

An assessment of adolescent decision making styles in Arua Municipality, Uganda

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ABSTRACT

This study assessed the various decision making styles among adolescents in Arua district. The study used a convergent parallel mixed method design in which descriptive survey was used for quantitative data. The total study population was 4,692 students aged 13-19 years. A sample of 369 participants was selected from the 11 secondary schools in Arua municipality. Stratified and purposive sampling procedures were employed. Data were collected using standardized questionnaires. Data were analyzed using univariate analysis where findings were presented in form of frequency tables. Study findings indicated that the decision making styles widely used by adolescents in Arua included avoidant style with a mean score of 3.09 and a standard deviation of 1.312, spontaneous style with a mean score of 2.648 and a standard deviation of 1.27 and the dependent style with a mean score of 2.37 and a standard deviation of .951. The study recommends that adolescents could adjust on their decision making styles by embracing family values. Parents could improve on ways of managing their families in the areas of communication, behavior control, problem-solving and affection to their children.

Keywords: *Decision making, Avoidant, Spontaneous, Adolescents*

Globally, adolescents may occupy themselves with risky activities due to lack of self-control and most of them suffer the adverse results of their decisions when they mature (Mak, 2015). Adolescent thinking is viewed as involves imaginary options and solutions considered important by adolescents for adaptive decision making. In adaptive decision making an individual is involved in thinking about all the possible imaginary choices and the speculative consequences of each of the imaginary alternatives (Mak, 2015).

Decisions made by adolescents are reflected in their behavior. Behaviour outcomes depend on the decision making styles employed by individuals. A research conducted in United States of America in 2013 shows that 72.5% of the adolescents were victims of alcohol use, 26% high school students were cigarette smokers, 56.8% suffered from sexually transmitted diseases (STDs) and have used contraceptives. About \$ 9 billion was spent by the government against teen pregnancy and 1.7 million adolescent cases were handled in courts (Mustanski, Byck, Dymnicki, Sterrett, Henry & Bolland, 2013).

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Received: February 15, 2020; Revision Received: March 24, 2020; Accepted: March 31, 2020

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A survey was conducted by Baiocco, Laghi and D'Alessio (2009) on 700 Italian students in 10 secondary schools aged 15–19 years to examine the General Decision-Making Scales; and it reported that intuitive, rational, avoidant, dependent and spontaneous were the main decision making styles applied by adolescents. No differences were found in decision making styles of the different genders. Older adolescents were realized to use more rational decision-making styles than younger ones and so they had lower mean score values on intuitive, spontaneous and avoidant scales. Higher performance in school is positively correlated with rational decision-making styles while absence from school is positively correlated to spontaneous and avoidant styles.

A research done in Ghana shows that religion may influence adolescents on how to make decisions when faced with poverty. Most spiritual belief systems such as Traditional African Religions promote trust in God for material needs and provision for the poor (Amoah, 2009). A similar study was done in Kenya on how adolescents in rural Kenya apply religious rationality in sexuality and sexual decision-making amidst high poverty levels and Human Immune Deficiency Virus (HIV) infections. Findings show that adolescents pray for God to enable them to engage in positive behaviors, to strengthen them to resist unwanted behaviors, to help them wait for God to provide resources to protect them from HIV/AIDS. A third of the adolescent (13) respondents stated that they apply religious coping related mechanisms to economic strain, HIV and sexual decision-making. Majority (29) reported religious coping with all life stressors. It is concluded that majority of the adolescents in Sub-Saharan Africa and in particular Uganda's adolescents may effectively use religious coping and religion-based rationality in decision making to overcome wrong decisions, poverty and HIV (Puffer, Watt, Sikkema, Ogwang-Odhiambo & Broverman, 2012). Application of decision making scales and theories to adolescents' behavior may not answer all problems. This is due to diverse living conditions, family structures and even cultural attributes of the community they belong to. However, adolescents' decision making is societal since teenagers may not see the options seen by the adults. Adolescents may view adult options as practicable for them; they may not predict a wide range of probabilities, may not be aware of the consequences, and may not predict their own future tastes. According to Albert and Steinberg (2011) there is a lot of speculation about teenagers' decision making. Teenagers think a lot about their ways out of their problems. They lack the substantive knowledge to fashion out feasible options and they may lack sense of control while creating their options. Moreover, teenagers hardly appreciate the limits of their own knowledge. Teenagers experience difficulties in interpreting the meaning and credibility of information (Casey, 2015).

