

A Study Of Influence Of Family Structure On Health And Education In India

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ABSTRACT

Family dynamics play a critical role in shaping individual health and educational trajectories. This study investigates the multifaceted influence of family structures on these vital outcomes. It explores how type of family, parental education levels, and family support impact overall health, academic achievements, and access to healthcare and education. The analysis delves into the creation of supportive home environments that foster healthy habits and educational engagement. The importance of parental involvement and the type of family is examined in relation to both physical and intellectual development. This study contributes to a deeper understanding of the enduring influence family structure exerts on the well-being and academic success of their members.

Keywords—family structure, family influence, health outcomes, educational achievements, parental involvement.

INTRODUCTION

From the moment we enter the world, the family unit becomes the cornerstone of our existence. It's within this primary social group that we learn the basic tenets of interaction, develop our sense of self, and begin to navigate the complexities of the world around us. However, the family's influence extends far beyond shaping our social and emotional intelligence. It plays a critical, and often under-recognized, role in shaping both our physical health and our educational trajectory.

A multitude of factors within the family unit contribute to the foundation upon which we build our lives. Parental behaviors, such as dietary choices and emphasis on physical activity, have a direct impact on our physical health habits. Socioeconomic background, largely determined by family income and parental educational level, influences access to quality healthcare, nutritious food options, and safe environments for physical activity. Family structure plays a vital role in how health is perceived. These factors, in turn, have a ripple effect on our susceptibility to chronic diseases, overall well-being, and ultimately, our life expectancy.

The family's influence doesn't end at the physical realm. Parental expectations, family structure, educational support, and the overall learning environment within the home all significantly impact a child's educational journey. Supportive families who prioritize education and provide resources for learning can empower children to achieve academic success. Conversely, families facing financial hardship or lacking a strong emphasis on education may unintentionally create barriers to a child's academic potential.

By delving into the multifaceted ways families influence our health and education, we gain valuable insights into how to foster healthier and more educated individuals within society. This paper will explore these connections in detail, examining specific factors such as diet, physical activity levels, parental expectations, access to resources, the family structure, and the overall family learning environment. By understanding these intricate relationships, we can work towards creating a future where families are empowered to support the holistic well-being and educational attainment of their children.

INDIAN SOCIETY AND FAMILY STRUCTURES IN INDIA

India, as we know, is a culturally rich and ethnically gifted country with varied races and religion living under the same nationality. With a wide demography comes a large population of 1.4 billion and a plethora of family structures.

Family structures in India are diverse, reflecting the country's rich cultural tapestry. Here's a breakdown of some common types:

- **Joint family:** Traditionally the most prevalent household type, a joint family consists of parents, children, grandparents, uncles, aunts, and cousins – essentially an extended family living under one roof. Joint families are typically patriarchal, with the eldest male figure holding the most authority. Decision-making is often communal, and there's a strong emphasis on shared responsibility and interdependence. The benefits of joint families include a strong support system, emotional security, and shared childcare. However, individual privacy can be limited, and tensions may arise due to differing opinions and personalities.

- **Nuclear family:** This consists of parents and their unmarried children. It's become increasingly common in urban areas due to factors like career opportunities, education, and lifestyle preferences. Nuclear families offer greater autonomy and privacy for couples, but extended family support may be less readily available.

- **Single-parent family:** Headed by a single parent, either male or female, due to factors like divorce, widowhood, or unwed parenthood. Single-parent families can face challenges like financial strain and time management, but they can also be close-knit and resourceful units.

- **Extended family:** Like a joint family but may not necessarily live together in the same household. Grandparents, aunts, uncles, and cousins may live nearby and interact frequently, offering support and a sense of belonging.

- **Other family structures:** India's diversity extends to family structures as well. Same-sex couples, blended families (formed through remarriage), and families with adopted children are becoming increasingly recognized, although legal and social acceptance may vary.

So, in our study we will be looking at two factors: type of family structure and highest level of parental education, and their effect on education and health of an individual.

METHODOLOGY

The research approach adapted was quantitative as we aim to measure the influence of specific family factors (family structure, parental education) on health outcomes and educational attainment.

The data used for this research purpose is collected from a group of college students from all over India with general age range 18-28 years. Nearly 779 subjects participated in the data collection. Nearly 60% were male and the rest 40% identified as females.

