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Editors’ Note

We are pleased to present to you the 2018’s autumn issue. The IAFOR’s Journal of Psychology & the Behavioral Sciences covers a variety of empirical studies about applications of psychological theories in educational and mental health settings. Moreover, the journal showcases studies that examine topics regarding human development, psychological outreach services, family studies, as well as articles addressing the needs of at-risk children, youth and families, and vulnerable populations.

The journal is an internationally peer reviewed, and editorially independent, interdisciplinary journal associated with the IAFOR (The International Academic Forum) conferences on Psychology and the Behavioral Sciences. This issue is devoted to several interdisciplinary studies which represent diverse topics, cultures, and disciplines in the fields of psychology and the behavioral sciences. All papers published in the journal have been subjected to the rigorous and accepted processes of academic peer review. Some of the articles are original, and some are significantly revised versions of previously presented papers or published reports in the IAFOR’s conferences and proceedings.

We would like to express our deep gratitude to all reviewers for taking time from their busy schedules to review each assigned manuscript and offer their professional expertise, and recommendations for improvement of these published papers. Also, we like to take this opportunity to acknowledge the hard work of our support staffs at the IAFOR who were involved with the publication of this journal.

Please note that we are seeking manuscripts for our upcoming Spring and Autumn, 2019 issues. Below is the link to the journal’s web page for your attention; please review this web page to become familiar with the journal’s objectives and the submission guidelines for authors:


If you have any questions, please do not hesitate to contact us, otherwise please send your manuscript to the journal’s editors below. Thank you for considering this invitation, and we look forward to hearing from you soon.

Best Regards,

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The IAFOR Journal of Psychology & the Behavioral Sciences
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Brand Selection in Planned Purchasing: An Analysis of Asian User Behavior

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Abstract

Users in planned purchasing undergo significantly different decision-making process compared to impulsive purchasing. Although several researchers have investigated user behavior of buying products from planned categories such as, organic products and halal products, research in the domain of selecting a specific brand within a category are limited. A qualitative study was conducted among users across several Asian markets such as China, Hong Kong, Taiwan, South Korea and Thailand to understand factors influencing the brand selection process in a planned purchase context. The qualitative study used a content analysis-based approach, with a code sheet incorporating elements associated to purchase behavior, among over 100 users across the countries. The qualitative study revealed that factors such as recommendations from friends, family members, and sales consultants, TV programs like advertisements and product informative programs, and other parameters like in-store presence of the brand, product information on the package, and aesthetic appeal of the package have a positive influence on the users’ brand selection process. Findings from the qualitative study were used to formulate multiple hypotheses about the relative importance of these different factors. These hypotheses were evaluated using an online survey among users from several Asian markets (predominantly India, Philippines, and Singapore), with a base size of 63. Statistical investigations were done using the t-test with p-value of 0.05. Results from the current study provide data that strengthens knowledge in the domain of consumer psychology and are relevant for product designers and marketers, who are designing and commercializing products in planned purchase categories.

Keywords: user behavior, planned purchase, brand selection, Asian users
**Introduction**

Successful product innovations are important for the profitability and growth of companies (Coad, Segarra, & Teruel, 2016). However, many product innovations do not succeed in the market. Product designers and marketers could play an important role in making the innovations more successful, by designing products that provide irresistible usage experience, packages that attract user attention at the store and product communications that bring more users to stores. To do so, it is important for them to understand the user, especially their purchase behavior. With ever-increasing competition in the market, understanding user behavior has become one of the most important tasks for companies. The study of user behavior is very extensive and focuses on how users make decisions to spend their resources on consumption-related matters. This includes what users buy, why, when and from where they buy it, how often they buy it and use it, how they assess it after the purchase, and how they dispose of it after use (Singh, Dhayal, & Shamim, 2014). User behavior understanding could provide companies with insights on target users’ path to purchase, desired product features and purchase decision-making process, which they could use to develop product design and commercialization strategies to make the innovations successful in the market.

**Literature Review**

User behavior in product purchase can be classified into planned purchases and impulsive purchases (Cobb & Hoyer, 1986). Users undergo expressively different decision-making process while performing planned and impulsive purchases (Bellani, Cardinali, & Grandi, 2017). Impulsive purchases are unplanned. Purchase decisions in impulsive buying are driven by a sudden urge to buy when the users are at the point of sale (Rook, 1987; Beatty & Ferrel, 1998). On the other hand, planned purchases are pre-planned (Yazdanpanah & Forouzani, 2015). In a planned purchase, users have a prior identified product before entering the shop.

Over the past few decades, academic research has paid considerable attention to understanding impulsive and planned purchase behaviors across various product categories (Ozen & Engizek, 2014; Paulo, Mario, & Marlene, 2013; Yadav & Pathak, 2016). According to Basin, Darden, and Griffin (1994), impulse purchase behavior is a result of hedonic or emotional motivations. Weinberg and Gottwald (1982) suggested that impulsive buying is a result of high emotional activation, low cognitive control, and a reactive behavior. Impulsive purchases are unplanned because the purchase is made even though the user was not actively looking for that item and had no pre-shopping intention to purchase it (Jones, Reynolds, Weun, & Beatty, 2003; Stern, 1962). The motivation and decision to purchase happens after the user sees the article (Hoch & Loewenstein, 1991).

Decision making in a planned purchase is significantly different from impulsive purchase. Like the name indicates, planned purchases are pre-planned. Piron (1993) defined planned purchase behavior as a purchase action undertaken by the user with a prior identified problem or a purchase intention formed before entering the shop. Ajzen’s (1991) Theory of Planned Behavior (TPB; Figure 1) is a good model for explaining planned purchase behavior. TPB integrates some of the fundamental concepts in behavior and social sciences and defines these concepts in a way that allows deeper understanding and prediction of specific behaviors. TPB is an extension of the theory of reasoned action (TRA) (Azjen & Fishbein, 1980). According to TRA, “intention” is the immediate cause of planned behavior (Kaiser & Scheuthe, 2003). In other words, “intention”, that is, willingness or readiness to involve in
behavior gives the best prediction of the behavior (Han & Kim, 2010). According to this theory, users are rational in their decision-making processes, and they would make a reasoned selection among the available choices (Chen & Tung, 2014). The second component of TRA is the subjective norm, which is a function of beliefs about the significance of social pressure and motivation to act in accordance with it (Al-Swidi, Huque, Hafeez, & Shariff, 2014). TRA was very effective and successful in predicting and explaining rational behaviors (Han & Kim, 2010). Putting TRA in the context of product purchase, someone is most likely to perform a purchase action, if he or she has a prior formed purchase intention for the product.

TRA was transformed to TPB by including perceived behavioral control in the model, which enabled prediction of behaviors that are difficult to engage in (Madden, Ellen, & Ajzen, 1992). Perceived behavioral control is a measure of the user’s perceived ability to perform the behavior (Dowd & Burke, 2013). According to TPB, the attitude towards the behavior together with the influence of relevant reference people (subjective norm) and the perceived control the user has over the behavior (perceived behavioral control), results in the formation of a behavioral intention, which in turn results in the behavior. Like in TRA, the center of planned behavior is the users’ intention to perform a given behavior (George, 2004). The stronger the intention to engage in the behavior, the more likely it would occur. Al-Swidi et al. (2014) conducted a study in the context of organic food consumption to investigate effects of subjective norms on attitude, purchase intention and perceived behavioral control. Their research suggested that subjective norms could significantly moderate the relationship between purchase intention and attitude, as well as purchase intention and behavioral control. They also showed that subjective norms could significantly influence attitude towards purchase intention. Planned purchasing has an important role in the overall purchase behavior of users’ in any given market.

![Figure 1: Theory of planned behavior. Adapted from Ajzen (1991)](image)
Impulsive and planned purchase models have received significant attention from academic and marketing research. Abratt and Goodey (1990) studied the effect of in-store stimuli in supermarkets on impulsive buying among users in the U.S. and South Africa and suggested that impulse buying is higher in the U.S. However, the importance of in-store stimuli holds true for both countries. By doing a field experiment, Peck and Childers (2006), assessed the influence of sensory element “touch” on impulse-purchasing behavior, and reported that individual and environmental “touch” related factors have a positive impact on impulse purchasing. Badgaiyan and Verma (2014) conducted a study among Indian users to assess the effect of the users’ personality, shopping enjoyment tendency, culture, impulsive buying behavior and materialism on impulsive buying behavior. Their study reported that materialism, impulsive buying tendency, and shopping enjoyment tendency have a significant positive effect on impulse purchases. Mattila and Writz (2008) examined the role of induced environmental stimulation on impulsive buying among retail outlet users in Singapore and found that perceived over-stimulation has a positive effect on impulsive buying. Lee and Yi (2008) investigated the effect of shopping emotions and perceived risk on impulsive buying and suggested that pleasure is a predictor of the purchase intention and perceived risk is limiting factor for impulsive purchase. Yu and Bastin (2010) conducted an exploratory study among Chinese users to understand impulsive purchase behavior, and reported that like developed markets, impulsive purchases are “normal” phenomenon in China, although cultural values continue to influence the purchase behavior.

