Social Networks and Decision Making: Women's Participation in Household Decisions

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Abstract

Decision making is always been an important in social setting. For understanding the process of decision making it is important to understand as to how people make decisions and the factors influence the decisions. Studies (Srinivasan and Sharan 2005, Pescosolido, 1992) show that decisions are not made in isolation but they are the products of influence and confluence of social correlates. These studies emphasize that the decisions are not made in isolation but in consultation with other members. This raises an important question of how individual's choices no longer of his or her own but socially constructed. This emphasizes how individuals consult with others while making decisions. From this it clear that the matters relating to health are also decided in consultation with the other members of the community. From this we can understand how decision making is important in a family setting for an individual. Literatures on social network (Srinivasan and Sharan 2005) have suggested the importance of social interaction on health decisions. They also suggest social networks help the individuals to learn to handle problematic situations. In National Family Health Survey (NFHS-3)(2005-06), under "Women's empowerment and demographic and health outcomes" discussed the importance of wife's participation in household decision making. According to NFHS-3, it is important to study the above aspect which will help in understanding the status and empowerment of women

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in society and within their households. It is thus critical to promote change in reproductive behaviour. This reminds the importance of Social Network by Bott(1957).According Bott Social Network is conjugal role relationships. According to her the degree of segregation in the role relationship of husband and wife varies directly with the connectedness of the family's social network. The more connected the network, the greater the degree of segregation between the roles of husband and wife and vice versa.

According to social network theory exchange is the basis for social relationships. It is evident from the relationship within a family i.e. between the husband and wife. In a family the feelings, emotions, beliefs are exchanged with other in order to develop bond between them. This interaction is important in reproductive health behaviour. According to NFHS-3(2005-06), it is important to study the wife's participation in household decision making is an important for understanding the status and empowerment of women in society and within their households. It is thus critical to promote change in reproductive behaviour. In this paper we would like to analyse this on the social network theoretical framework.

According Elizebath Bott, Social Network is conjugal role relationships. According to her the degree of segregation in the role relationship of husband and wife varies directly with the connectedness of the family's social network (Bott1957). Unlike the industrialised western societies, in India, the kinship does play an important role. Bott formulated the linkage between the family pattern and connectedness of family networks (Micheli, 2000). She distinguished two kinds of families, 'close-knit' and 'loose-knit'. The 'close-knit' network is with many relationships among the husband and wife, while 'loose-knit' is one with few relationships. Bott concluded: "the degree of segregation in the role-relationship of husband and wife varies directly with the connectedness of the family's social network" (Micheli, 2000).

Let us look at the data on the how the decisions are made in a family setup in India. The National Family Health Survey data, NFHS-3, (2005-2006) for India collected data on the number of household decisions in which the respondents participated.

The NFHS-3 collected data on employment and cash received for married women. Further to judge the financial empowerment, they further collected data on how much of control over one's earnings among employed married women. The questions asked were "who decides how the money you earn will be used: mainly you, mainly your husband, you and your husband jointly?

As per the data on the decisions, among the currently married women who are employed and earning cash, 24% make decision themselves (alone), 57% make decisions jointly with husband. On the rest for about 15% the decisions made mainly by their husbands and for about 3% the decisions are made by other than husbands.

In case of the differences in decision making pattern varied as per the location, - rural and urban by religion, and caste /tribe, the family type- nuclear and non-nuclear.
The urban women have more say in decisions on the income they earn than the rural counterpart.
In case of other than husband making decisions, the non-nuclear family has influenced more on the income earned by women than their nuclear counterpart.

In case of religion men belonging to Buddhist/ Neo-Buddhist and Hindu make decisions for their wife's than other religion (15 to 16%). More Muslim and Jain women are making decisions for themselves (37% to 39%) than women in other religion.
19% of Scheduled Tribe women reported their husbands mainly make decisions on their income. In case of other caste/tribe groups only 11 to 15% reported their husbands make decisions.
NFHS-3 also collected information on currently married women's making specific decisions: there were type of decisions were asked for

(a) decision about purchases for daily household needs
(b) decisions about their healthcare
(c) major household purchases
(d) visits to her family or relatives

One third of currently married women (32%) make their decisions about purchases for daily household need themselves. Only 27% currently married women make decisions about their own health care by themselves. Only 11% make decisions about visits to their family or relatives themselves. In case of major household purchases only 9% make decisions.