The majority of the population was observed to belong to the state of Maharashtra, followed by Bihar, Jharkhand, West Bengal, north-eastern states like Assam, Sikkim, Meghalaya, Manipur, Arunachal Pradesh, Tripura, Nagaland, northern states of Jammu & Kashmir, Himachal Pradesh, Uttarakhand, Uttar Pradesh, Delhi, Ladakh and Tibet, central states of Madhya Pradesh, Chhattisgarh, Odisha, and island state Andaman & Nicobar. The variables in the dataset are native state, age, type of family, parental education levels, etc.

The questionnaire was designed quantitatively, and the data was collected with the help of Google form between 21st March - 23rd March 2024, inspecting factors such as age, state, type of family, parental educational levels, educational and health related questions, and family support. Due consent was taken beforehand from the participants.

STATISTICAL ANALYSIS OF DATA

The data was analyzed with the help of Microsoft Excel and Tableau software. The data was cleaned off the outliers and inconsistencies.

Type of family structure	Count
Joint family	354 (45.4%)
Nuclear family	287 (36.8%)
Extended family	83 (10.7%)
Single-parent family	49 (6.3%)
Adoptive family	1 (0.1%)
No family	0 (0%)
Other	5 (0.6%)

Table 1. Presentation of family structure and the total count

The above table shows the count of subjects belonging to the type of family. The majority of population belongs to Joint family structure, followed by nuclear family. Extended and single-parent family also have significant counts.

Highest level of education completed by parents/guardians	Count
10 th std or below	133 (17.1%)
12 th	279 (35.8%)
Graduate	228 (29.3%)
Postgraduate	86 (11%)
PhD	11 (1.4%)
No formal education	42 (5.4%)

Table 2. Presentation of highest level of parental education and the total count

The above table illustrates the highest level of education completed by parents or guardians as this factor also plays a crucial role in determining the emphasis on health and education.

The criteria for judging the health parameters pertaining to different family structures was five questions related to health, the answers to which were marked on a scale of 1-5. The questions were ‘Does your family discuss the importance of physical activity?’, ‘How often does your family participate in physical activities?’, ‘How easily can your family access healthcare services (hospitals, clinics, medicines)?’, ‘Does the cost of healthcare ever prevent your family from seeking medical attention?’, ‘How often does your family prioritize healthy eating habits?’.

Type of family structure	Does the cost of healthcare ever preve..	How easily can your family access hea..	How often does your family participate..	How often does your family prioritize h..
Adoptive family	4	5	3	5
Extended family	227	298	269	340
Joint family	1,113	1,205	1,163	1,318
Nuclear family	934	1,049	980	1,151
Other	19	21	16	23
Single-parent family	147	167	144	164

Fig 1. Health related questions and their sum total score with respect to different family structures.

The above numbers clearly show that the joint family structure is more concerned with the health-related perspectives, followed by nuclear family, and then extended family. Single-parent families show a relatively less inclination towards health, as can be inferred, followed by adoptive families and others.

Similarly, the education related queries were asked with the help of questions such as ‘Did your parents encourage you to pursue higher education?’, ‘Does your family value academic achievement?’, ‘Did your family provide educational resources at home (books, study materials)?’, ‘Does your family offer support and guidance with your studies?’, ‘Does your family discuss your educational goals and aspirations?’.

Type of family structure	Did your family provide educational resources at home (books, study materials)?	Did your parents encourage you to pursue higher education?	Does your family discuss your educational goals and aspirations?	Does your family offer support and guidance with your studies?	Does your family value academic achievement?
Adoptive family	5	5	5	5	5
Extended family	376	392	362	385	372
Joint family	1,425	1,430	1,481	1,456	1,535
Nuclear family	1,268	1,260	1,272	1,279	1,355
Other	20	16	22	21	20
Single-parent family	178	181	189	189	181

Fig 2. Education related questions and their sum total score with respect to different family structures.

The above figure clearly shows that joint families engage in more education related discussions, although nuclear families are not very far behind. Nuclear families also tend to show more education related engagements as is quite justified. Extended and single parent families lag far behind with respect to joint and nuclear families followed by adoptive families and others.

The tables in Fig 1 and Fig 2 were created with the help of tableau software. The type of family structure was set to be the dimension and the measures were the questions stated above. The values were the sum of the total scores obtained on a scale of 1-5 in each question.