Several researchers have used the Theory of Planned Behavior (TPB) to understand user behavior in planned purchase. Using TPB as the basis, Kim and Chung (2011) suggested that both environmental and appearance consciousness have positive influences on users’ attitude toward the purchase of organic personal care products. Alam and Sayuti (2011) studied user behavior in halal food purchase among Malaysian users and suggested that attitude has a significant and positive effect on halal food purchase intention. Using TPB as a foundation, Vermeir and Verbeke (2008) investigated determinants of sustainable food consumption behavior among young adults in Belgium and showed that 50% of the variance in intention to consume sustainable dairy products could be explained by the combination of personal attitudes, perceived social influences, perceived consumer effectiveness and perceived availability. Chi, Yeh, and Yang (2009) investigated the effects of brand awareness, brand loyalty and quality perception on users’ purchase intention of cellular phones. They found that brand awareness, quality perception, and brand loyalty have a positive influence on purchase intention. Further, they suggested that perceived quality has a positive effect on brand loyalty, which will also mediate the effects between brand awareness and purchase intention. Using a portable multimedia player as an experimental product, Park, Lee, and Han (2007) investigated the effect of online consumer reviews on consumer purchase intention and suggested user reviews have a positive effect on users’ purchase intention. As well, they suggested the number of reviews and quality have positive effects on purchase intentions. Armitage and Conner (2001) conducted a meta-analysis-based study and suggested that TPB could account for 27% variance in purchase behavior and 39% of the variance in purchase intention.

Although there is an abundance of research on factors influencing impulsive purchase behavior, studies understanding factors influencing planned purchasing are relatively limited. Existing research on planned purchasing focused on user behavior in purchasing of a certain category of products like organic products, halal food, and so on. However, research in understanding factors influencing the selection of a specific brand within a given category are scarce. In this study, the researchers attempt to close this gap by investigating user behavior in brand selections within a planned purchase category. Such a research would be relevant to
industrial product designers and marketers, as they look for ideas to win users’ purchase intention from competing brands within a specific category.

Research Methodology

User studies involving qualitative and quantitative methodologies were employed in the research. The qualitative study was conducted as a pilot study to gain a general understanding of users’ purchase behavior and identify factors influencing the brand selection process in planned purchasing. The study was conducted among users from several Asian markets such as Taiwan, South Korea, Hong Kong, China, and Thailand. A total of 114 users participated in the study. The study in South Korea, Hong Kong, and China was conducted using an online platform called Consumer Consulting Board, developed by InSites Consulting, a professional consumer research agency. The online platform was used due to the large geographical size of these markets. For Thailand and Taiwan, in-person interviews were conducted in Bangkok and Taipei respectively with the help of a professional market research agency called IPSOS. In both cities, four focus group discussions (groups of four users each), five one-to-one in-depth interviews, and two shop-along interviews were conducted. The users were in the age group of 25–55 years. The interviews were conducted in Thai and Chinese languages respectively with the help of a qualified moderator and simultaneous translator. Data were collected from May through August 2016.

For the qualitative study, users were asked to describe their process of brand selection within a familiar planned purchasing category. Questions included: what made them buy the product at first place? Before buying did they search for any information? Where did they search for information? What convinced them to select those products? How do they decide on which brand to buy? Which websites do they usually use to search for product information? Which stores do they usually go for buying products? What are the most important things they look for when deciding which brand to buy? and so on. Users' responses were analysed using a qualitative content analysis methodology. Qualitative content analysis is a structured and systematic method of analyzing text data (Maxwell, 2005). The qualitative study revealed that users in planned purchasing are influenced by several factors in the process of selecting a specific brand. These factors include recommendations from family members and friends, the recommendation from a category expert, for example, a dentist for toothpaste, online ratings and reviews from prior users, information present on brand websites, brand advertisements, the in-store presence of the brand, branded in-store consultants, and so on. The findings from the qualitative study were used to formulate three hypotheses about the importance of each of the factors in influencing user’s brand selection process in planned purchasing.

H1: Recommendations from family members and friends have a higher level of influence than a recommendation from a branded in-store consultant

H2: An informative program about the product by a category expert has a higher level of influence than a branded TV advertisement.

H3: Information provided on the package has a higher level of influence than the aesthetic appeal of the product.
A quantitative study was conducted among Asian users to examine the hypotheses. The study used an online survey platform called surveyplanet.com for data collection and used the online shopping of Bluetooth headset as a product example. A total of 63 Asian users participated in the study, of them 31 were Indians, 19 were Filipinos and 7 were Singaporeans. Among the participants, 36 were male and 27 female. The users were given detailed information about the context of shopping survey. They were asked to imagine they are in the process of decision making for a purchase of a Bluetooth headset. To enable users’ planned purchasing thought process, they were also asked to imagine that they have completed information searching about the product. With that background, users were asked a few questions about factors influencing the decision-making process using a seven-point Likert scale. The questions included the influence of factors such as recommended by a friend or a family member who has used the product before, a recommendation from a sales consultant, the aesthetic appeal of the product, information about the product features, TV advertisement and an informative program on TV by a technical expert. Statistical investigations were done using t-test with a critical value of $\alpha = 0.05$. 

![Figure 2: Factors influencing decision making in planned purchasing (Sebastian, Yammiyavar & Joens, 2017)](image-url)
Results

The analysis of the quantitative survey provided insights on the level of influence of different factors influencing the users’ brand selection process in planned product purchase. The average score of the effect of different determinants on user decision making is presented in Figure 3. A comparative analysis of the level of influence of different factors was also performed to validate the hypotheses. Results from the comparative analysis are presented in Table 1. Comparison of the level of influence of friends and family members’ recommendations to a sales consultant’s recommendation revealed that consumers give higher importance to friends and family members’ recommendation. Based on the t-test, the difference in importance of recommendation of a friend or family member to a sales consultant’s recommendation was significant, with a critical value of $\alpha=0.05$, thus supporting H1. A higher score for friends and family members’ recommendation is possibly driven by the fact that friends and family members are a user’s well-wishers and they do not profit from the purchase, while the sales consultant is directly profiting from the product purchase. Comparison of the influence of TV informative programs and TV advertisements showed TV informative program had a significantly stronger influence over TV advertisement. The statistical significance of the difference was also assessed using the t-test, which showed significance with a critical value of $\alpha=0.05$, thus supporting H2. Comparative analysis of the influence of beautiful look of the product and information about the product features was also performed. Based on the t-test, information about the product had a higher level of influence compared to the beautiful look of the product, which is significant with a critical value of $\alpha=0.05$, which supports H3.

<table>
<thead>
<tr>
<th>Variables</th>
<th>Average</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friend’s Recommendation – Sales Consultant Recommendation</td>
<td>0.508</td>
<td>0.015</td>
</tr>
<tr>
<td>Family Member Recommendation – Sales Consultant Recommendation</td>
<td>0.635</td>
<td>0.003</td>
</tr>
<tr>
<td>TV Informative Program by Category Expert – TV Commercial</td>
<td>1.048</td>
<td>0.0000004</td>
</tr>
<tr>
<td>On-pack information about Product Features – Beautiful Look of the product</td>
<td>0.794</td>
<td>0.00004</td>
</tr>
</tbody>
</table>

Table 1: Statistical analysis of factors influencing planned purchase of Asian Users (N=63)
The average score from seven-point Likert scale testing among 63 users is presented. A higher number represents a higher level of influence in planned purchasing. The data suggests that designers in planned purchasing categories should give higher importance to product features over the aesthetic appeal of the product, and marketers should give higher weightage to the communication of product features over commercial advertisements.

**Conclusion**

This study provided qualitative and quantitative insights on user behavior in planned product purchase. These insights are particularly relevant to product designers and marketers who are designing and commercializing products in planned purchase categories. The study suggested that in planned purchasing categories, recommendation by friends and family has a higher level of influence than a sales consultant’s recommendation. This is consistent with findings by Gil, Andrés and Salinas (2007), who studied the role of family as an influencing factor in brand equity formation and showed that positive information provided by the family has an effect on perceived quality and formation of brand associations. The current study extends their finding to purchase intention. This could be because, in a planned purchase, users give more attention to the actual benefits offered by the product than sudden urges triggered by a sales consultant’s recommendation.