Uboegbulam and Nnabuko (2016) conducted a study in Nigeria to examine the influence of adolescents on family purchase decision making. They indicated that family is an important institution on purchasing products in the society. The teen influence is growing rapidly and wielding substantial amount of purchasing power. The study also examined the interaction between family members: father, mother and the adolescent children as a complete unit and compared the adolescent's role which is given no attention in most developing countries particularly Uganda's Arua District. The study reported that adolescent children influence family decision making for the purchase of durable goods in Nigeria. However, the level of this influence on family purchase decision making is not significant.

A survey was conducted in rural Uganda in 2013 due to rapid increase in the number of new HIV infections to identify factors that influence adolescents' sexual decision-making. From 48 adolescent and 15 adult respondents five main decision making influences were noted. These are lack of familial figure who would traditionally teach female adolescents on how to

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run their households, social pressure, cultural inhibition to the use of condoms, knowledge about HIV transmission and prevention and moral restriction against indulging in sex before marriage. Risk factors were found to pull the youth towards risky sexual behaviour. Unfortunately, there was predominance of risk over protective influences towards sex risk taking decision making among adolescents. In the HIV prevention programs, socio-cultural and economic factors should be considered as teenage decision making influencers (Katz, Ybarra, Wyatt, Kiwanuka, Bangsberg & Ware, 2013).

Decision making is a task that individuals face daily. The process of making decision differs from one individual to another. Decision making styles are likely to be adaptive or maladaptive. However, adolescents' decision making styles are always associated with parenting. Maladaptive decision making styles are a lot more prevalent and often associated with harmful results for adolescents' development. Maladaptive decision making styles are highly correlated with the negative parenting methods. The understanding of decision making styles from international perspective shows that western and non-western societies play very important and distinctive roles in influencing these relationships. However, little research has been done to assess such associations (Davids, Roman & Leach, 2016). In this case the family is globally seen as the most enduring social unit. This means that family is key for healthy functioning of individuals and the broader society. Ogwo (2013) speculates that families are the primary source of individual's development where children begin to acquire their self-belief, attitude, values and behaviour considered to be appropriate in the society.

Findings of a study done in Southern Turkey to examine decision-making styles and satisfaction in different life domains in early adolescence and the influence of gender in decision making indicated that some gender attributes influence adolescent decision making and satisfaction in life. It was also found that decision-making styles are predictors of life satisfaction (Cenkseven-Önder, 2012).

A study was conducted among the South Asian American immigrants in the United States of America involving the Hmong and European communities' adolescents to compare perceptions of parental support, knowledge as well as the authoritative decision making. Further analysis was done to determine parental influence on adolescent decision outcomes in these communities. It was found that Hmong American youth perceived less parental support and knowledge and were less likely to confide or report authoritative decision making with their parents. Parental support and knowledge were realized to be highly connected to higher self-esteem and school performance.

Though few studies show that Hmong American parents are quite restricting, autocratic to their children, less open to adolescent input, highly involved in control efforts, less warm and less supportive; their parenting strategies may be viewed as adaptive strategies developed out of refugee lifestyles in Thailand and in the United States of America. According to Supple, McCoy and Wang (2010), Hmong adolescents in the United States of America are thus considered to be at risk of truancy, law-breaking and gang activities. Unaware of their contribution the Hmong parents get highly concerned about their children's adoption of Americanized identity and negative attitudes towards school and parents.

