



Influence of Cultural Dimensions on Household Power Dynamics among Agro-pastoralists in Handeni District, Tanzania

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Abstract: This study used the Hofstede's cultural dimensions to assess the influence of cultural dimensions on household power dynamics among agro-pastoralists. Data were obtained from a random sample of 160 agro-pastoralist households from Handeni District using a structured questionnaire. A binary logistic regression model was used to examine the influence of cultural dimensions on household power dynamics. Both power distance and masculinity as parts of the Hofstede's cultural dimensions variables used in the binary logistic regression model were found to have a significant influence on the control of household resources and decision making by a male household head at $\beta = -0.313, p \leq 0.1$, and $\beta = -2.385, p \leq 0.01$ respectively. The observed influence of income was significant at $\beta = 0.005, p \leq 0.05$. Correlation analysis showed a small relation between socio-economic variables, power distance, and masculinity. The findings indicated that male household heads controlled household resources as well as the household decision-making process which affect women chances to effectively contribute to the household wellbeing. The study recommends that Government, nongovernment organisations and other stakeholders should conduct awareness creation campaigns, seminars and workshops in the study area to sensitize equal participation in control and decision making on household resources between males and females. Involvement of women in household decision making can contribute to the household well being, including improvement in health of children under-five years

Keywords: Cultural dimensions, household, agro-pastoralists, power distance, masculinity

1. Introduction

The household power dynamic is the relationship of power among people in a given household where some household members can be more powerful and dominant than others in making a decision. In most African countries, inequality in household decision making is skewed towards men, these results into lack of power by many women, especially in traditional societies including agro-pastoralists (Murnen, 2016). Consequently, women are affected in a number of ways including lack of power to control over household resources and inability to attain reliable health care services as well as having limited access to income. In patrilineal societies like most agro-pastoralists in Tanzania, men have greater power to make decisions simply because they are men (Sultana, 2011). The patrilineal family relationship follows father or family's line of male descendants i.e. father, his father, his father's father and so on. In a patriarch family, the internalized norms make males dominate women in all aspects. Women are responsible for men because men hold the highest household position in terms of power and overall authority (Mutanana and Bukaliya, 2015).

The power inequality in a patrilineal family leads to biased decision making on household resources including income (Mader and Scneebaum, 2013). It ensures control of women by making them financially insecure and isolating them out of the decision-making process in the household (Mutanana and Bukaliya, 2015). Culturally, men are entitled to make a

decision and give instructions to women for implementation (Jayachandran, 2014). However, according to ABD (2015), most of the instructions given to women are neither reliable nor practical due to the lack of common understanding between household's males and females. Women are also denied the power to own productive resources which could empower them economically and enhance their contribution to household wellbeing and subsequently to the decision making (ACORD, 2014). Isolation from household resources control and decision making is likely to reduce women access to reliable health care services like public hospitals, private hospitals, and pharmacies (ADB, 2015).

In his study, Kumiko (2008) observed that the question of matrilineal and patrilineal has been discussed over a long period and indicates some different characteristics between the two. However, the same study observed that the demarcation between matrilineal and patrilineal in terms of resource ownership and power to make decision has no clear boundary. Further, Stege *et al.*, (2008); in their study done in the Marshall Islands, Solomon Island and Vanuatu; explained matrilineal as maintenance of the lineage rather than any political role and that both matrilineal and patrilineal remain male-dominated. It has been reported that patrilineal traditions influence matrilineal traditions in some communities, including Tanzania (Kumiko, 2008). There are strong social and cultural norms throughout the world which sustain power imbalance between male and female

(Klingrover and Havlicek, 2015). The study on which this paper is based considered the Hofstede's cultural dimension model which includes power distance, masculinity, uncertainty avoidance, and collectivism to drive household resource allocation, gender relation and decision making to the good health of household members particularly that of children under-five years.

Hofstede's cultural dimensions have been explored in several studies such as Wu (2006), Begriell (2011), Khairullah (2013) and Werner (2015). These studies have explored the convergence of different national cultures, the impact of culture on organizations, the effect of cultural dimension on innovation for European countries and International business. While the uses of Hofstede's cultural dimensions have been criticized for capturing cross country cultural differences, on the other hand, Soares *et al.* (2007) uphold that, measuring Hofstede's cultural dimensions at the individual level constitute an important contribution to cultural research. It is from this context this paper considers Hofstede's cultural dimensions relevant to understand the household power dynamics and their implication on health of under-five year's children.