Secondly, users also accord significantly higher importance to an informative program about the product as compared to traditional TV commercials. This finding is also in agreement with Biswas, Biswas, and Das (2006), and gives an additional reasoning for their finding. Biswas et. al. (2006) studied differences between celebrity and expert endorsement on user risk.
perceptions and suggested that for high technology-oriented products, an expert endorsement has a stronger effect than a celebrity endorsement in reducing risk perceptions. The stronger effects of expert endorsement could be because of the planned purchase nature of high technology products.

Lastly, the study also suggests that, for planned purchase categories, on package information about the product features has significantly higher importance than the aesthetic look of the product. This is also supported by Chang and Wildt (1994), which reported that product information is indirectly connected to perceived quality, which in turn positively influences the purchase intention.

The findings from the current research have several managerial implications, some of which are cited here. Based on the study, product designers in planned purchase categories should give higher priority in bringing product features to life as opposed to aesthetic elements that trigger the sudden urge to buy at the point of sale. It should be also noted that designers should not completely ignore product aesthetics as it could in some circumstances negatively affect sales performance (Yamamoto & Lambert, 1994). It is also important to identify whether the product belongs to impulsive or planned purchase category, before applying the design principles. For example, purchase in candy products category could be triggered by the aesthetic appeal of the product, while information about the product might be more important for products in milk or baby food categories. This is because chocolate is an impulsive purchase category, while milk and baby food are in planned purchase category. For marketers, the study suggests that a holistic commercialization plan going beyond in-store executions is required to win the target users’ purchase intention.

The current study is also subject to certain limitations. Firstly, the base size used for quantitative study is small, as a result, the researchers were not able to assess differences between users in multiple markets and cultural influence. Further, the study also used only one type of product, which could be a limiting factor to the scope of the research, although using one type of product is a common practice in user behavior studies. Findings from current study and literature investigating similar concepts strongly advocate the need for future studies for improved user behavior understanding. This is particularly important due to the ever-evolving market environment and changing user behavior. The researchers recommend future studies with a larger base size to assess the effect of the cultural difference in factors influencing the brand selection process. Studies involving multiple categories of products would be also interesting to assess the broader applicability of the findings. The researchers also suggest future studies involving in-depth interviews and path to purchase studies to get deeper insights on reasons behind differences in the level of influence of different determinants assessed in current research. Such research would be very relevant for academicians, product designers, and marketers.
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Teachers Beliefs and Predictors of Response to 
Verbal, Physical and Relational Bullying Behavior in Preschool Classrooms

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Abstract

Relatively few research studies exist on bullying in preschool classrooms despite research indicating bullying roles can be formed at the preschool level. The purpose of this study was to examine preschoolers’ teachers’ beliefs about the existence of bullying in classrooms, and the factors likely to predict teachers’ response towards bullying behavior. Results revealed that teachers’ empathy, perception of seriousness, and response significantly predicted preschoolers’ verbal, physical, and relational bullying behaviors. The findings of the study highlight the need for advocacy and interventions in preschool classrooms.

Keywords: preschool, bullying behavior, empathy, perception of seriousness, responses
Introduction

Extant literature is clear that healthy behavioral and emotional developmental processes are important precursors to a child’s success (Davis, 2015). These may be interfered with among small children in the preschool. When asked about the prevalence of bullying in preschool settings, preschool teachers affirmed that bullying exists (Curtner-Smith et al, 2006; Davis, 2015). For example, Llaberia et al. (2008) surveyed teachers in a Spanish population of 1,104 preschool students from rural and urban settings to investigate links between externalizing diagnoses and aggression in community-based populations. The authors noted that initial findings confirmed the existence of preschool aggression as well as gender and age differences related to aggression. Llaberia et al. also reported physical and verbal aggressive behavior was associated with externalizing disorders. Further insight was offered by Goryl et al. (2013). They noted similar findings when they sought to understand teacher perceptions about bullying and found teachers endorsed beliefs that preschool children were capable of bullying.

Bullying

Bullying within a school context is often intended to cause fear, harm, or distress to the recipient (Ttofi & Farrington, 2010). Typical bullying behaviors include verbal taunts, malicious smear campaigns, threats, harassments and exclusionary behaviors (Camodeca, Caravita, & Copolla, 2015). Within the school environment, children tend to engage in verbal bullying because it is subtle and helps them avoid the consequences associated with physical bullying. Whether bullying is verbal, physical or relational, bullying can have deleterious effects on the psychological and emotional development of children. Jansen et al. (2012) noted that “it is therefore important that children with an increased risk of becoming bullies or victims are identified at a young age so as to facilitate timely prevention of bullying and victimization. Identification is enhanced by knowledge of the determinants and predictors of bullying behavior” (p. 2). Although quite a number of studies have been done on bullying behaviors among adolescents and young adults, relatively few studies have been conducted on bullying behavior among preschoolers.

Teachers play a significant role in the lives of children during the school day. They employ various methods to manage disruptions in the classroom environment while also ensuring that students meet daily responsibilities. When disruptions or issues with student safety arise, teachers must stand ready to intervene by employing various supportive and proactive classroom management skills. A teacher’s response to handling classroom disruptions such as bullying can be affected by various factors, and a lack of response or ineffective response style can lead to negative effects on classroom climate (Davis, 2015). Moreover, because teachers have many responsibilities during the school day, they are not always aware of bullying. Since teachers are charged with protecting all students, when bullying situations arise teachers must address them and protect informants from retaliation (Rigby, 2002). However, research has shown that factors such as lack of teacher awareness, perceptions about the seriousness of an incident, and teacher perceptions about their abilities to intervene effectively serve as factors that impact teacher intervention.

Theoretical Framework

The theoretical model for this study is based on the ecological model, which posits that the quality of interactions within a child’s proximal environment is most influential to the child’s development (Bronfenbrenner, 1994). This model also holds the view that classrooms serve as microsystems. That is, the teacher and the classroom environment have reciprocal influences and impact one another. Within the context of bullying, classroom climate may promulgate
social rewards that maintain bullying (Davis, 2015). To support this assertion, researchers have found that classroom behavior affected bullying attitudes of teachers and students. Implications are that individual teacher characteristics may exert an influence on teacher responses into incidents of bullying (Vervoort, Scholte, & Overbeek, 2010). Being able to deal with bullying and feeling equipped to handle not only bullying but classroom disruptions, are paramount. There are implications associated with a lack of response to bullying from teachers. That is, because children utilize different coping strategies, it is important that when they seek help from a teacher or another adult, the child must feel that their report to the teacher will not make the situation worse or lead to ineffective response strategies by the teacher and lead to retaliatory attacks on the victim (Kochenderfer-Ladd & Pelletier, 2008).

**Early Childhood/Preschool Education Programs**

Preschool education programs serve as vehicles to improve school readiness (Burger, 2010; Davis, 2015). Federal programs such as the Head Start program recognize the influences of environment and culture on the areas of cognitive and social emotional development (Head Start Act, 2008). Additionally, stakeholders such as legislators, educators, and parents have begun to recognize the benefits of early intervention as evidenced by federal mandates. In fact, schools classified as Title I are mandated to offer pre-Kindergarten classes with class limitations set to 18 students per classroom (NCLB, 2001). The efficacy of early intervention programs, types of community based and non-community-based programs, characteristics of high-quality learning environments as well as a review of proactive efforts to standardize the quality of early childhood programs using Quality Ratings, are efforts designed to undergird preschool education.

A child’s formative years are very important as environmental influences can have a significant effect that can impact brain development, learning, behavior, physical and mental health (U.S. Department of Education, 2011). Thus, investing in the development and enhancement of quality learning programs is paramount. High Quality Learning environments refer to the quality of the school and learning environment and are seen as programs that focus on key components such as teacher effectiveness and safety. The legislative mandates associated with NCLB (2001) requiring increased accountability and budgetary restrictions, implies that policy makers responsible for earmarking funds for early childhood will be forced to make choices about the types of school readiness programs to fund. In light of this, empirical investigations of program quality, teacher effectiveness and student performance variables are necessary (Magnuson, Ruhm, & Waldfogel, 2007; Winsler et al., 2008).