Percent distribution of currently married women age 15-49 who received cash earnings for employment in the 12 months preceding the survey by person who decides how cash earnings are used and by whether women earned more or less than their husband, according to background characteristics, India, 2005-06

Table 1: Person who decides how women's cash earnings are used:

%	Mainly wife	Wife and husband	Mainly husband	Other	Missing	Total	Number of women
Age							
15-19	17.7	42.1	20	18.6	1.6	100	1,162
20-24	19.1	52.7	18.6	8.1	1.5	100	3,164
25-29	22.5	57.3	16.2	2.7	1.3	100	5,064
30-39	25.5	58.5	13.5	1	1.4	100	10,169
40-49	28.3	57.2	12.7	0.4	1.4	100	6,041
Total	24.4	56.5	14.8	2.9	1.4	100	25,601

Source: NFHS 3

NFHS 3 asked questions on who decides married women's cash earnings. The above Table 1 presents the percent of the persons deciding married women's cash earnings. It is clear from the table that the percent of women themselves increases with age. When we look at mainly husband and others it reduces tremendously. From this it is clear that age is an important factor for women's decisions. Due to various reasons it is also found the interference of others reduces tremendously from about 19 % among 15 – 19 year to 0.4 % among 40-49 years group.

Table 2 **Person who decides how women's cash earnings are used:**

Residence	Mainly wife	Wife and husband	Mainly husband	Other	Missing	Total	Number of women
Urban	33.3	55.2	8	1.6	1.8	100	7,075
Rural	21	57	17.3	3.4	1.3	100	18,526
Total	24.4	56.5	14.8	2.9	1.4	100	25,601

Source: NFHS 3

Further to understand the impact of location the data on place of residence on the person who decides how married women's ash earnings are taken from NFHS 3. Table 2 suggests that there is a difference of pattern in decision making among rural and urban population. This suggests that in rural India husband play a vital role in decision making. This validates the assumption by Bott on the non-western – non industrialized societies; there is a strong bond among husbands and wives. The independent decision making among women are less than the industrialized counter parts.

Table 3 **Person who decides how women's cash earnings is used:**

Education	Mainly wife	Wife & husband	Mainly husband	Other	Missing	Total	No. of women
No education	22.7	54.9	18.3	2.6	1.5	100	14,756
<5 years complete	24	58	13.5	3.3	1.2	100	2,375
5-7 years complete	26.5	55.4	12.5	4.3	1.4	100	3,133
8-9 years complete	27.4	58.7	7.9	4.6	1.4	100	1,710
10-11 years complete	28.2	59.4	9	2.6	0.8	100	1,241
12 or more years complete	28.6	63.7	4.9	1.3	1.6	100	2,384
Total	24.4	56.5	14.8	2.9	1.4	100	25,601

Source: NFHS 3

Table 3 presents the NFHS 3 data on the pattern of who decides the women's cash earnings in different educational categories. From the table it is clear that the mainly husbands make decisions on how to spend the earning reduces with the increase in

number of years of education. It is almost reduces to 1/4th in 12 or more years of education compared to no education.

It also suggests more the women educated lesser the interference by others on their decision (2.6% to 1.3 %). From this it is clear that how educational status is an important variable in decision making among women.

Table 4 **Person who decides how women's cash earnings are used:**

Household structure1	Mainly wife	Wife and husband	Mainly husband	Other	Missing	Total	Number of women
Nuclear	24.4	59	14.5	0.6	1.4	100	15,570
Non-nuclear	24.4	52.6	15.1	6.4	1.4	100	10,031
Total	24.4	56.5	14.8	2.9	1.4	100	25,601

Source: NFHS 3

It is also found that how the type of family affects the pattern of decision making on women's cash earning. Table 4 presents data on who decides how women's cash earnings are presented from NFHS 3 data. According to the data there is not much difference in wife or husband making decision on the women's cash earnings in both the types of family. But we may notice there is an increase in the role of others in decision making on women's cash earnings to 10 times higher among non-nuclear families compared to nuclear families. Here, the other important institution, family type is emerging as a variable influencing the decisions of married women. It is also clear that the relationship between husband and wife are not just based on their own behaviour but also due to other members of family.