This paper empirically assessed the influence of cultural dimensions on household decision making representing household power dynamics variables including gender relation and resources allocation. From the policy perspective, balanced household decision making is one of the important elements for improving household well-being among agro-pastoralist societies in Tanzania. Generally, if inequalities at the household level are not addressed potential skills and talents from disadvantaged household members, most of the time women will remain undeveloped. The adverse consequences will trickle down to poor health of children under-five years amongst other effects (Hora, 2014; Chigbu, 2015). The important questions addressed by this paper are: How does culture influence the decision on the use of household resources? How do power distance and masculinity as cultural dimensions influence household decision making? Responding to the above research questions, the study employed power distance and masculinity variables of Hofstede's cultural dimensions as they neatly match the study methodology.

Power distance is explained to be based on age and household as opposed to collectivism which mainly deals with groups. In collectivism, people are integrated into groups from birth onwards and self-introduction "I" is avoided (Hofstede, 2011). The paper considered an individual household as a sampling unit whereby the household head was taken as a proper respondent. Masculinity indicates dominance such as achievement, power, competition and material success which are almost universally associated with male roles (O'Connor *et al.*, 2015). On the other hand, uncertainty avoidance has to do with the degree to which cultural members are ready to accept and deal with ambiguity. It needs a high level of prediction about the future which leads to clear rules of behaviour and strict laws (O'Connor *et al.*, 2015). These arguments convinced the study to employ power distance

and masculinity in studying agro-pastoralists households in the study area.

2. Theoretical and Conceptual Framework

2.1 Cultural Dimensions Models

Desire to understand cultural differences motivated Hofstede in the 1970s to start investigations that led to the establishment of a model of cultural dimensions. The model explains culture using four constructs namely power distance, masculinity, uncertainty avoidance, and collectivism but also used in scientific theory building in cross-cultural researches (Soares *et al.*, 2007; Khastar, 2011). Although, other scholars like Bond (1987) developed Confucian work dimension and Minkov (2011) developed three cultural dimensions identified as indulgence vs. restraint, monumentalism vs. felexumility and masculinity feminist role-based. They both were mentored by Hofstede.

In his study, Werner (2015) tested a link between innovation and Hofstede's cultural dimensions across European countries. The study indicated that only two variables power distance and individualism had a significant influence on innovation. This could be due to the fact that in European countries culture makes everybody accept that power is distributed unequally and that interests of individual prevail over the interest of the group (Hofstede, 2011). Further studies such as Mhawar (2015) maintain that the globalisation process has an effect on the countries which intercut and seem to adopt a combination of cultures. According to Khastar *et al.* (2011), choosing proper levels of analysis is one of the important challenges to Hofstede's theory and that theory has to be established based on a detailed description of levels. This assertion was made based on their study that analyzed Hofstede's theory of cultural differences and assessed the place of ethnic culture in the organisation. There is wider support in the literature for the use of this conceptualization. For instance, Soares *et al.* (2007) assert that measuring these dimensions at an individual level forms an important contribution to cross-cultural research. The study on which this paper is based assumed that the Hofstede's cultural dimensions could be useful in the analysis of the culture of agro-pastoralists, their influence on agro-pastoralists' household power dynamics and the impact to health of children under-five years.

2.1 Construct of Hofstede's Cultural Dimensions

The Hofstede's Cultural Dimension is the most used cultural framework in a number of disciplines like marketing, sociology, psychology or management studies (Bond *et al.*, 2004; Blodgett *et al.*, 2008; Koc, 2016). Below are the details of two constructs of Hofstede's cultural dimension model which were considered appropriate for this study.

2.1.1 Power Distance

According to Hofstede (2011), power distance is the degree to which the less powerful associate with an organization and an institution like family accept and anticipate that power is distributed unequally. In this case, the unequal distribution of power is accepted among people with and without power or approved by followers as much as by the leaders (Huber,

2001). In a low power distance society, power is shared and well dispersed in the sense that society or household members view themselves as equal, children are taught to take control of their own life as soon as possible (Waal and Chipeta, 2013). It is different in high power distance where society and household accept an unequal distribution of power and where people understand their places in the system or household where aged people are both respected and feared.

When power is attached to male / female household head and make them overall in making important decisions may cause problems. For example, within agro-pastoral societies, the male head may be absent from home for a number of days. In case of an emergency such as a sick person whose condition needs special and immediate attention, absence of this household member endowed with the power to make the decisions may affect household initiatives to rescue the life through treatment. Children under-five years are more vulnerable compared to adult persons when proper treatment is not available on time (Abdulkadir and Abdulkadir, 2016). With the absence of empirical evidence on whether power distance has an influence on power dynamics at the household level, this paper attempted to confirm this proposition and establish if power dynamics have any implication on the health of children under-five years.