Two major preschool models exist. The first major preschool model is community-based program, which is a type of school readiness program with limited enrollment and income restrictions. A program that is located in a community-based setting may be funded by the federal government, with a requirement to have a minimum number of students with disabilities enrolled in the program (e.g., Head Start program). The second major preschool model is a Public school/non-community-based program, which is a type of school readiness program that is situated within a public school. Such programs are not based on income and enroll all 3- and 4-year-old children. Further, public school/ non-community-based programs do not include a set of criteria or requirements to enroll students with disabilities. State sponsored programs are referred to as Pre-Kindergarten (Pre-K) programs and these often operate within the public-school systems. These programs serve 4-year-old children from all backgrounds regardless of income. The programs are primarily funded by states and have been associated with positive gains in language, math, literacy, and social skills (Magnuson et al., 2007). The structure of
these programs is similar to Headstart with regard to classroom size, and teacher-student ratios (Winsler et al., 2008).

**Teacher Characteristics**

Most studies examine teacher self-efficacy in handling classroom behavior difficulties and working with students with developmental disabilities as compounding factors (Quesenberry, Hemmeter, & Ostrosky, 2010) that precipitate reasons for expulsions in preschools. Supporting this notion, data from the 2012 National Survey of Early Care and Education indicated that only 20% of preschool teachers received specific training on facilitating children’s social and emotional growth in the past year. Other studies have found that early childhood teachers report that coping with challenging behavior is their most pressing training need (Fox & Smith, 2007). This implies limited continuing education in the area of child development may lead to difficulties in teachers being able to differentiate between behaviors that are inappropriate from those that are developmentally age appropriate. Similarly, Hemmeter, Ostrosky, and Fox (2006) delved into the challenging behaviors in early childhood, finding that very often young kindergarten children with challenging behavior problems were less likely to receive teacher feedback and more likely to have performance deficits in kindergarten.

Numerous studies point to the pivotal role teacher’s play in handling incidents of bullying (Bauman & Del Rio, 2006; Crothers & Kolbert, 2008; Davis, 2015; Gordon-Troop & Ladd, 2010; Yoon & Kerber, 2003). However, research studies have concluded that teachers are sometimes unaware or unable to identify bullying, particularly in verbal and relational forms (Farrell, 2010; Goryl et al., 2013). Within preschool settings, research suggests teachers were less likely to classify behaviors as bullying, instead choosing to label behaviors as challenging or inappropriate (2013). Similarly, teachers in preschool settings were less likely to provide feedback about behaviors (Hemmeter et al., 2006).

Research has also pointed to teacher characteristics such as teacher empathy toward the victim, perceived self-efficacy, moral orientation (Ellis & Shute, 2007), perceived seriousness (Yoon & Kerber, 2003), and views about peer victimization as factors that affect teacher response to bullying at school (Kochenderfer-Ladd & Pelletier, 2008; Yoon, 2004). Other research has suggested student characteristics may impact teacher response style within the classroom. Specifically, Dee (2005) found that factors such as race, gender, IQ, and parental status within the community impact teachers’ response level. That is, teachers tended to treat those that were dissimilar in race and gender differently than those who share their race and gender in classrooms (Hekner & Swenson, 2011).

**Teacher Empathy.** Empathy is classified as a character trait that involves cognitive components such as perspective taking or the ability to adapt the view of others or the tendency to respond and experience feelings of warmth, compassion, and concern for others undergoing a negative experience (Cohen & Strayer, 1996). Researchers have noted a positive relationship between teacher empathy and bullying (Bauman & Del Rio, 2006; Byers, Caltabiano, & Caltabiano, 2011; Mishna, Scarcello, Pepler, & Wiener, 2005). Teacher empathy is an important construct because teachers must be approachable and able to view situations from the perspective of others. Since children in preschool settings cope with aggression and bullying related instances by telling their teacher or an adult, teachers who lack empathy may not listen or may miss opportunities to intervene when students are trying to make disclosures to them about bullying and other incidents (Hunter & Borg, 2006; Kahn, Jones, & Wieland, 2012).
In relation to empathetic responses, Yoon and Kerber (2003) conducted a research study assessing the factors that influence teacher response style with a sample of 98 teachers. The outcomes of this study revealed that teacher perceptions guided the decision to intervene in bullying situations. That is, teachers who reported high levels of self-efficacy and empathy for the victim were more likely to perceive the need to intervene in the bullying scenarios. In a study involving teacher attitudes toward bullying, Rigby (2002) found that 98% of teachers were sympathetic to victims of bullying; however only 81% of teachers believed teacher intervention was appropriate. Researchers also noted that school psychologists, teachers and school counselors who witnessed peer victimization responded differently leading to increased empathy for victim and subsequent intervention (Newman & Murray, 2005). Thus, empathy seems to serve as a catalyst when educators decide whether to intervene in bullying situations.

**Perception of Classroom Management.** Perceptions about classroom management refers to the beliefs a teacher holds about his or her skills. According to Grining, Raver, Sardin, Metzger, & Jones (2010), teacher characteristics and teacher psychosocial stressors can affect classroom management. Classroom management is characterized as a collage of activities that refers to the teacher’s ability to oversee classroom activities such as learning, social interaction, and student behavior (Brophy, 2010). Given research support indicating a correlation between classroom behaviors and bullying attitudes, it is important for teachers to facilitate an atmosphere that deters victimization and bullying attitudes. Further, research has also suggested that classroom behavior management plays an important role in school readiness in early childhood populations.

Snell, Berlin, Vorhees, Stanton-Chapman, and Haddan (2011) surveyed early childhood teachers, directors, assistants, and Headstart staff to understand classroom behavioral practices. In line with other research studies, children’s externalizing behaviors were viewed as more problematic by all respondents. According to Snell et al. (2011) implications exist for additional training when dealing with problem behavior in the classroom.

**Perceptions of Seriousness.** Perceptions of seriousness refer to teacher self-perceptions about an incident. With regard to bullying, the perceptions the teacher holds about whether an incident is serious or not has been found to be correlated with teacher level of involvement in bullying situations (Craig & Pepler, 2003; Yoon, 2004; Yoon & Kerber 2003). For example, Kahn et al. (2012) examined teacher intervention styles and noted that interventions were based on the type of aggression displayed and the overall perceived seriousness of the bullying incident. Gordon-Troop and Ladd (2010) conducted a study finding that teachers who held the belief that victims should be more assertive toward bullies were found to have higher levels of peer-reported overt aggression in their classrooms. They also reported that teachers who supported the notion of separating the bully and not having the victim confront the bully had lower levels of classroom aggression. Conversely, teachers who believed bullying was associated with normative development were less likely to punish aggressors and were more apt to tell victims to stay away from their attackers (Kochenderfer-Ladd & Pelletier, 2008). Further, teachers who believed victims should assert themselves supported the notion of telling victims to stand up to the bullies (Kochenderfer-Ladd & Pelletier, 2008). With regard to response style, Gordon-Troop and Ladd (2010) found a correlation between teacher response style and level of aggression in the classroom. That is, teachers who separated those involved in bullying incidents had lower levels of aggression in their classroom. In other words, it has been shown that teacher responses to handling bullying incidents can diminish or amplify bullying behaviors (Swearer, 2007).
The purpose of this study was to examine preschoolers’ teachers’ beliefs about the existence of bullying in classrooms, and the factors likely to predict teachers’ response towards bullying behavior. The following four research questions were considered:

1. Do teachers in preschool classrooms believe that bullying takes place in preschool programs?
2. Does teachers’ empathy, perceived seriousness and likelihood of response predict verbal bullying preschool in preschool programs?
3. Does teacher’s empathy, perceived seriousness and likelihood of response predict physical bullying in preschool programs?
4. Does teachers’ empathy, perceived seriousness and likelihood of response predict relational bullying in preschool programs?

Method

Participants
The target population of the study comprised preschool teachers working in a non-profit agency in the southeastern region of the U.S. The teachers and their responses were chosen as the unit of analysis because extant literature suggests majority of school-based bullying occurs at the classroom level in front of teachers (Olweus, 1993). The time frame for data collection was approximately two weeks.

Participants (teachers) ranged in age from 21 to 66 with a mean age of 40.83. The sample comprised 99.2% (n = 132) females and .8% (n = 1) male. The sample included 82.7% (n = 110) teachers who identified as White, 15.8% (n = 21) Black and .8% (n = 1) who listed Other. Eighty-one teachers (60.9%) held teacher certification. Of the teachers sampled, 51.6% (n = 65) held an associate degree, 41.3% (n = 52) held a bachelor’s degree, and 7.1% (n = 9) held a master’s degree.

Setting
The nonprofit agency where the study was conducted served students from low-income areas, military families, and children with disabilities within a 13-county, mostly rural region in the state. Across the preschool centers, most of them were located in areas which listed median annual household incomes ranging from $34,907 to $42,253 (U.S. Census Bureau, 2014). With regard to households below the poverty level, statistics ranged from 16% - 26% (U.S. Census Bureau, 2014).