The White Paper on Families in South Africa (2013) describes family as societal groups including civil, customary, religious marriages; or communal union that extends beyond any particular shared physical residence. The family is the core of society with the goal of protection and support through family strengths and opportunities. Ogwo (2013) describes

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family as central to the socialization of children in Nigeria. However, not much is known about the role of family functioning in the decision making of the adolescents. There are a number of elements in the immediate environment that influence decision-making among the adolescents. These include the family environment and the relationship that adolescents have with the family members. Cases of reduced parental support and emotional or financial support are crucial even in the nuclear families (Armmesh, 2013). This supports the proposition that families need to be able to generate options, weigh up the options in question, come up with consensus on decisions and assess their choices that motivate decision-making styles. This enables effective decision making by family members without domination of some members especially adolescents (Carpenter & Mulligan, 2009).

A study done in Uganda on parenting behaviors as predictors of adolescent risky health behaviors outlined that mother and father support, as well as the parental knowledge were negatively associated with problem behaviors in adolescents. Commanding decision making by mothers was negatively correlated with risky behaviours, $\beta = -.040$, $p < .05$. This is not the case with fathers. Adolescents who feel close to their mothers and fathers were allowed to make decisions by the mothers. Adolescents who perceive a high degree of supervision and control from the parents are less likely to be engaged in health-risky activities (Katz *et al.*, 2013).

The government of Uganda established a youth policy (MGLSD, Uganda, 2001) in 2001 to address the challenges faced by adolescents especially in families where they were found to make wrong decisions in life. This need forms background of this study as it seeks to examine the role of nuclear family functioning on the adolescents' decision making styles in Arua municipality – Uganda. This is because adolescents in Uganda particularly Arua district (Arua municipality) need to be helped to make informed decisions which can be achieved if they are taught to employ decision making styles such as rational, intuitive, dependent, avoidant and spontaneous styles appropriately. Not much has been done before to stress on the role of nuclear family functioning in enabling adolescents to make informed decisions.

METHODOLOGY

Research Design

A research design is the arrangement of conditions for collection and analysis of data. This study employed a convergent parallel mixed design to examine the role of nuclear family functioning on the adolescents' decision making styles in Arua municipality. Where descriptive survey design enabled the study to summarize and organize data in meaningful way in the frequencies, charts, percentages and correlations were presented. This design was employed so as to allow quantitative data collection (Crowell, 2014). This research also used phenomenological design in qualitative data analysis to understand the meaning, feelings, thoughts, values and attitude of the adolescents and parents in the study (Mugenda & Mugenda, 2011). Convergent parallel mixed design allows concurrent collection of research data. In this design the study was able to separate both categories of data and to analyze them separately; and then merge the two data sets during interpretation phase. This design also allowed the study to employ the pragmatism research paradigm as the study's philosophical stance. This method was chosen because the study would present data that was gathered concurrently from the respondents without manipulating any variable. The design was also chosen in order to enable summarization, organization and merging of data into a meaningful way for effective description of existing relationships (Crowell & Crack, 2011).

Locale of the Study

The study was carried out in Arua municipality, Uganda which is purposively selected because of adolescents' lack of knowledge on decision making styles as a result of dysfunctional families in the municipality. The researcher chose this particular area to bring positive change in the municipality as a member of the community and a counseling psychologist. According to the 2014 Uganda national population and housing census final report, Arua municipality covers 411 square kilometers. Arua municipality is surrounded by Ayivu County. This study was done in all the 11 government secondary schools which were purposively selected as the only government schools in the municipality. These secondary schools included: All Saints' Secondary school Ociba, Arua Secondary, Arua Academy, Arua Islamic Secondary School, Arua Public Secondary School, Bishop Angelo Tarantino Secondary School, Ediofe Girls' Secondary School, Mvara Secondary School, Nijar Secondary School and Nile Secondary School. The study avails a recent map for geographic explanation of Arua municipality. This area was chosen because it is a commercial center that has attracted many people. Cases of drug abuse, fights, strikes, sport betting, prostitution and gambling by adolescents are common in the area which has made some schools to be banned from participating in sports in Arua municipality at least every year in the past five years.