2.1.2 Masculinity

Varieties of masculinity aspects reflect traditional values attached to males and females (Wade and Rochlen, 2013). Masculinity, a cultural dimension, refers to how much society values traditional male and female roles with an emphasis on ambition and acquisition of resources. In high masculinity societies or households, men are expected to be powerful, tough, provider, confident and generally effective leader characterized with values such as success, money, and possessions of resources (Agodzo, 2014). In high masculinity society, imbalanced decisions are skewed to the one characterized with power and if not properly exercised can lead to a wrong decision on the use of household resources.

When household resources and income are not wisely used, household members can suffer in different aspects including health particularly that of children under-five years (Craig and Mullan, 2011). In a low masculinity society, the family structure is flexible with the small gender wage gap, women and men work and decide together equally across several household matters (Cox et al., 2011). Roles in low masculinity are domestic-oriented ones including taking care of children, preparing food, collecting firewood and fetching water. Women are associated with low mass roles while men become more associated with roles that require physical strength (Murnen, 2016). Household roles division between male and female have a critical influence on the development of the health of children specifically under-five years (Yogman, 2016).

2.6 Concepts of Power Dynamics

Power dynamics embrace terms such as power, gender relations, resources allocation, income, decision making,

education, occupation, seniority and the like (Daplah, 2013). This paper deals with selected items only: power, gender relations, resource allocation, and decision making. How men and women interact in an attempt to influence decision making is critical determining structural roles that men and women play in social relations such as household decision making (Chawla, 2016). This is all about household gender relation works which differ in societies as cultural meanings given to being male or female varies (Schmitt, 2016). In spite of the key roles by women in societies and households, their participation in a household decision is limited as a result of cultural values that favor men (Cuddy et al., 2010). Across communities and cultures, men have more rights and privileges in management and control of household resources and income than most women (Heath et al., 2013). Nigusie et al (2014) and PSAP (2013) describes agro-pastoralists women to be having vital roles to play in livestock management, but they have little power in decision making and opportunities compared to men. Children under-five years in hands of such women are affected as their mothers lack funds and authority over household resources which could be used in caring them amongst other uses.

2.7 Conceptual Framework

The conceptual framework (Fig 1) presents the relationship of variables in this study whose interaction can lead to improved health of children under-five years or otherwise, depending on the nature of the interaction. The variables shown in the conceptual framework include cultural dimensions, household power dynamics, and household health-seeking behavior. Cultural dimensions through power distance and masculinity can influence household power dynamics. In a society where the health of children under-five years is given priority, minimum health problems can be reported and the *vice versa* is true (Alonso, 2015). Under cultural dimensions, accepted cultural values and norms vary across societies manifesting in different practices such as control and use of household resources. Hence there is a direct link between cultural dimensions and power dynamics as presented in figure 1. When the emphasis on health issues is not among the first priorities, household resources and associated income are considered to intervene in health issues when it is too late. This scenario affects access to reliable health services at the right time, causing reliance on traditional treatment which the study considers inappropriate, particularly for children under five years. Children under-five years need a thorough diagnosis and generally extra care to understand and treat their health problems (English, 2017).

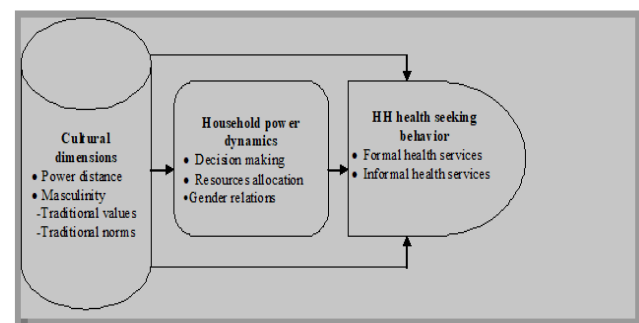


Fig. 1: Conceptual framework



- i. How does culture influence the decision on the use of household resources?
- ii. How power distance and masculinity as cultural dimensions influence household decision making?

3. Methodology

3.1 Research Design and Sampling Procedure

The study adopted a cross-sectional research design whereby data were collected at a single point in time. The design has been recommended by several scholars (see Bailey, 1998; Bryman, 2004; and Delice, 2014) due to its cost and time effectiveness in data collection. Wards and villages involved in the study were obtained using purposive sampling technique. The technique was preferred because the study targeted wards and villages which had high populations of pastoralists and agro-pastoralists.

The study involved 160 agro-pastoralists' households, a sample size which was considered to be adequate basing on homogeneity nature of households from four villages.