Instruments
A web-based survey design was employed to collect data for several reasons: (1) web-based surveys allow for rapid deployment of surveys for respondents who are geographically dispersed; (2) web-based surveys provide convenience, anonymity, and confidentiality, thereby increasing the probability of a higher response rate (Gall, Gall, & Borg, 2007); and (3) web-based surveys also allow for real-time access to data while allowing for a low-cost method to collect data. Moreover, survey methodology is considered an efficacious method of gathering data in the social sciences because it allows participants to report background information and archival information at one time (Creswell, 2009). The survey contained the following instruments.

Bullying Attitudes Questionnaire. The BAQ-M Revised questionnaire, which is a 54-item instrument was adapted for use in this study. The reliability analyses of the BAQ-M Revised
were sufficiently reliable with an overall score of \( a = .92 \). The coefficient alpha for the three subscales of seriousness, empathy, and likelihood of response were .84, .85, and .88, respectively, and therefore viewed as sufficiently reliable. Relative to validity, it was found all items contained on the BAQ-M Revised (Davis et al., 2015) were designed to measure the three types of bullying as recognized in the field, which aided with validity. Since modified steps were taken to address the content validity of the revised instrument, a measurement and statistical expert reviewed all modifications to the instrument and made recommendations prior to administration. Additionally, the reviewers examined the instrument to determine whether the items adequately sampled the domain of interest and the results were used to provide feedback on the instrument’s clarity, wording, and other potential areas of concern. Thus, these steps assisted with establishing content validity and usability of the revised instrument (Crocker & Algina, 1986).

The modified version of the Bullying Attitudes Questionnaire, referred to as the BAQ-M Revised (Davis et al., 2015), employed the original six written vignettes from the BAQ-M (Yoon & Kerber, 2003). Each vignette assessed (1) teacher’s perceived seriousness of bullying; (2) empathy toward the victim and (3) teacher’s likelihood of intervention using two hypothetical scenarios of verbal, physical, and relational bullying. The vignettes were counterbalanced in order to avoid presentation bias and included scenarios that were directly witnessed by the teacher. The modified instrument was designed to improve content validity and involved adding two additional questions after each vignette to further assess the constructs of perceived seriousness, empathy, and likelihood of intervention.

**Perceived Seriousness Scale.** The BAQ-M Revised (Davis et al., 2015) measured perceived seriousness by asking teachers to respond to three items after viewing each of the six written vignettes. Teachers responded to the question, “How serious is this conflict?” by responding to a Likert type scale ranging from 1 (Not at all Serious) to 5 (Very Serious). The next question asked, “Is this conflict a normative part of the teasing process?” after which the teachers responded to a Likert type scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). Finally, the teachers responded to the prompt, “This conflict should be addressed with the student at the end of the day”. The teachers then responded using a Likert type scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). In this study, the coefficient alpha for the 18 items of the seriousness subscale was .84.

**Empathy Scale.** The BAQ-M Revised (Davis et al., 2015) measured empathy by asking teachers to respond to three items after viewing six written vignettes. After viewing, teachers responded to the first statement, “I would be upset by the student’s remarks and feel sympathetic toward the victim”, according to a Likert type scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). Next, teachers responded to the second statement, “I would feel the need to help the victim” from the Likert type scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). To the final prompt, “I cannot imagine what it feels like for the victim”, teachers again responded to a Likert type scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). In this study, the 18-item Empathy sub-scale yielded a coefficient alpha of .85.

**Likelihood of Intervention/Response Scale.** The BAQ-M Revised (Davis et al., 2015) measured Likelihood of Intervention by asking teachers to respond to three questions after viewing six written vignettes. With the first question, “How likely are you to intervene in this situation?” teachers responded to a Likert type scale ranging from 1 (Not at All Likely) to 5 (Very Likely). After responding to the second statement, “I would not classify this scenario as
bullying,” teachers responded to a Likert type scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). The final statement, “This conflict does not require teacher intervention,” required teachers to respond to a Likert type scale ranging from 1 (Strongly Disagree) to 5 (Strongly Agree). In this study, the 18-item Likelihood of Response subscale yielded a coefficient of alpha of .88.

**BAQ-M Verbal Bullying Vignettes.** There were two verbal bullying vignettes on the instrument. Each vignette depicted the same type of bullying and included 9 questions after each vignette. The Cronbach’s alpha for Verbal Vignette #1 was $\alpha = .65 \ (n = 9)$. The Cronbach’s alpha for Verbal Vignette #2 was $\alpha = .56 \ (n = 9)$.

**Teachers’ Sense of Efficacy Scale (TSES).** The Teachers’ Sense of Efficacy Scale – short form (TSES; Tschannen-Moran & Woolfolk Hoy; 2001) measures domain-specific efficacy. The scale comprises three subscales: student engagement, efficacy in instructional practices, and efficacy in classroom management. Tschannen-Moran and Woolfolk Hoy (2001) asserted the TSES is more highly correlated with the construct of personal teaching efficacy ($r = .64$) than general teaching efficacy ($r = .16$). The measure has two versions, with the long form consisting of 24 questions and a short form consisting of 12 questions. Reliability for the TSES short form was reported as .90 by the authors of the instrument (Tschannen-Moran & Woolfolk Hoy, 2001). Internal consistency for the sub-scale for engagement was reported as .81 (Tschannen-Moran & Woolfolk Hoy, 2001). Internal consistency for the sub-scales for instruction and classroom management were reported as .86 (Tschannen-Moran & Woolfolk Hoy, 2001).

In the present study, the TSES (Tschannen-Moran & Woolfolk Hoy, 2001) short form was used. Internal consistency of the instrument was .94. Internal consistency of the sub-scales was reported as .82 for Instructional Practices, .86 for Student Engagement, and .81 for the Classroom Management sub-scale. These scores were consistent with previous studies that have utilized this instrument. Since the goal of this study was to explore teachers’ perceptions about their classroom management skills and preschool bullying, only the Classroom Management (CM) sub-scale was used.

**Procedure**

All required documents were submitted to the University of Alabama’s Institutional Review Board (IRB) in order to secure approval for the study. The researcher received IRB approval on July 22, 2014 at the University of Alabama. Following approval for the study, the survey items on the BAQ-M Revised (Davis et al., 2015) were entered into Qualtrics Survey Software, an online survey software format for collecting survey data. Next, a meeting was held with the director of the non-profit agency to obtain written consent for the study. Once the survey was activated, a unique Uniform Resource Locator (URL) address was generated for the study. The URL to access the study was embedded in an email along with a cover letter to individuals who voluntarily consented to participate in the study. Upon accessing the link, the teachers viewed a welcome letter reviewing the purpose and indicating their consent for participation. The measures were presented in the following order: Demographics survey, Bullying Attitudes Questionnaire-Modified Revised (Davis et al., 2015) and the Teacher Self-Efficacy Scale-Short Form (Tschannen-Moran & Woolfolk Hoy, 2001). All measures used in the study took approximately 20 minutes to complete.
Analyses

Descriptive analyses and Multiple Regression procedures were performed to answer the research questions. Prior to analyzing the research questions, the three basic parametric assumptions of Regression were assessed: (1) Linearity; (2) Independence of the observations; and (3) Homoscedasticity. The assumption of linearity was met after conducting a visual inspection of the scatterplot. To test the assumption of independence, a visual inspection of the scatterplot was conducted. The assumption of homoscedasticity was met by conducting a visual inspection of the residuals plot. The assumption of multi-collinearity was met as correlations between criterion and predictor variables were not too low – none were over .80. Tolerance was calculated using the formula $T = 1 – R^2$. Variance inflation factor (VIF) is the inverse of Tolerance $(1 ÷ T)$. Commonly used cutoff points for determining the presence of multi-collinearity are $T > .10$ and $VIF < 10$. There were no correlational results violating this assumption; therefore, the presence of multi-collinearity was not assumed (Gall et al., 2007). The data were reviewed for outliers and there were none present. In the first model, the predictors were Seriousness, Empathy, Response, and the TSES (Classroom Management) sub-scale. The criterion variable was Verbal Bullying. The four predictors were entered simultaneously. In the second and third models, the predictors remained the same, but the criterion variables were changed to physical bullying and relational bullying consecutively.

