exact change which is brought about will vary on the context but may relate to both process (how children are treated) and outcome (the end result of a decision). and how a service is delivered or in the values, attitudes and behaviors of adults or children

54% of India is estimated to be under the age of 25. Adolescence is an important period of growth in which healthy transition from dependence on family ideally occurs.⁽⁴⁾ Recently there has been considerable interest in adolescent participation, largely due to the widespread ratification of the convention on the Rights of the Child (CRC). Section 3 draws on the recent literature on child rights and development to present a synthesis of several key aspects of participation.⁽⁵⁾ Over the past 10 to 15 years, the concept of child and youth participation has gradually taken hold in every region of the world. Some of the highest-profile initiatives have emerged through young people's involvement in international conferences.⁽⁶⁾

Defining and measuring goals for adolescent participation represent an especially difficult challenge. Because participation is a right, it should be a goal in itself. Goals and indicators need to be set for quality of participation and equity in participation, which can often be extremely difficult to capture. Moreover, the precise relationship between any specific investment in adolescent participation/protective factors and a specific positive outcome is difficult to establish. Moreover, while some participation goals are relatively easy to define and measure (completion of primary education, enrollment in secondary education) many others are not (level of democratic interaction in the school, improved coverage of youth in the media)^(5,6)

One of the principal tenets of human rights law is that all rights apply equally to all people, without discrimination. But the reality is starkly opposite: in many contexts the capability, opportunity and support provided for participation to different groups or individuals is extremely uneven. Some of the most common bases for discrimination include age, race, sex, class, size, looks, disability, level of education and location.⁽⁷⁾

There is also a growing recognition of the threats faced by adolescents around the world, including lack of access to quality education, vulnerability to illness and infections including HIV, and their inability to secure economic livelihoods. In this context, adolescence is seen as providing an important 'window of opportunity'. To promote health and development across the human life-span, and to break the cycles of risky sexual practices, the use of tobacco, alcohol and other substances, poor nutrition and violence. The World Health Organization (WHO) argues that the "enormous public health costs of diseases which become manifest in later life as a result of behavior begun in adolescence is a powerful argument for investing in adolescent health," and that this "will result in significant savings in the economic costs of illness and death, including the direct costs of health care"

Adolescents are getting increasing attention – in the news, in community discussions, in the speeches of politicians, in the

concerns of religious leaders and on the agendas of development agencies. The reasons for this are many. There is recognition of sheer demographics: more than half the world's population is now aged below 25 years. Over 20% of all people are adolescents between 10-19 years, 85% of whom live in the South, and their numbers are increasing.(8) considering these facts in mind the present study has conducted with following objectives.

AIMS AND OBJECTIVES:-

1. To study the participation of adolescents in household decision making
2. To study gender related differences in participation of decision making process
3. To assess different factors affecting decision making process among adolescents.

MATERIAL AND METHODS:

The World Health Organization (WHO) has defined adolescents as individuals in the age range of 10-19 years, this age group constituted as our study group. Present cross-sectional study was conducted in urban areas of Nanded city from August to October 2013. A random sampling technique was adopted. Six high schools & junior colleges in the city were selected randomly to participate in this study. After obtaining permission from the principals of respective colleges, 1 class from each college was selected randomly for participation in the study. The purpose of study was explained in detail to the participants and verbal consent was obtained from the participants. Interview of all the participants of selected classes who were present on the day of visit was taken with the help of pre designed pretested semi structured questionnaire consisting of questions related to household decision-making process, their participation, and acceptance of their decision etc. to identify the socio-economic and demographic factors significantly related to participation in household matters. Appropriate statistical test was used where ever applicable.

RESULTS :

Socio demographic characteristics:

The mean age of the respondents was 16.2 ± 1.9 years with an age range of 10-19 years. Regarding parental education, more than one-fifths (20.9%) fathers were illiterate as against more than two-sixth (32.7%) mothers, indicating that more mothers were illiterate than the fathers. The mean family size was 5.2 persons. About one-fourth (24.67%) of the adolescents were currently engaged in different income generating activities either to support their education or to support the parents other than household work.

Table 1: Age & sex wise participation of adolescents in the study

Age	Male	Female	Total
11-14 years	25 (71.4%)	10 (28.6%)	35(100%)
15-19 years	170 (64.1%)	95(35.9%)	265(100%)
Total	195(65%)	105(35%)	300(100%)

Majority of the respondents were Hindus (56.66%) and 35% were Muslims. More than half of the adolescents (56.4%) were from nuclear families and the rest from joint/or extended families (43.6%).According to the modified B.G. Prasad classification 49% families belonged to the Class 4, class 3 included 29% and 12% were from class 5 and rest from class 2.