According to Bailey (1994) and Gray (2014), samples of 30 cases or more are recommended for researches which conditionally must have variables to be manipulated and analysed statistically. From two wards (Misima and Chanika) four villages were selected, two villages from each ward. The four villages involved in the study had 3 137 households. The selected villages and their respective household sizes were Kibaya (1024), Msomera (1000), Malezi (713) and Kilimilang'ombe (400). Proportionate stratified sampling was used to determine the number of households involved from each village in the study area. The total number of households for each village was divided by the overall total number of households for all villages and multiplied by 160 (arbitrarily decided sample) to get proportions of sample for each village. The outcome for each village was divided by 160 and answer multiplied by 100 to get the sub-sample for each village.

3.2 Data Collection Methods

The primary data was collected using a structured questionnaire. The questionnaire was pretested at Bangu Village in Handeni District. Pretesting of the questionnaire was done in order to test the clarity of questions before embarking on data collection. After the pre-testing, some of the questions were adjusted for clarity. The sampling unit for this study was the individual household of agro-pastoralists in the study area.

3.3 Variables and Measurements

3.3.1 Household decision making

Nineteen (19) items in the questionnaire were used to test female involvement in household decision making. Three different options of answers were available for each question in the questionnaire. These were 1 if only a male, 2 if both male and female, and 3 if only a female was involved in household decision making respectively. These options were later transformed into dummy for male and female involvement in household decision making (dependent variable) where female involvement = 1, otherwise = 0.

3.3.2 Power distance

Power distance was measured using fifteen (15) items in the questionnaire. The items were used to test involvement and ideas about the leading household in the study area. A summated index scale with five alternatives responses for the fifteen items was prepared ranging from 1= strongly disagree, 2 = disagree, 3= undecided, 4 = agree and 5 = strongly agree. Transformation of these options enabled the creation of two dummy variables coded as 1 = household leadership was not participatory (high power distance). 0= household leadership was participatory (low power distance),

3.3.3 Masculinity

On the other hand, masculinity was measured by observing if there were differences in the subdivision of household roles among household elders. Twelve (12) items in the questionnaire were used to assess masculinity through responses in index summated scale ranging from 1= strongly disagree, 2 = disagree, 3= undecided, 4 = agree and 5 = strongly agree. The respondent had to tick adjacent to each point to show their idea about the subdivision of household roles. Transformation of the options leads two dummy variables coded as 1= inequality in household roles subdivision (high masculinity), 0 = equal subdivision of household roles (low masculinity).

3.3.4 Other variables

Other variables considered in the study were education, attendance to a pharmacy, household annual income and household size. Education and attendance to the pharmacy were measured as dummy variables with 1= formal education, 0= no formal education and 1= attending pharmacy, 0 = Not attending pharmacy, respectively. Household annual income was measured in amount of Tanzanian shillings while household size was measured by number of members in the household.

3.4 Data Analysis

The Statistical Package for Social Sciences (SPSS) was employed in the analysis of quantitative data. Descriptive statistics was used to compute frequency and percentages, while binary logistic regression was used to estimate decision making was a dependent variable.

The independent variables used were age and education of respondents, household average annual income, and household's size, attendance to pharmacy, power distance and masculinity. Age determines experience and time spent in household affairs as well as trust from others that one is mature enough to handle some responsibilities or not (Settersten *et al.*, 2015). Education and average household annual income can determine a particular household decision making on issues like household size and sources of treatment such as formal, traditional or buying medicine straight from pharmacy. All these have implication to children under-five years in a particular household.

Outputs from the model were interpreted based on β -coefficients for measuring the directions of the impact (positive or negative) of predictor variables, Wald statistics

for measuring the magnitudes of the impact and p-value for testing significance of the impact. The binary logistic regression model used is shown as:

$$\text{Log} [p / (1-p)] = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \dots + \beta_7 X_7$$

Where;

$\text{Log} [P_i / (1-P_i)]$ = Natural for the logarithm of the odds for female involvement in household decision making. The dummy for the dependent variable (female involvement in household decision making) were coded as 1=Yes and 0 = No;

P_i = 1, certainty (100%) that female was involved in household decision making

$1-P_i$ = uncertainty of female involvement in household decision making

β_0 = Constant;

β_1 to β_7 = Logistic Regression coefficients of the predictor variables; Independent variables in the model were as follows:

X_1 = age of respondent in number of years (ratio);

X_2 = education (formal education = 1, no formal education = 0);

X_3 = household annual income in Tsh (ratio);

X_4 = household size (ratio);

X_5 = attendance to pharmacy (Yes = 1, No = 0);

X_6 = power distance (household leadership is participatory = 1, household leadership is not participatory = 0);

X_7 = masculinity (hierarchy in the subdivision of household roles = 1, no hierarchy in the subdivision of household roles = 0)

4. Equations

4.1 Management and Control of Household's Resources in the Study Area

Management and control of household resources were assessed in order to establish the presence of evenly or skewed control between male and female household heads. Results in Table 1 show that 83.1% of the household decision on selling household livestock's was made by male's household heads. Similarly, 78.1% of all decision of selling crops were also made by males. Almost 64.4% of the household decision on spending household cash from livestock's was made by males household heads while 61.3% of all decision on spending cash from crops were also made by males. The percentage of female deciding on spending cash from sell of livestock's and crops were 30.0% and 33.7%, respectively. This is higher compared to 10.6% and 16.3% of some women who were involved in decision making on the selling off some household resources.