Results

Table 1 provides a summary of statistics for respondents’ beliefs about bullying in preschool settings. The data indicate 93.2% (n = 124) endorsed beliefs that bullying occurs in preschool, while 6.8% (n = 9) did not endorse such beliefs. With regard to anti-bullying training, 69.7% (n = 92) of the sample indicated they had not received professional development training nor had attended any anti-bullying training, while 30.3% (n = 40) indicated they had participated in formal teacher training or professional development on anti-bullying.

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endorse belief that bullying exists in Preschool</td>
<td>124</td>
<td>93.2%</td>
</tr>
<tr>
<td>Did not endorse belief that bullying exists in Preschool</td>
<td>9</td>
<td>6.8%</td>
</tr>
<tr>
<td>Total</td>
<td>132</td>
<td>100%</td>
</tr>
</tbody>
</table>

Table 1: Belief in Bullying in Preschool Settings

Table 2 provides the results of the multiple regression analysis for research question two. The results of the regression analyses were significant, indicating the model was significant. The model explained 70.5% of the variance ($R^2$ = 70.5%; $F(4,122) = 76.15, p = .000$). Three of the predictors, Empathy ($\beta = .021, p = .000$), Seriousness ($\beta = .016, p = .000$), Response ($\beta = .009, p = .017$), significantly predicted verbal bullying. However, an inspection of the beta weights revealed that the TES-Classroom management ($\beta = .005, p = .138$) was not a significant predictor in the model.
The result of the regression analysis using Seriousness, Empathy, Response, and the TSES Classroom Management sub-scale as predictors and Physical Bullying as the criterion variable is shown in Table 3. The results of the regression analysis were significant indicating the model was significant. The model explained 84.1% of the variance ($R^2 = 84.1\%$; $F(4,122) = 167.75, p = .000$), Three of the predictors, Empathy ($β = .019, p = .000$), Seriousness ($β = .022, p = .000$), and Response ($β = .019, p = .000$), significantly predicted physical bullying. However, an inspection of the beta weights revealed that the TSES-Classroom management ($β = .000, p = .923$) was not a significant predictor in the model.

Table 2: Multiple Regression: Seriousness, Empathy, Response, TSES, and Verbal Bullying

<table>
<thead>
<tr>
<th>Variable</th>
<th>$β$</th>
<th>Sig. ($p$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Empathy</td>
<td>.021</td>
<td>.000 *</td>
</tr>
<tr>
<td>Seriousness</td>
<td>.016</td>
<td>.000 *</td>
</tr>
<tr>
<td>Response</td>
<td>.009</td>
<td>.017 *</td>
</tr>
<tr>
<td>TES-CM</td>
<td>.005</td>
<td>.138</td>
</tr>
</tbody>
</table>

Note $R^2 = 70.1\% * p < .05$.

Table 3: Multiple Regression: Seriousness, Empathy, Response, TSES, and Physical Bullying

<table>
<thead>
<tr>
<th>Variable</th>
<th>$β$</th>
<th>Sig. ($p$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Empathy</td>
<td>.019</td>
<td>.000 *</td>
</tr>
<tr>
<td>Seriousness</td>
<td>.022</td>
<td>.000 *</td>
</tr>
<tr>
<td>Response</td>
<td>.019</td>
<td>.000 *</td>
</tr>
<tr>
<td>TES-CM</td>
<td>.000</td>
<td>.923</td>
</tr>
</tbody>
</table>

Note $R^2 = 84.1\% * p < .05$. **$p < .01$.

Table 4 provides the results of the multiple regression analysis for Table 4. Similar to the previous analyses, the result of the analysis was significant, indicating the model was significant. The model explained 73.9% of the variance ($R^2 = 73.9\%$; $F(4,122) = 90.03, p = .000$), Three of the predictors, Empathy ($β = .015, p = .000$), Seriousness ($β = .012, p = .000$), and Response ($β = .029, p = .000$), significantly predicted Relational Bullying. However, an inspection of the beta weights revealed that the TSES-classroom management ($β = -.004, p = .275$) was not a significant predictor in the model.

Table 4. Multiple Regression: Seriousness, Empathy, Response, TSES, and Relational Bullying

<table>
<thead>
<tr>
<th>Variable</th>
<th>$β$</th>
<th>Sig. ($p$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Empathy</td>
<td>.015</td>
<td>.000 *</td>
</tr>
<tr>
<td>Seriousness</td>
<td>.012</td>
<td>.000 *</td>
</tr>
<tr>
<td>Response</td>
<td>.029</td>
<td>.000 *</td>
</tr>
<tr>
<td>TES-CM</td>
<td>.000</td>
<td>.275</td>
</tr>
</tbody>
</table>

Note $R^2 = 73.9\% * p < .05$. **$p < .01$.
Discussion

A review of mean scores for the Seriousness construct suggests that teachers perceive physical bullying as more serious. Also, Empathy scores, though closely related across all bullying types (i.e., verbal, physical, and relational), were noted to be higher when the type of bullying was physical and lower on relational bullying. Finally, when looking at the perception of teachers on the Response construct, response scores were higher on vignettes depicting verbal bullying. Results from the regression model containing the constructs of Seriousness, Empathy, Response, and Classroom Management were significant. However, only three predictors (i.e., Seriousness, Empathy, and Response) were significant, while the TSES-CM was not. An inspection of the beta weights indicated the relationship between each independent variable and dependent variable appears to present as a stronger predictor in verbal bullying than seriousness and response when compared across variables in the study. To add, an inspection of the beta weights on the seriousness scores appears to be a stronger predictor in vignettes depicting physical bullying than empathy and response when compared across variables in the study. The beta weights for response indicated that response appears to be a stronger predictor in vignettes depicting relational bullying when compared across the variables in the study. The results of the study indicate that teachers had some knowledge about each bullying type and expressed awareness of the need to be responsive to bullying, as depicted in the scenarios. This was an encouraging finding since children can be hesitant to report bullying for fear of reprisal. Responsiveness is important because teachers serve as valuable conduits for amplifying or diminishing the extent of bullying or aggression-related instances and the reporting of such behaviors. Of importance, while teachers indicated an awareness and desire to respond to bullying in this study, they reported having little training or professional development about anti-bullying efforts, which could indicate insufficient or ineffective intervention training. This is a concern since the intervention literature has been clear that intervention alone is not enough. Rather, focused intervention is integral to designing effective prevention and intervention efforts.

With the construct of seriousness, the teachers in this study were found to be more likely to respond to Verbal Bullying followed by Physical Bullying and finally Relational Bullying. The overall results involving teacher perceptions about the seriousness of bullying align with the literature which supports that teachers are likely to perceive instances involving physical bullying as serious and are likely to intervene (Craig, Henderson, & Murphy, 2000; Swearer, Espelage, Vaillancourt, & Hymel, 2007; Yoon & Kerber, 2003). Contrary to the bullying literature, which has indicated that teachers were more likely to consider their responses to Physical Bullying as more serious, the results indicate teachers from preschool settings in this study were more likely to respond to instances of Verbal Bullying as depicted in the vignettes.

Implications for School Counselors and Administrators

The study has implications for professionals, teachers, school psychologists, school counselors, and other allied health professionals. Specifically, the literature is clear that early intervention efforts are paramount, and that bullying is unlikely to stop without focused prevention and intervention efforts. Implications exist for school psychologists as they are trained in mental health assessment and multi-tiered proactive service models. This specialized training places school psychologists in a unique position to assume a leadership role in facilitating prevention and intervention efforts in community-based and non-community-based school settings. School psychologists serve parents and students from birth to five years, providing pediatric
assessments, developmental screenings, and mental health counseling services within school districts with children who may or may not be enrolled in school.

Due to increased accountability in educational settings coupled with early intervention literature, this study highlights the need for more comprehensive services for preschool age groups. Specifically, implications exist for school psychologists and school counselors to work conjointly to design prevention and intervention campaigns. Since school counselors spend a great deal of time on personal and social skills enhancement in the classroom (i.e., group guidance lessons), they are in a position to recognize and assist with primary intervention and training responses in the K-12 school settings. However, preschools located in community-based settings appear to be at a disadvantage because they often do not have access to school counselors. Likewise, many school districts employ a limited number of school psychologists who serve a vast number of schools, thereby limiting opportunities to consult with other professionals. Thus, an important finding from this study is the identification of this intervening gap that must be noted and filled by school psychologists and other professionals that currently work with preschool populations. This lack of proximity to helping professionals in the community-based settings also underlines the importance of thorough training of the preschool classroom teachers and parents.

Since school psychologists serve as change agents and work to quell more insidious forms of bullying included in this study, as well other forms (e.g., cyber-bullying), they are in line to team with school counselors and other helping professionals to offer parent training and the enhancement of family/school collaboration efforts. For example, there are opportunities to help parents discourage bullying behaviors while at the same time model positive behavior. Thus, school districts may need to focus on additional counseling and psychological services for preschool age children and their families to ensure continuity of care. Advocating for more services and for more professionals to work with children in pre-K settings in community-based settings is strongly encouraged.