Table 2 : Religion wise distribution of adolescents in household decision making

Religion	Decision always considered	Decision not considered	Decision sometimes Considered	Total
Hindu	84(49.4%)	46(27.1%)	40(23.6%)	170(100%)
Muslim	34(32.3%)	44(41.9 %)	27(25.8%)	105(100%)
Others	9(36%)	8(32%)	8(32%)	25(100%)

Gender differences were observed in study population in participation & acceptance of decision making .Boys were given more importance in process of decision making as compared to the girls. Only three-fifth girls (60.95%) participated as compared to the boys (81.02%). Acceptance in decision making is even worse for girls (32.38%) as compared to the boys (66.15%).

Table 3: Gender differences in participation & acceptance in decision making process

Decision making process	Male (n=195)	Female (n=105)
Participation	158(81.02%)	64(60.95%)
Acceptance	129(66.15%)	34(32.38%)

Table 4: Participation of adolescents in different activities

Questions	Decision considered		Decision not considered		Decision sometimes considered	
	Male	Female	Male	Female	Male	Female
In household decision making	109 (55.8%)	40 (38.1%)	42 (21.6%)	33 (31.4%)	44 (22.6%)	32 (30.5%)
In purchasing objects	87 (44.6%)	51 (48.6%)	61 (31.2%)	33 (31.4%)	47 (24.2%)	21 (20.0%)
In pursuing career	70 (36.1%)	29 (27.6%)	67 (34.3%)	59 (56.2%)	58 (29.6%)	17 (16.2%)
In extracurricular activities	67 (34.4%)	33 (31.4%)	77 (39.5%)	55 (52.3%)	51 (26.1%)	17 (16.3%)
In selecting course of your choice	73 (37.4%)	27 (25.7%)	88 (45.2%)	50 (47.6%)	34 (17.4%)	28 (26.7%)

Table 5: Participation of adolescent's girls in different activities

QUESTIONES	DECISION CONSIDERED	DECISION NOT CONSIDERED	DECISION SOMETIMES CONSIDERED	Total
In purchasing clothes, cosmetics	71(67.3%)	20(19.3%)	14(13.4%)	105(100%)
In choosing friends	55(52.4%)	40(38.0%)	10(9.6%)	105(100%)
In comparison with brothers	43(40.9%)	46(43.8%)	16(15.3%)	105(100%)

Reasons for not participating in the decision-making process: regarding the reasons for not participating in the decision-making process, more than four-fifths (83.33%) opined that the parents did not find the need to take opinions from the adolescents. Of all, 10.25% of the adolescents did not feel liberal enough to share their opinions regarding the household matters, and 6.41% mentioned that they were considered immature to give opinion such matters.

Table 6 : Reasons for not participating in the decision-making process

Reasons	Total(n=78)
No need to take opinion	65(83.33%)
Not liberal enough	8(10.25%)
Considered immature	5(6.41%)

Discussion & Conclusions:

Growing body of researches support the idea, that improvement of adolescence is an important indicator of development. The empowerment of youth is generally accepted as a crucial element in any strategy seeking to solve social, economic, and environmental problems. Past studies have confirmed that the adolescents have limited role in household decision making.

ing. [8] Raymundo cited that decision-making process of the adolescents in the economic and personal spheres. In the more patriarchal and less socio-economically developed societies, such as India and Pakistan, fewer adolescents making decisions than the adolescents in Philippines and Thailand, and they are tied closely to their societies and culture and have lesser say in the individual purchases in the household. For example, 86.5% of Filipino adolescents were reported as having a major say in deciding on the major purchases in the household, compared with 16.5% in Pakistan. In Thailand, 55% of adolescents are able to make decisions such as choice of jewellery to be purchased by them, compared with the lower level of 16% of adolescents in India and Pakistan. [5] The present study revealed a good level of participation of adolescents in decision-making process but their decisions were seldom accepted.

Hadi opined that adolescents involvement in income generating activities showed a significant association with acceptance of their opinions in decision making. However, Kantor found that in India, adolescents's contribution in the family through income does not always predict greater say in property-related decisions. [9] This study revealed a positive association of work status of the adolescents with participation in decision-making process, the family income do predict the participation in decision making in household matters. Jejeebhoy opined that literacy levels of parents are believed to be powerful predictors of many subsequent behavior and attitudes. [10] The study revealed that adolescents having literate parents above graduation have more say than illiterate ones. Hunte, in a qualitative study in Afghanistan, found that the male adolescents dominated the household decision-making processes. Although in some of the issues, female adolescent members in the family could sometimes participate; however, their decisions were generally not considered. In that context, the participation of adolescents was very negligible and in most of the cases it was dubious. [11]

Recommendations :

The present study demonstrates that the changing perceptions of different households are possible. Additionally, it is argued that the productive role of adolescents and increased level of education can create environment for them to think, make their own choices, and participate in decision-making process in different matters of household with other family members. All these have important policy implications on health of the adolescents[12]. The participation of all adolescents should be respected as of equal value although adolescents have had different abilities of understanding, will require different levels of support and will contribute in different ways. Furthermore, it is important that all adolescents ensure their full participation in their respective capacities and not be treated as "invisible" members of the family. The study suggests that in economic, cultural, and productive activities, the participation of adolescents in different household matters needs to be ensured.

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