The findings suggest that cultural values and practices in the study area give power to males head making them superior to women and children. This may further imply that women do not freely use household resources to solve household problems including treatment of children under-five years. These findings are in line with those of a study by Lemire and Budgel, (2016) who revealed that males in Nigeria were generally controlling households. Increased percentages of women involvement in the decision on spending cash from livestock and crop products may result from the prevailing

global movement to women empowerment. There is a need to develop participatory behavior in making the decision on the sale and use of earnings from household resources in order to have a common focus among household members. This can help in solving household problems particularly those which are related to the health of children under-five years amongst others.

Table 1: Management and control of household resources (n=160)

Activities	Involvement in management and control of Household resources					
	Male		Female		All	
	f	%	f	%	f	%
Decision on selling household livestock	133	83.1	17	10.6	100	63.0
Decision on selling household crop products	125	78.1	26	16.3	90	56.0
Decision on spending cash from sale of livestock	103	64.4	48	30.0	90	56.0
Decision on spending cash from sale of crops	98	61.3	54	33.7	80	50.0

4.2 Relationship of Social-economic Characteristics, Power Distance and Masculinity

The Pearson product-moment coefficient analysis (Table 2) showed a small correlation between social-economic characteristics of respondents and Hofstede's cultural dimensions-power distance and masculinity. In the analysis, respondents' household size appeared to relate to the respondents' age. This implies that aged household bears a high number of children particularly in traditional communities like agro-pastoralists. It was further found that power distance as a variable slightly relates to the age of respondents. This is caused by the fact that it is about accepting inequality in the distribution of power in a household where aged household bear high power compared to younger ones. Masculinity, on the other hand, relates to household annual income, reflecting its characteristics on traditional male and female roles. This is associated with values such as success, money, and possessions of resources. The findings on the relationship between masculinity and power distance are obvious since the two variables are from some category among four variables under Hofstede's cultural dimensions.

Table 2: Socio-economic characteristics of respondents Hofstede's cultural dimensions variables

	Age of Respondents	Education level	HH annual income	HH Size of respondents	Attendance to pharmacy	Power distance	Masculinity
Age of Respondents							
Education level	0.013						
HH annual income	0.088	-0.140					
HH Size of respondents	0.525***	0.017	0.035				
Attendance to pharmacy	-0.052	-0.018	-0.099	-0.090			
Power Distance	0.114	0.018	0.088	0.069	-0.017		
Masculinity	0.142	0.010	0.183**	0.848 **	-0.094	0.642***	

4.3 Influence of Cultural Dimension on Household Decision Making

The regression results (Table 3) indicate that power distance, household annual income, and masculinity variables had a significant influence on household decision making. Also, household power distance as shown in Table 3 had a significant negative influence on household decision making ($\beta = -0.313$) at $P < 0.1$. The Wald statistics of 11.645 and the odds ratios of 0.76 imply that household power distance was among the influential variable as its increase, decreases chances of women involvement in household decision making. The odd ratio shows that power distance was 0.76 times more likely to reduce women involvement in household decision making. These findings mean that, as in most traditional cultures, agro-pastoralist culture in the study area favour men compared to women. This is confirmed by results in Table 1 which demonstrate that 83.1% of decision on selling livestock and 78.1% decision on selling crops are made by males. Failure to integrate women in household decision making have several implications such as making less informed decisions as well as the stagnation of women ideas which could contribute to well being of a particular household. An observation by Fomby and Cherlin (2007) in a study conducted in America supports the current study findings that women have a crucial contribution to household development and improved health, particularly that of children under- five years. Sensitisation is needed for women empowerment and awareness creation in order to reduce women isolation from household decision making.

Income makes households afford most of the things they desire such as paying rent or mortgages as well as paying other bills like life insurance, food and water utilities. In this study, income was assessed to establish if it has an influence on female involvement in household decision making. It was found (Table 3) that income had a positive relationship and a significant influence on female involvement in household decision making ($\beta = 0.005$) at $P \leq 0.05$. The Wald statistics value of 8.276 and the odds ratios of 1.005 suggest that the variable income also influenced both male and female (from high-income households) at 1.01 times more to participate in household decision making than a household with low

income. In addition, it was noted (Table 1) that, there were improved involvement of women 30.0% and 33.7% in the household decision making on spending income resulting from sells of livestock and crop products which were largely decided by males. This finding concurs with Blackden *et al.* (2015) who inferred that income was the reason behind equal participation in household decision making among males and females in Tanzania. The efforts to improve households' wellbeing need to capitalize on equalization of power to control household resources and associated income. Contribution of cultural values to the skewed household decision making needs assessment and rectification. This will help households' achievement in including improvement in health, specifically that of children under-five years.