Target Population

Kombo and Tromp (2013) define target population as a specific group of persons or elements that possess the features of knowledge and interest. In this view, therefore, this study targeted Arua municipality but not the whole of Arua district nor Uganda as a country. This was because Arua municipality is at central location of Arua district where people from all other parts of the district converge for educational, religious, economic and social amenities. Uganda population census figures of 2014 based on sub-counties and gender countrywide shows 6,645,900 adolescents between ages 13-19 years projected in 2018 with student classroom ratio to teacher being 51:1. Arua municipality alone has a total population of 4,692 students aged 13-19 years in the 11 secondary Schools in the municipality. (Uganda National Population Census Projection, 2018). This means that targeted population for this study was most available in Arua municipality.

Sample

Kombo and Tromp (2013) define sampling as the selection of a given number of subjects from a defined population as a representative of that population. It is complex and a high resource (funds, time and effort) consuming exercise to identify all nuclear family households with adolescents where both parents are alive. The study applied stratified sampling design to identify students in the 11 secondary schools in Arua municipality, Arua district in Uganda. The 348 student participants were therefore selected. A simple random sampling procedure was applied to identify and pick each student participant. The study concentrated on class/grade 1 to 4 in each of the 11 secondary schools in Arua municipality. The number of adolescent respondents to be involved was determined using Yamane's (1967) formula, Where: n = sample size, N = population size, e = level of precision or sampling error which is 0.05

$$n = \frac{N}{1 + Ne^2}$$
$$n = \frac{4692}{1 + 4692(0.0025)} = 4692/1+11.73$$
$$n = 4692/12.73 = 368.58$$
$$n = 369 \text{ students}$$

Sampling Procedure

Stratified sampling design was applied to select the secondary schools adolescent students who came from nuclear families in Arua municipality. Simple random sampling was then employed to pick individual adolescents from Grade 1 to 4 in each school. These class grades were selected because they are comprised of students within the preferred ages (13 – 19 years) for this study. These sampling procedures have been selected since population of Arua municipality is heterogeneous in family forms which are represented in the 11 secondary schools in the municipality. The study therefore generally relied wholly on the accurate and valid information gathered during the identification of the 369 respondents. The selected sample size is indicated in table 1 as shown below.

Data Collection Instruments

The study used questionnaires to collect data. A standardized questionnaire on likert scale was modified to make 57 items on family functioning and decision making styles. Questionnaires were developed by David Spicer (Bradford University of school of management) and Eugene Sadler-Smith (School of Management University of Surrey, Surrey, United Kingdom) on an examination of the general decision making style questionnaire in two UK samples. These standardized questions were adopted also from Suzette Rene Lenders research of 2015 on family and decision making styles of adolescents.

The questionnaire comprised of sections A, B, and C arranged according to objectives of the study. The questionnaire for adolescents was principally used to assess family functioning from their individual perspectives. Here the questionnaire was used to assess communication patterns, problem-solving techniques, affection and behavior control using 32 items of Likert scales. It was also used to evaluate their decision making styles namely; Rational (R), Intuitive (I), Dependent (D), Avoidant (A) and Spontaneous(S) using 25 items of Likert scales 5 each on the decision making styles. Questionnaires were developed by David Spicer (Bradford University of school of management) and Eugene Sadler-Smith (School of Management University of Surrey, Surrey, Uk)

RESULTS

Data were analyzed by generating means and standard deviations of various domains of the Decision making styles.

Rational Decision Making Style

Measures of central tendency were computed to summarize decision making styles in order to present the decision making styles of adolescents in Arua municipality - Uganda. Measures of dispersion were also computed to understand the variability of the score. The table below illustrates this data:

Table 1: Rational Decision Making Styles

	N	Mean	Std. Deviation
Variable	Statistic	Statistic	Statistic
I double-check my information	348	1.691	0.818
I make decisions in a logical and systematic way	348	1.782	0.798
My decision making requires careful thought	348	1.811	0.788
I consider various options in	348	1.953	0.805

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	N	Mean	Std. Deviation
Variable	Statistic	Statistic	Statistic
decision making			
I explore all my options before making a decision	348	1.653	0.856
Overall mean		1.778	0.813