Table 5 **Person who decides how women's cash earnings are used:**

Caste/tribe	Mainly wife	Wife & husband	Mainly husband	Other	Missing	Total	No. of women
Scheduled caste	25.2	56.3	14.9	2.5	1.1	100	6,287
Scheduled tribe	17.1	59	19.4	3.3	1.2	100	3,146
Other backward	22.7	57.2	15.2	3.2	1.7	100	10,083

class							
Other	30.6	54.4	11.1	2.4	1.5	100	5,800
Don't know	30.7	43.3	22.5	2.7	0.8	100	169
Total	24.4	56.5	14.8	2.9	1.4	100	25,601

Source: NFHS 3

NFHS 3 also collected data on the pattern of decision among different religious groups on who decides on women's cash earnings are used. Please refer Table 5 on the above subject. It is evident from the table that mainly husbands' make decisions on women's cash earnings are high among Hindus and Buddhists / Neo Buddhists. It is low among Muslims, Sikhs, Christians and Jains. In case of others making decisions among the Hindus the others influence much more than other religions. It can also be interpreted that in India, the role of others are higher than other western, industrialised countries.

Table 6 **Person who decides how women's cash earnings are used:**

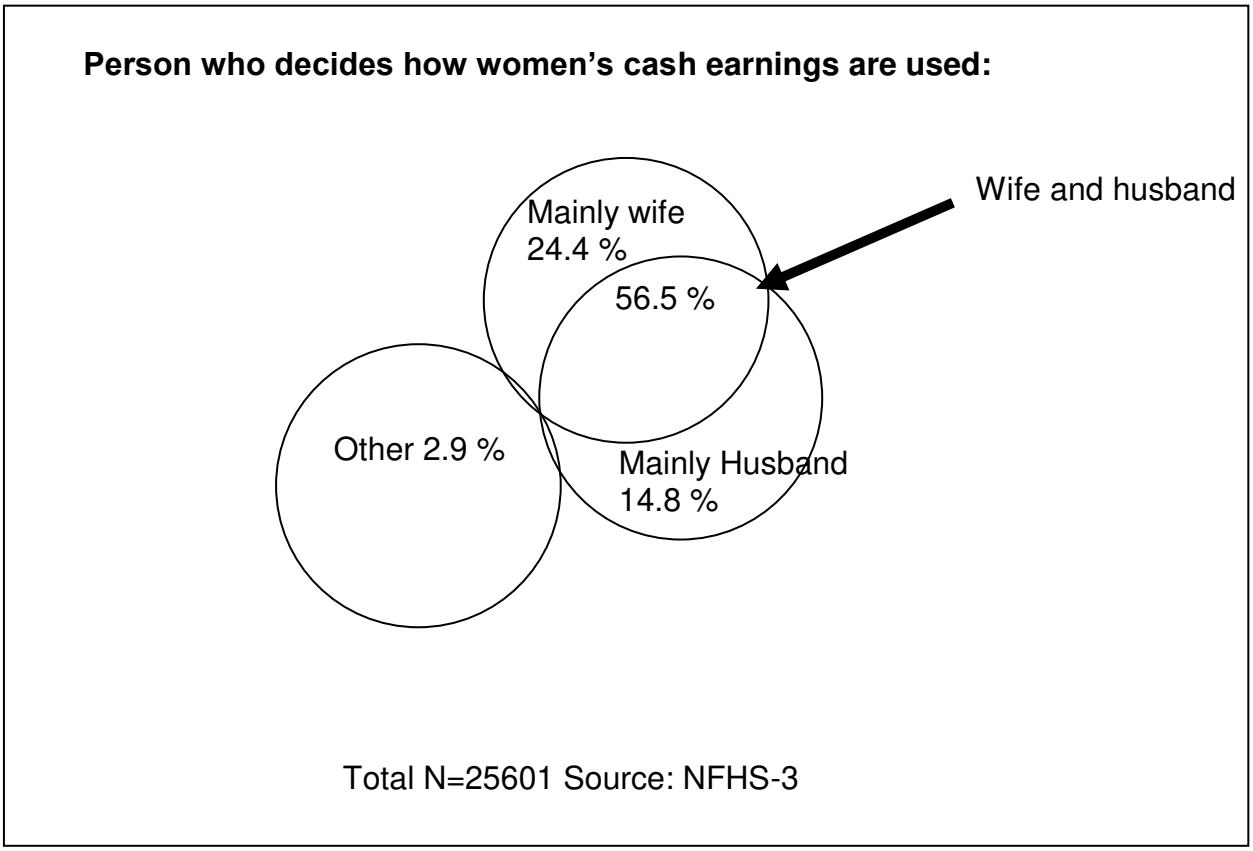
Religion	Mainly wife	Wife and husband	Mainly husband	Other	Missing	Total	Number of women
Hindu	23.1	56.9	15.5	3	1.4	100	21,819
Muslim	37.3	48.3	10.2	2.4	1.9	100	2,268
Christian	24.9	62.9	9.3	2.1	0.7	100	784
Sikh	30.2	59.3	8	1.9	0.6	100	230
Buddhist/Neo-Buddhist	18.6	62.5	15.1	2.1	1.7	100	328
Jain	-38.9	-60.4	0	0	-0.7	100	23
Other	17.7	68.6	9.5	2	2.2	100	125
Total	24.4	56.5	14.8	2.9	1.4	100	25,601