Table 3: Regression results of cultural dimension influence to household decision making (n=160)

Variables entered in the model	β	S.E	Wald	p-value	Odds ratios
Age of respondent	0.531	0.377	1.986	0.159	1.701
Education	0.752	0.486	2.396	0.122	2.121
Household annual income	0.005	0.000	8.276	0.004	1.005
Household size	0.725	0.546	1.761	0.185	2.065
Attendance to pharmacy	0.560	0.418	1.796	0.180	1.751
Power distance	-0.313	0.92	11.645	0.001	0.76
Masculinity	-2.385	0.933	6.530	0.011	0.89
Constant	-4.112	1.687	5.940	0.015	0.016

The coefficient of the masculinity (Table 3) had a negative relationship and significant influence on female involvement in household resources ownership. This extending its impact on household decision making ($\beta = -2.385$) at $P \leq 0.01$. The Wald statistics value of 6.530 and the odds ratios of 0.85 indicate that high masculinity was also influential among other variables entered in the model. It was 0.85 times more likely to decrease the probability of female possessions of household resources and power to decide, compared to males. These deprive women the right to contribute to the household wellbeing through particular household resources. The effect can manifest in different areas including in health of children under-five years (ACTIONAID, 2013). As seen in Table 1, an increase in the percentage of women deciding on household income from sells of household livestock and crop products had a potential impact on household development; hence it needs support. Women's involvement of women in household decision making is possible through assessing prevailing cultural values and their outcomes like ending up with high masculine community which affects the involvement of both males and females in control of household and decision making.

5. Conclusion and recommendations

This paper explored the influence of cultural dimensions on the household's decision making using Hofstede's cultural dimensions. Household decision making was taken as a representative variable for gender relation and resources allocation which collectively stands as household power dynamics. Lack of female's participation in household's



decision making negates their capacity to perform important household roles including sales of household resources and control earnings. Cultural practices which lead to inequality between male and female need an assessment and whenever necessary adjustment for the sake of improved household well-being. Government through the Ministry of Health and other stakeholders like NGOs dealing with social affairs should conduct awareness creation campaigns seminars and workshops in the study area to sensitize equal participation in household decision making between males and females. These must involve cultural elders, District development officers, village leaders and women representative from each village who will need to discuss the cultural issues widening the gap towards equal participation in the household decisions making. The impact of differences in household decision making on the household wellbeing in relation to the health of children under-five years need to be considered. Thorough discussion and strategic implementation are needed to correct inequality that can affect women and children under-five years. Thus, potential development and household well-being through participatory involvement in household decision making will be achieved. The study recommends further research in health care-seeking behavior and its effects among agro-pastoral communities. The study's contribution to the body of knowledge is that not all Hofstede's cultural dimension variables fit in the study at individual household levels. That is why uncertainty avoidance and collectivism were excluded in the current study.