To study the influence of the highest level of parental education on health and education, the questions can be considered again, now with the parental education aspect.

Highest level of education completed by your parents(Father/Mother)	Does the cost of healthcare ever preve..	How easily can your family access hea..	How often does your family participate..	How often does your family prioritize h..
10th std or below	415.0	456.0	436.0	514.0
12th	865.0	923.0	869.0	1,036.0
Graduate	714.0	834.0	793.0	916.0
No formal education	126.0	147.0	113.0	138.0
PhD	38.0	52.0	43.0	47.0
Post Graduate	286.0	333.0	321.0	350.0

Fig 3. Health related questions and their sum total score with respect to highest level of parental education

It can be observed that parental education level of 12th standard has the highest total score for health-related queries. The graduate category comes close to second place. We see a stark less score of PhD category, as opposed to expectations while education levels of 10th standard or below and no formal education also have a significant score. This might be due to the less amount of individuals with parents having PhD and more individuals having parental education as 12th.

Highest level of education completed by your parents(Father/Mother)	Did your family provide educati..	Did your parents encourag e y..	Does your family discuss ..	Does your family offer su..	Does your family value a..
10th std or below	537	527	540	545	510
12th	1,164	1,179	1,181	1,168	1,050
Graduate	970	978	1,007	999	962
No formal education	149	149	167	159	150
PhD	53	52	53	55	50
Post Graduate	399	399	403	403	376

Fig 4. Education related questions and their sum total score with respect to highest level of parental education

The above numbers follow a similar trend as the health-related questions.

The tables in Fig 3 and Fig 4 were created with the help of tableau software. The highest level of parental education was set to be the dimension and the measures were the questions stated above. The values were the sum of the total scores obtained on a scale of 1-5 in each question.

RESULTS AND DISCUSSION

The trend overall was observed that the joint family structure was most involved in the health and educational aspects of an individual. According to a study conducted by Ceria Ciptanurani 2021ⁱ, this may be due to the notion that adults living in a joint family are perceived as role models of health and educational behaviors such as regular exercising and encouragement of academic growth. In contrast to the studies presented above, Azumah et al. (2018)ⁱⁱ discovered no significant differences in relationships between children from single-parent and two-parent homes (family structure) as the independent variable and academic performance of pupils ($p=0.791$) as the dependent variable in a recent study. The findings of this study showed that family structure had no substantial impact on children's academic achievement. Some other notable findings are studied by Suleman et al. (2012)ⁱⁱⁱ, they found that having a large family, having a large number of brothers and sisters, having domestic troubles and tension among family members, having a low socioeconomic position, and not having a parent involved has a negative impact on a student's educational attainment. Another one is that both procedural and structural aspects of family social capital are major factors determining high school students' educational attainment, according to a study done by Israel et al. (2001)^{iv}

Generally, one might think that the nuclear families might provide more facilities for health and education as their structure is more secluded and considered to be growth-centric, but the analysis shows that the joint family structure surpasses the nuclear structure as it was found that joint family elders provide not only a role model for fellow members but also hold healthy eating discussions and importance of physical activities vital for the overall health.

The parental educational level also plays a critical role. As determined by this study, it was observed that most of the individuals of joint family had parental educational level as 12th standard, as is justifiable by the fact that the elder generation of most of the joint families were not much educated at olden times, but the awareness of health and education has significantly risen in the past few decades. And as the data collected for this study mostly had educational level 12th standard, thus the high numbers are explained.

Similarly, we might expect the nuclear family to be forward when it comes to education but here too, we observed that joint families excelled in this area, with nuclear family close behind. According to a study on the effects of family structure on children's academic performance, the family structure did not play a key role at all, in contrast with this study's findings.

Overall, it is safe to say after all structural and parental educational level considerations, that the joint family structure, which is the core structure of a family in Indian society proved to be the most influential on the health and education of an individual.

CONCLUSION

Family structure in India presents a complex interplay with health and education. While some studies suggest a potential association between nuclear families and better child health outcomes, the influence seems to be outweighed by socioeconomic factors like parental education and joint families seem to have a better influence. The emphasis should be on strengthening the family environment, regardless of structure. Investing in parental education can empower them to make informed health decisions for their children. Additionally, a better family environment aids in playing a positive role in understanding the importance of health and education, creating a more equitable foundation for health and educational attainment across all family types.

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