The findings indicate that, adolescents consider various options in decision making with a mean score of 1.953 and a standard deviation of .805. In importance, this is followed by having a careful thought before making a decision with a mean score of 1.811 and a standard deviation of .788. The third most important aspect of decision making is that adolescents make decision in a logical and systematic way with a mean score of 1.782 and a standard deviation of .798. The fourth aspect of decision making by the adolescents is double-checking information while making a decision with the mean score of 1.691 and standard deviation of .818. The least means of making decision by the adolescents is exploring all options before making a decision with the mean score of 1.653 and a standard deviation of .856. The overall rational decision making style of the adolescents in Arua was realized to be 1.778 with the standard deviation of 0.813.

Intuitive Decision making style

Measures of central tendency were computed to summarize intuitive decision making styles of adolescents presented by the data herein. Measures of dispersion were also computed to understand the variability of score whereby mean scores and standard deviations were also computed. Table 2 illustrates this data:

Table 2: Intuitive Decision Making Styles

	N	Mean	Std. Deviation
Variable	Statistic	Statistic	Statistic
I rely upon my instincts when making decisions.	348	2.423	0.972
I rely on my intuition when making decision	348	2.391	0.946
I generally make decisions I feel are right to me	348	2.216	0.905
What is important for me is to feel the decision is right not rational	348	2.298	0.923
I trust my inner feelings and reactions when making a decision	348	2.192	0.984
Overall mean		2.304	0.946

The findings indicate that when adolescents make decisions they rely upon their instincts with mean score of 2.423 and standard deviation of .972. In importance, this is followed by reliance on intuition when making decision represented by a mean score of 2.391 and a standard deviation of .946. The third most important aspect of decision making was the need to feel that the decision is right but not necessarily rational with the mean score of 2.298 and a standard deviation of .923. The fourth aspect of adolescents' decision making is by generally feeling that a decision at hand is right to them which had a mean score of 2.216 and a standard deviation of .946. It was also found that some adolescents make decisions by trusting their inner feelings and reactions with the mean score of 2.192 and a standard

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deviation of .984. The overall mean of intuitive decision making styles of the adolescents was 2.304 with a standard deviation of .946.

Dependent Decision Making Style

Measures of central tendency were computed to summarize dependent decision making styles. Measures of dispersion were also computed to understand the variability of score in terms of the mean and standard deviation. Table 3 shows the findings

Table 3: Dependent Decision Making Styles

	N	Mean	Std. Deviation
Variable	Statistic	Statistic	Statistic
I often need the assistance of other people when making important decisions	348	2.34	0.963
I rarely make important decisions without consulting other people	348	2.12	0.924
If I have the support of others, it is easier for me to make important decisions	348	2.41	0.954
I use the advice of the other people in making my important decisions	348	2.36	0.947
I like to have someone to steer me in the right direction when I am faced with important decisions	348	2.62	0.967
Overall mean		2.37	0.951

This data indicates that adolescents need someone to steer them in the right direction when they are faced with important decisions with the mean score of 2.62 and a standard deviation of .967. This was followed in importance by reliance on support by other people to enable adolescents' decision making with a mean score of 2.41 and a standard deviation of .954. The third most important aspect of adolescents' decision making was by seeking advice from other people while making important decisions which got a mean score of 2.36 and a standard deviation of .947. The fourth aspect of adolescents' decision making was adolescents' need for assistance from other people when making important decisions with the mean score of 2.34 and a standard deviation of .963. The least used means of making decision by adolescents was realized to be that they rarely make important decisions without consulting other people with the mean score of 2.12 and a standard deviation of .924. This implied that most of adolescents in Arua municipality can make important decisions without consultation. The overall dependent decision making style of the adolescents was found to be 2.37 with a standard deviation of 0.951.