References

- Abdulkadir, M. B and Abdulkadir, Z. A. (2016). A cross-sectional survey of parental care-seeking behavior for febrile illness among under-five children in Nigeria. *Alexandria Journal of Medicine*. [http://www.elsevier.com/locate/ajme]. Site visited on 7/12/2016.
- ACORD (2014). African women and girls at the grassroots their say on their world post 2015. *Women's Voices from Citizen-Driven Workshops on the Post-2015 Framework Held in 13 African Countries*. (Edited by Fry, T., Sanou, S. and Bevan, N.), Agency for Cooperation and Research in Development. Nairobi, Kenya. 1 – 19pp.
- ACTIONAID (2013). *From Marginalisation To Empowerment: The Potential of Land Rights to Contribute to Gender Equality-Observation From Guatemala*. India and Sierra Leone. 52pp.
- ADB (2015). *Gender Review of National Energy Policies and Programmes in Nepal Improving Gender-Inclusive Access to Clean and Renewable Energy in Bhutan, Nepal and Sri Lanka*. Japan Fund for Poverty Reduction. Japan. 56pp.
- Agodzo, D. (2014). *Six Approaches to Understand National Cultures: Hofstede's Cultural Dimension*. Spring Arbor University. 12pp.
- Alonso, E. B. (2015). *The Impact of Culture, Religion and Traditional Knowledge on Food and Nutrition Security in Developing Countries*. Working Paper No. 30. FOODSECURE project office, The Hague, Netherlands. 81pp.
- Bailey, K. D. (1994). *Methods of Social Research*. (4th Ed.), the Free Press, New York. 587pp.
- Bailey, K. D. (1998). *Methods of Social Research*. (4th Edition), The Free Press, New York. 587pp.
- Begriel, E. B., Begriel, E. B. and Upson, J. W. (2011). Revisiting Hofstede's Dimensions: Examining the cultural convergence of the United States and Japan. *American Journal of Management* 12(1): 69 – 70.
- Blackden, C. M. and Magdalena Rwebangira, M. Zahia Lolila Ramin, Z. (2015). *Tanzania Strategic Country Gender Assessment*. World Bank, Tanzania. 58pp.
- Blodgett, J., Bakir, A. and Rose, G. (2008). A test of the validity of Hofstede's cultural framework. *Advances in Consumer Research* 35: 762 – 763.
- Bond, M. H., Al-Au, K. L., Tong, K., De Carrasquel, S. R., Yamaguchi, S. M. F., Bierbrauer, G., Singelis, T. M., Broer, M., Boen, F., Lambert, S. M., Ferreira, M. C., Van Bavel, K.N. A. J., Safdar, S., Chen, J. Z. L., Solcova, I. and Stetovska, I. (2004). Culture-level dimensions of social axioms and their correlates across 41 Cultures. *Journal of Cross-Cultural Psychology* 35(5): 548 – 570.
- Bond, M. (1987). Chinese Values and the Search for Culture-free Dimensions of Culture. *Cross-Cult*, 18; 143-164.
- Bryman, A. (2004) Social research methods. 2nd Edition, Oxford University Press, New York, 592pp.
- Chawla, A. and Sujatha, R. (2016). Women entrepreneurship: culture and norms-an Indian perspective. *International Journal of Management Sciences and Business Research* 5(1): 1 – 11.
- Chigbu, U. E. (2015). Repositioning culture for development: women and development in a Nigerian rural community. *Community, Work and Family* 18(3): 334 – 350.
- Cox, P. L., Friedman, B. A. and Tribunella, T. (2011). Relationships among cultural dimensions, national gross domestic product, and environmental sustainability. *Journal of Applied Business and Economics* 12(6): 46 – 56.
- Cuddy, A. J. C., Crotty, S., Chong, J. and Norton, M. I. (2010). *Men as Cultural Ideals: How Culture Shapes Gender Stereotypes*. Working Paper No. 97. Harvard Business School, Harvard. 25pp.
- Craig, L and Mullan, K. (2011). How Mothers and Fathers Share Childcare: A Cross National Time-Use Comparison. [http://asr.sagepub.com]. Site visited on 7/12/2016.
- Daplah, S. K. (2013). Power dynamics in household decision-making –an analysis of conceptual, theoretical and empirical work. Dissertation for Award of MSc Degree at University of Ghana, 83pp.
- Delice, A. (2010). *The Sampling Issues in Quantitative Research*. Marmara University, Marmara. 18pp.
- English, J. D. A. (2017). Mandatory reporting of human trafficking: potential benefits and risks of harm. *AMA Journal of Ethics* 19(1): 54 – 62.
- Fomby, P. and Cherlin, A. J. (2007). Family instability and child well-being. *American Social Review* 72(2): 181–204.