Since most teachers in the study indicated they had limited or no professional development on bullying, the results of this study could serve as a baseline to evaluate curriculum/training if the teachers in the study are evaluated after professional development. A follow-up to this study might include teacher training on bullying specific to preschool populations.

Also, while students were not included in the study, exploring student perceptions, patterns of similarity, and differences between student and teachers would be informative and could guide future training. To add, while the literature points to increases in the numbers of children being expelled (Gilliam, 2005; Gilliam & Shakur, 2006; Kaiser & Sklar-Raminisky, 2012), only two teachers from the sample indicated they had recommended a child be expelled over the past 12 months. This lower-than-expected finding could have been related to the fact that data collection occurred from July to August, prior to the start of the school year. Future research may be more efficacious by collecting data after school starts as teachers may have an opportunity to work at a particular school to understand policies. For example, many teachers in the study indicated they were not aware if their centers/schools had policies on suspension/expulsion or if anti-bullying policies existed. Research has suggested self-efficacy and classroom management skills are more efficacious when policies and expectations are clearly communicated (Woolfolk-Hoy, 2000). This study points to the need for increased teacher awareness of bullying and training in anti-bullying efforts. With proper teacher training, students should become more inclined to report bullying if teachers are knowledgeable, respond with respect and empathy, and have classroom norms that assist
bystanders and victims. Designing teacher education programs that target the development and nurturance of teacher dispositions (e.g., respect, empathy) is valuable (Byers, et al., 2011; Coldarci, 1992; Coyle, 2008; Yoon & Kerber, 2003).
References


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Education, Employment, and America’s Opioid Epidemic

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Helen Jennings-Hood, Arkansas State University, USA
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Abstract

America is embroiled in an opioid epidemic that continues to take a toll on American citizens’ quality of life, utility, and mortality rates, as well as the nation’s economy. Researchers have examined information from Substance Abuse and Mental Health Services Administration’s (SAMHSA) Treatment Episode Data Set (TEDS) (Drug and Alcohol Services Information Systems [DASIS], 2009) in order to get an idea about which populations are able to access opioid treatment in America, the District of Columbia, and Puerto Rico. Details of education levels and employment rates for those being treated could offer answers about individuals and populations impacted by the opioid epidemic. The purpose of this study was to examine whether individuals who had been in treatment for heroin and/or opioids in 2014 have a higher level of education than individuals in treatment for heroin and/or opioids in 1998, and to determine if individuals in treatment for heroin and/or opioids in 2014 have higher rates of employment than individuals in treatment for heroin and/or opioids in 1998 (DASIS, 2009). Researchers used a T-test on the TEDS and found statistically significant changes in levels of education and static rates of employment from 1998 to 2014 (DASIS, 2009).

Keywords: heroin, opioid, substance use disorder, opioid treatment, education, employment
On October 26, 2017, President Donald J. Trump declared the nation’s opioid epidemic a public health emergency (Hirschfeld, 2017; The White House, 2017b). The White House issued a statement citing rates of death since 2000, the rate of deaths due to prescription opioids, heroin, and fentanyl, as well as the economic cost of the prescription opioid and heroin epidemic as the basis for its formal declaration of a public health emergency (The White House, 2017c). Drug overdose is the leading cause of death for Americans under the age of 50. The Partnership for Drug-free Kids (Partnership News Service, 2017) states that “Heroin and other opioids are ravaging communities across America. Deaths from heroin increased 328% between 2010 and 2015, and drug deaths from fentanyl and other synthetic opioids are now seeing a sharp rise as well” (Partnership News Service, 2018). Drug overdose deaths rose by 19% in 2016 alone, and recent research links the opioid crisis to a rise in suicide deaths or “deaths of despair” as well as a spike in violent crimes and murder (Partnership News Service, 2018; Lopez, 2018; National Institute of Justice, 2017). The White House’s classification of public health emergency calls for more attention to an issue that is already prevalent in the American 24-hour news cycle, that of the growing concerns about opioid pain reliever misuse and abuse, heroin usage, and addiction, as well as the illegal use of fentanyl.

An Introduction to Opioids

According to the American Public Health Association (2017), opioid overdoses kill around 100 Americans every day. In 2012, drug overdose was found to surpass motor vehicle accidents as the leading cause of injury-related deaths in individuals 25 to 64 years of age (News, 2015). Opioids are a class of drugs that includes fentanyl (a synthetic opioid), prescription pain relievers available legally by prescription, such as oxycodone (OxyContin), hydrocodone (Vicodin), codeine, morphine, and heroin (National Institute on Drug Abuse, 2017). These drugs are derived from the opium poppy or similar synthetic compounds and all these drugs are classified as narcotics. Narcotic drugs have high abuse potential and can lead to dependence. These substances attach to opioid receptors in the brain and in addition to pain relief, they cause the user to feel a sense of relaxation, euphoria, and sedation (NIDA, 2017).

Prescription Opioid Pain Relievers

While opioid pain relievers are typically prescribed to individuals for surgery (37%) and physical medicine/rehabilitation (36%), primary care doctors write half of all opioid prescriptions in the United States (Center for Disease Control and Prevention [CDC], 2017). Over the past two decades, prescription rates for pain relievers have risen substantially. In 2006, there were 47 million prescriptions per quarter in the USA for the opioid pain relievers included in a study by Dart et al (2015). The rate of prescriptions peaked in the fourth quarter of 2012 at 62 million prescriptions. At the end of 2013, the quarterly totals for opioid prescriptions were at 60 million prescriptions (Dart et al, 2015). According to the National Institute on Drug Abuse (2017), pharmaceutical companies in the late 1990s launched a campaign that persuaded the healthcare community that prescription pain relievers would not lead to dependence in their patients. This well-funded campaign led to widespread prescribing of opioid medications. In fact, opioid analgesic medications are some of the highest prescribed medications in the USA (Machado-Alba, Gaviria-Mendoza, Vargas-Mosquera, Gil-Restrepo, & Romero-Zapata, 2017). Hydrocodone and hydrocodone products are the most often misused prescription opioid at 2.6% of all abused prescription medications reported in the 2016 National Survey on Drug Use and Health (SAMHSA, 2017b).
Heroin

In the year 2015, over 33,000 Americans died of opioid overdoses, including prescription pain relievers and fentanyl. Moreover, there are a half million people dependent on heroin (NIDA, 2017). With heroin use on the rise, (CDC, 2015; Luthra, 2017) and 4–6% of individuals who misuse prescription opioid transitioning to using heroin, the CDC sited a fivefold increase in heroin deaths from 2002 to 2014; it has been reported that over 64,000 lives were lost due to opioid abuse and misuse in 2016 (CDC, 2015; Luthra, 2017). Research shows that 4% of people who had misused prescription pain medicines started using heroin within five years (NIDA, 2017; SAMHSA, 2013). It is worth noting that around 80% of heroin users first misused prescription pain relievers (NIDA, 2017). The bridge from prescription opioid misuse to heroin use becomes more apparent each time the numbers are examined with data showing about 641,000 individuals misused prescription pain relievers and used heroin in the past year (SAMHSA, 2017b).

Fentanyl

Fentanyl is reported as being around 50 times more potent than heroin and 100 times more powerful than morphine (CDC, 2016; CDC, 2017). Fentanyl is prescribed by physicians in the form of transdermal patches or lozenges (CDC, 2017). It is mainly prescribed as a pain reliever for individuals with cancer or as an anesthetic. It is listed as a schedule II narcotic (DEA, 2017). When diverted, Fentanyl is sold for misuse and abuse in the USA (CDC, 2017). The potential profits from Fentanyl can be irresistible to dealers when 1 kg of fentanyl costs around $4,000 to buy from China and returns profits of $1.6 million in street sales. In contrast to Fentanyl, 1 kg heroin costs around $6,000 but is only worth a few hundred thousand dollars in profits (The Economist, 2017). While the monetary numbers may be in the right place for those selling Fentanyl to individuals who are unable to get prescription opioids, it is far more lethal than other opioids, with only a few milligrams needed to overdose (The Economist, 2017; CDC, 2016; CDC, 2017). Results from the 2016 National Survey on Drug Use and Health (NSDUH) states that 228,000 individuals reported misuse of prescription Fentanyl products (SAMHSA, 2017b). The report does state that this number may not be a true representation of the number of individuals who misuse Fentanyl because the individuals may not be aware when Fentanyl is combined with heroin (SAMHSA, 2017b).