Avoidant Decision Making Style

Measures of central tendency were computed in order to present adolescents' avoidant decision making styles. The mean scores were computed along with the standard deviations. The findings are presented in Table 4:

Table 4: Avoidant Decision Making Styles among Adolescents in Arua

	N	Mean	Std. Deviation
Variable	Statistic	Statistic	Statistic
I avoid making important decisions until pressure is on	348	3.08	1.362
I postpone decision making whenever possible	348	3.01	1.226
I often procrastinate when it comes to making important decisions	348	3.21	1.344
I generally make important decisions at the last minute	348	3.03	1.296
I put off making many decisions because thinking about them makes me uneasy	348	3.12	1.332
Overall mean		3.09	1.312

The findings indicate that adolescents often procrastinate when it comes to making important decisions with a mean score of 3.21 and a standard deviation of 1.344. This is followed by the fact that adolescents put off making many decisions because thinking about them makes them uneasy which got a mean score of 3.12 and a standard deviation of 1.332. The third aspect of avoidant decision making is that adolescents avoid making important decisions until the pressure is on with the mean score of 3.08 and a standard deviation 1.362. The fourth aspect of adolescents' avoidant decision making style is generally making important decisions at the last minute with the mean score of 3.08 and standard deviation of 1.362. The least used means of avoidant decision making by the adolescents is postponing decision making whenever possible with the mean score of 3.01 and a standard deviation of 1.226. The mean score of overall avoidant decision making style of the adolescents in Arua municipality is 3.09 with the standard deviation of 1.312.

Spontaneous Decision Making Styles

Measures of central tendency were computed in order to present adolescents' spontaneous decision making styles. The mean scores and overall scores were computed with the standard deviation. The findings are presented in Table 5.

Table 5: Spontaneous Decision Making Styles among Adolescents in Arua

	N	Mean	Std. Deviation
Variable	Statistic	Statistic	Statistic
I generally make snap decisions	348	2.547	1.234
I often make decisions on spur of moment	348	2.588	1.182
I make quick decisions	348	2.712	1.144
I often make impulsive decisions	348	2.631	1.099
I do what seems natural at the moment when making decisions	348	2.762	0.976
Overall mean		2.648	1.127

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These data findings indicate that adolescents do what seems natural at the moment of decision making with the mean score of 2.762 and a standard deviation of .976. This was followed by quick decisions making with a mean score of 2.712 and a standard deviation of 1.144. The third most important aspect of spontaneous decision making by adolescents is impulsive decision making with mean score of 2.631 and a standard deviation of 1.099. The fourth aspect of adolescents' spontaneous decision making style is making decisions on the spur of the moment with a mean score of 2.588 and a standard deviation of 1.182. The least means of spontaneous decision making style used by adolescents in Arua municipality is generally making snap decisions which got a mean score of 2.547 and a standard deviation of 1.234. The overall spontaneous decision making style of adolescents got a mean score of 2.648 with a standard deviation of 1.127.

Table 6: Summary of Decision Making Styles among Adolescents in Arua

Decision Making Style	N	Mean	Std. Deviation
Rational	348	1.778	0.813
Intuitive	348	2.304	0.946
Dependent	348	2.37	0.951
Avoidant	348	3.09	1.312
Spontaneous	348	2.648	1.127

Avoidant style was the most preferred with a mean score of 3.09 and a standard deviation of 1.312; spontaneous style followed with a mean score of 2.648 and standard deviation of 1.127. The dependent style was third most applied decision making style with a mean value of 2.37 and a standard deviation of .951. The intuitive style responses generated a mean of 2.304 and a standard deviation of .946 as the rational decision making style had the least mean score of 1.778 and a standard deviation of .813. These results show that avoidant decision making style is the one mostly applied by the adolescents in nuclear families in the Arua municipality. It thus indicates that individual adolescents may be pessimistic about the alternatives or solutions to decisional conflicts but they delay or postpone decision making.

DISCUSSION

The findings agree with Golotii (2006) who notes that decision-making styles are subject of broader cognitive styles. Therefore, in order to raise good children parents, families and communities need to realize that adolescents need a lot of protection where adults are part of their lives to nurture, teach, guide and protect them on their journey to adulthood. Decision making as a style is a coping patterns, strategies that individuals use to deal with threats and stress. It is coping behavior applied by individuals when challenged with decisions that have to be made (Deniz, 2011).