Source: NFHS 3

NFHS 3 has also collected data on the pattern of persons who decide on women's cash earnings among different caste and tribe groups. According to data among all groups in Scheduled Tribe4s mainly husbands make decisions on women's cash earnings are more than other caste groups. It is also clear from the data that the percent of husbands, wives making decision on women's cash earning is different for different Caste / Tribes. This show the decisions are not made the same way among all castes / tribes.

Figure 1 presents Person who decides how women's cash earnings are used of the total population in India from the Table 6. From the figure it is clear even though the mainly wife category looks higher than the only husband the influence of others including husbands by making decision jointly suggests women are not the decision makers even for the cash earned by themselves.

Figure 1 Person who decides how women's cash earnings are used:



According to a study by Srinivasan and Sharan (2005), there were three major interactive subunits in the system of health care network; man, community and health

care setup. They interact with each other for some common interests. The interaction between the subunits results in the formation of a network in health decisions. Man is a decision maker. His decisions are the outcome of his interaction with his advisors (community), available facilities (setup) and so on. Keeping the above proposition in mind, the study was conducted to examine the extent of influence of community and health administration in the process of health care decisions.

According to Srinivasan and Sharan study (2005) there are three interactive units Man, Community, and Health Setup. The unit of man consisted of various elements such as, age, occupation, income, education, marital status, affiliation, attitude, belief, and awareness of medical options, nature and types of sickness. Community constituted the elements such as, friendship, family type, religion, education, social climate, physical environment and so on. Health care setup shown various constituents like, facilities, location, organization set up, level of confidence generated, awareness campaign, delivery units, and extent of success and failures. Aall the units as well as the elements of the units shown certain amount of influence on individuals' choices made on health.

The results of the above are similar to the Srinivasan and Sharan (2005) study on decision making. The decision making on women's cash earning is also affected by various factors mentioned in the study. The education status, caste or religion, the family type- joint or nuclear family, location- rural or urban, and age. There is difference between the factors affect the decisions in India between Srinivasan and Sharan study conducted during 1990 and the NFHS-3 2005-06. In India even after 60 years of independence the decisions on the women's cash earnings are still made by their houses. This also suggests India still lives in her villages even after large urbanization. The only encouraging fact is at least one fourth of women make their own decision. This gives us some optimism on the women's involvement in decision making.

Conclusion

A classic problem common to management revolves around how people make decisions. The above ddiscussion presented in this paper had shown the

influence of social correlates or social networks on individuals' decisions related to women's cash earning. This orientation rests on fundamental principles that social interaction is the basis of social life and social networks provide interaction through which individuals learn the techniques of handling their problematic issues. This approach shifts the focus from individuals' self decisions to socially constructed patterns of decisions. The findings make a case for reviewing theoretical approaches to decision-making and they provide some information essential to a theoretical exposition of social network relationships. The above findings support the utility of social network approach for understanding the dynamics of rural health management and planning.

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