- Gray, D. E. (2014). *Doing Research in the Real World*. Sage Publications, UK. 231pp.
- Heath, R. (2013). *Women's Access to Labor Market Opportunities, Control of Household Resources, and Domestic Violence: Evidence from Bangladesh*. University of Washington DC. 37pp.
- Hofstede, G. (2011). Dimensionalizing Cultures: The Hofstede model in context. *Online Readings in Psychology and Culture* 2(1): 1 – 26.
- Hora, E. A. (2014). Factors that affect women participation in leadership and decision making position. *Asian Journal of Humanity, Art and Literature* 1(2): 97 – 118.
- Huber, W. D. (2001). *Culture and Corruption: Using Hofstede's Cultural Dimensions to Explain Perceptions of Corruption*. Working Paper No. 289. Capella University. 28pp.
- Jayachandran, S. (2014). *The Root of Gender Inequality in Developing Countries*. Northwestern University. 48pp.
- Khastar, H., Kalhorian, R., Khalouei, G. A. and Maleki, M. (2011). Levels of Analysis and Hofstede's Theory of Cultural Differences: The place of ethnic culture in organizations. *Financial Management and Economics* 11: 320 – 323.
- Khairullah, D. H. Z. and Khairullah, Z. T. (2013). Cultural values and decision-making in China. *International Journal of Business, Humanities and Technology* 3(2): 1 – 12.
- Klingorová, K. and Havlíček, T. (2015). Religion and Gender Inequality: The status of women in the societies of world religions. *Moravian Geographical* 23: 1 – 10.
- Koc, E. M. (2016). The international academic forum. *Journal of Language Learning* 2(1): 1 -76.
- Kumiko, S. (2008). *The Matrilineal and Patrilineal Clan Lineages of the Mvera in Southeast Tanzania*. Faculty of International Studies, Utsunomiya University Essays. 20pp.
- Lemire, J. and Budgell, B. (2016). An interdisciplinary clinic in rural Tanzania – observations on chiropractic care in a developing nation. *Journal of Canadian Chiropractic Association* 60(2): 131 – 136.
- Mahawar, M. K. (2015). Social impact of globalization on developing countries. *International Journal for Innovative Research in Multidisciplinary Field* 1(3): 127 – 132.
- Mader, K. and Schneebaum, A. (2013). *Thya Gender Nature of Intra-Household Decision Making In and Across Europe*. Working Paper No. 157. University of Economics and Business, Vienna. 35pp.
- Minkov, M. (2011). *Cultural Differences in a Globalizing World*. Emerald Publishing Group Ltd., Bingley, UK. 40pp.
- Murnen, S. K. (2016). *Body Image and Gender Roles* Kenyon College, Gambier, USA. 9pp.
- Mutanana, N. and Bukaliya, R. (2015). Women empowerment and gender related programmes implementation in Hurungwe district, Zimbabwe. *International Journal of Research in Humanities and Social Studies* 2(2): 1 – 12.
- Nigussie, A., Hoag, D. and Alemu, T. (2014). Women's workload and role in livestock production in pastoral and agro-pastoral communities of Ethiopia: The case of Afar. *African Journal of Agricultural Economics and Rural Development* 2(4): 138 – 146.
- O'Connor, P., Clare O'Hagan, C. and Brannon, J. (2015). *Exploration of Masculinities in Academic Organisations: A Tentative Typology Using Career and Relationship Commitment*. University of Limerick, Ireland. 19pp.
- Pallant, J. (2005). *SPSS Survival Manual*. [www.allenandunwin.com/spss.htm] site visited on 16/08/2014.
- PSAP (2013). The Role of Indigenous Knowledge in Supporting the Livelihood of Pastoralist and Agro-pastoralists in Khartoum. [ftp://ftp.fao.org/ag/agp/planttreaty/bsf/the%20rle%20of%20indigenous%20knowledge%20in%20supporting%20of%20pastoralist%20and%20agro-pastoralist.pdf] site visited on 9/6/2016.
- Settersten, R. A., Jr., Ottusch, T. M. and Barbara Schneider, B. (2015). *Becoming Adult: Meanings of Markers to Adulthood*. John Wiley and Sons, USA. 16pp.
- Schmitt, D. P., Long, A. E., McPhearson, A., O'Brien, K., Remmert, B. and Shah, S. H. (2016). Personality and gender differences in global perspective. *International Journal of Psychology* 2016: 1 – 13.
- Soares, A. M., Farhangmehr, M. and Shoham, A. (2007). *Hofstede's Dimensions of Culture in International Marketing Studies*. Elsevier Inc., Portugal. 9pp.
- Stege, K. E., Maetala, R. Naupa, A. and Simo, J. (2008). *Land and Women the Matrilineal Factor: The Cases of the Republic of the Marshall Islands, Solomon Islands and Vanuatu*. Pacific Islands Forum Secretariat, Suva, Fiji. 138pp.
- Sultana, A. M. (2011). Factors effect on women autonomy and decision-making power within the household in rural communities. *Journal of Applied Sciences Research* 7(1): 18 – 22.
- Waal, A. and Chipeta, K. (2013). *Effects of Culture on the Perception of South African and Tanzanian Business Students on High Performance Organizations*. Working Paper No. 3. Maastricht School of Management, the Netherlands. 38pp.
- Wade, J. C. and Rochlen, A. B. (2013). Introduction: Masculinity, identity, and the health and well-being of African American Men. *Psychology of Men and Masculinity* 14(1): 1 – 6.
- Werner, A. (2015). *The Relationship between Innovation and Hofstede's Culture Dimensions Econometric Methods and Models*. Faculty of Economics and Business Administration, Sofia University St. Kliment Ohridski, Bulgaria. 22pp.
- Wu, M. (2006). *Hofstede's Cultural Dimensions 30 years later: A Study of Taiwan*. Western Illinois University, US. 42pp.
- Yogman, M. D., Craig, F. and Garfield, M. D. (2016). Fathers' roles in the care and development of their children: The role of pediatricians. *The American Academy of Pediatrics* 138(1):1– 17.