In Uganda, an experimental study was done on a cluster of 283 orphaned adolescents in 15 primary schools in Rakai, Uganda. The study aimed at understanding the mechanisms of change, the effect of Suubi intervention on family support variables and their role in facilitating the change in adolescents' attitudes towards sexual risk-taking. Findings indicate that improvement in perceived support from their caregivers enabled a variance of 16.8% on the reduction in adolescents' attitudes toward sexual risk-taking behaviour. The study concluded that family-based economic empowerment intervention have the potential to increase family support to orphaned adolescents. Interventions directed at improving extant social networks and linkage with surviving family members is crucial in preventing sexual risk-taking behaviour among the poor adolescents in Uganda (Ismayilova, Ssewamala & Karimli, 2012). The study did not wholly investigate the communication patterns among the

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orphans and their existing family members as determinants of sexual initiation decision making attributes. Adolescents need the support of the elders to have esteem to do right things.

The extant literature indicates that the communication among families may massively dictate the decision styles adopted by the adolescents. Mothers may have profound influence on their children's decision making styles as seen in Norway according to Kim, Lee and Tomiuk (2009) and mothers also influence indecisiveness of adolescents as seen in Italy under Cascio, Guzzo, Pace and Pace (2013). However, it is not clearly known how communication patterns from mothers or from both parents in nuclear families may influence adolescents' decision making and adoption of practical decision making styles in Arua municipality.

In Australia, a comprehensive critique on literature was done to establish the empirical studies' inclination on how control during the teenage years points to shortfalls in coping, emotional regulation and decision making as they are linked to adolescence's externalizing behaviour problems. Findings from the assembled and critiqued literature posit that improvement of these three capabilities is indispensable in helping the adolescents to better navigate problems and to prevent and reduce expressing related problems. It was further reported that interventions can successfully improve these capabilities and produce behavioral improvements with real-world consequences. Successful interventions remediate these capabilities resulting to sustainable and socially integrative results (Modecki, Zimmer-Gembeck & Guerra, 2017). It is quite obvious that behavior is learned and learned behavior can be unlearned. Adolescents learn from environment, family, community, school among others. If the behavior they learn is desirable then it in most cases impacts on adolescents' life positively. Hence it may lead to healthy decision making in life.

Extant study literature hardly presents the relationship between the family problem solving strategies and the adolescents' decision making styles. Most of the studies pertinent to family problem-solving strategies and adolescents' decision making can be found on USA adolescents. The influence of the family conflict and problem solving strategies on the adolescents' decision making is also not covered. This is a big gap to be filled by this investigation.

Adolescents with effective decision making styles may experience more satisfaction in their lives (Bicanli, 2000), as cited in (Deniz, 2006). This is because different approaches, ways or methods of seeing life give them alternatives from which they can choose wisely. Hence they are more likely to be satisfied with what they choose and can be more responsible. The study findings indicate that avoidant decision making style is the mostly applied by the adolescents in nuclear families in Arua municipality. Spontaneous and dependent decision making styles are also used by adolescents in Arua municipality but are not as rampant as the avoidant style. This shows that individual adolescents may be pessimistic about the alternatives or solutions to decisional conflicts; and can delay or postpone decision making. Adolescents may also be hesitant in decision making if they realize that their parents and other family members keenly watch and monitor adolescents' decisions and behaviour to protect them and to guide them into adulthood.

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An Assessment of Adolescent Decision Making Styles in Arua Municipality, Uganda

International Conference, Johannesburg, South Africa, 9th-10th November 2016. ISBN: 978-93-86291-10-3

Acknowledgements

The author appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interest

The author declared no conflict of interest.

How to cite this article: A Saviour (2020). An assessment of adolescent decision making styles in Arua Municipality, Uganda. *International Journal of Indian Psychology*, 8(1), 1061-1073. DIP:18.01.134/20200801, DOI:10.25215/0801.134