Rates of Misuse

As prescription rates have risen, so has the recreational use of these substances. In the SAMHSA’s National Survey on Drug Use and Health: Detailed Tables (2017a) the rates of opioid misuse show an increase for women 12 years or older who reported using opioids in the past month, an increase in usage in the past years from 2015 to 2016 for adults aged 50 to 59 years, as well as an increase in opioid misuse in adults over their lifetime from ages 50 to 64 years (SAMHSA, 2017a). There has been a recent movement of physicians, specifically surgeons, to write fewer prescriptions for opioid pain relievers and to work toward educating individuals who the medications are being prescribed to (Howard, Waljee, Brummet, Englesbee, & Lee, 2017). While this will make some level of impact, it will take time to see results in the data on opioid misuse.

Even prescription opioids that remain unused by the individual they are prescribed to, contribute to the problem. The excess prescription medication can create an ease of availability for those who misuse opioid medications (Howard et al, 2017). According to the 2016 NSDUH,
40.4% of those who reported misusing prescription opioids stated that they got the medication from a friend or relative for free (SAMHSA, 2017b). While 8.9% stated they bought the medication from someone they knew, 3.7% individuals stated they took the medication without asking from someone they knew; 6% individuals who misuse opioids stated they bought the medication from a stranger (SAMHSA, 2017b).

**Insight into Opioid Misuse**

Not surprisingly, 62.3% of those who misuse prescription opioid pain relievers cite the reason for misuse as the intended use of the drug, which is to relieve pain. The element of misuse is seen when the individual takes more of the medication than they are supposed to, does not take the medication the way it has been prescribed by a doctor, or takes medication that has not been prescribed to them (SAMHSA, 2017b). Just under 13% percent of individuals stated they use opioid medication in order to “feel good or get high”, while 10.8% stated they had used opioids to “relax”. Another 3.9% stated they took opioids for help with feelings or emotions, 3.3% took opioids for help with sleep, and 3% stated they took opioids to “see what they were like” (SAMHSA, 2017, p. 23).

**Overdoses Due to Opioid Misuse**

The 2016 Facing Addiction in America: The Surgeon General’s Report on Alcohol, Drugs, And Health (U.S. Department of Health and Human Services [U.S. DHHS], 2016) reports that in 2015, 20.8 million people in America aged 12 or older met the criteria for a substance use disorder. Studies show that in 2014 alone, there were 28,647 people in America who died from a drug overdose involving some type of opioid. Of these 28,647 individuals who died, 10,574 were individuals who died from heroin overdoses (CDC, 2015). Recent research shows an unprecedented increase in mortality among middle-aged White Americans between 1999 and 2014 (Case & Deaton, 2015; U.S. DHHS, 2016). These trends are driven almost wholly by the misuse of opioids. The same mortality trends have not been seen in Black, Latino, and other racial and ethnic populations (Case & Deaton, 2015).

**What Opioid Addiction Costs the USA**

The USA spends more on healthcare than any other nation in the world and has the highest rates of prescription drug use (Squire & Anderson, 2015). The fact that the USA is the forerunner in medical spending and prescription usage is not new or shocking. Medical spending for Americans has been increasing steadily over the past decade (Squire & Anderson, 2015). Research shows that treatment for the misuse of opioids improves an individual’s productivity, health, and overall quality of life (Ettner et al, 2006). Every dollar spent on treatment for substance use disorders saves $4 in health care costs and $7 in criminal justice costs (Ettner et al, 2006). To get an idea of where medical spending is in relation to the opioid epidemic, SAMHSA (2016) research states that opioid pain relievers are involved in 475,000 emergency department visits each year. Five drugs – OxyContin, oxycodone, hydrocodone, propoxyphene, and methadone – accounted for two-thirds of the total economic burden in the USA (Hansen, Oster, Edelsberg, Woody, & Sullivan, 2011).

Economic losses in monetary as well as non-monetary terms are staggering as they continue to grow along with the rates of misuse of opioids. The non-monetary cost to the individual and communities affected by opioid misuse begins with the costs associated with loss of individual productivity, a reduced quality of life, and increase in abuse and neglect of children. Monetary
costs associated with opioid misuse are increased crime and violence within communities, increased spread of infectious disease (such as hepatitis and HIV), increased motor vehicle crashes, and greatly increased healthcare costs overall U.S. DHHS, 2016). According to a recent report by CNBC, the economic costs of the misuse of opioid drugs since 2001 is estimated to have topped $1 trillion in the USA (Mangan, 2018).

Treating America’s Opioid Epidemic

The U.S. Department Health and Human Services (2016) report that only one in every 10 people with a substance use disorder receive any type of specialty care – that is, a treatment which specifically focuses on recovery for those who misuse opioids post detoxification treatment. Mark, Dilonardo, Chalk, and Coffey (2002) argued more than half of individuals with substance use disorders who receive withdrawal management services do not enter treatment. Withdrawal management has been shown to be highly effective in preventing dangerous medical consequences of substance use disorders, but it is not an effective treatment of substance use disorders when used alone (Center for Health Information and Analysis, 2015; U.S. DHHS, 2016).

Individuals who are able to receive treatment for opioid and heroin misuse and addiction in the USA are surveyed by SAMHSA, and the data culminated into the Treatment Episode Data Set (TEDS) (Drug and Alcohol Services Information Systems [DASIS], 2009). TEDS information stems from SAMHSA’s DASIS (DASIS, 2009). The data is collected by each state, the District of Columbia, and Puerto Rico within the 12-month period of a calendar year (DASIS, 2009). Data collected by SAMHSA records treatment for opioid and heroin misuse as well as discharge information. Individual’s demographic information, drug use and misuse information, and certain relapse information, such as re-admittance (DASIS, 2009). TEDS information can be used to examine what populations are getting treatment for opioid misuse and which populations are not accessing care.

Using the TEDS, researchers can specifically look at the population demographics of individuals who are able to access treatment for opioid misuse. Using this data, this study’s authors were able to see specifically the rates of employment and education levels of those receiving treatment. Statistics for these two specific demographics give researchers a better idea of who is able to access treatment for opioid misuse. A statistically significant rise in education levels as well as higher rates of employment may indicate that the populations who are impacted by opioid misuse are changing over time. While the TEDS resource is a large resource of information, it still only accounts for information gained by those individuals who are able to access care and does not include any data for those populations who may not be able or willing to access treatment for opioid misuse.

Purpose of the Study and Research Questions

Based on current trends in the literature on demographics, individuals using heroin and opioids, this study’s authors wondered if there was also a change in education and employment rates (Cicero, Ellis, Surratt, & Kurtz, 2014). The purpose of this study was to see the educational and employment demographics of individuals using heroin in a 16-year period. The research questions for this study were (a) do individuals in treatment for heroin and/or opioids in 2014 have a higher level of education than individuals in treatment for heroin and/or opioids in 1998? (b) do individuals in treatment for heroin and/or opioids in 2014 have higher rates of employment than individuals in treatment for heroin and/or opioids in 1998? Findings from
this study will add to the understanding of the demographics in the USA’s current heroine/opioid epidemic.

Method

Sample
The Substance Abuse Mental Health Service’s Administration (SAMHSA) Treatment Episode Dataset-Admissions (TEDS-A) was used for this study. The TEDS is a publicly available dataset which includes substance abuse treatment admission data from agencies across the USA. Both public and private agencies submit their annual data to SAMHSA. TEDS-A data are collected at admissions and TED-D data are collected at discharge. Variables in the TEDS-A data set include number of prior treatments, service setting, demographics, education, employment status, referral source, substances used, route of administration, frequency of use, and age of first use. Only those admissions from 1998 and 2014 were included in this study and only first-time admissions who reported opioids or heroin as their primary substance were used. TEDS comprise individual treatment episodes and not individual clients. Therefore, the complete dataset may include the same client each time they entered treatment. This would create potential for error, and therefore, the authors only used first time treatment admissions in their analysis.

There were 1,699,971 treatment episodes entered into TEDS-A in 1998 and 2014, but after isolating only heroin and opiate users with no prior treatment, the final sample consisted of n = 169,405 treatment episodes. Of these, 48,985 (28.9%) were admitted in 1998 and 120,421 (71.1%) were admitted in 2014 and in the total sample, 60.7% listed heroin as their primary substance of use and 32.3% reported other opiates/synthetics. A total of 60.7% were male and 39.3% were female. The average age ranged between 30–34 with the youngest participants being between 12–14 and the oldest being over 55 years old. The average age of the first use of either opiates or heroin was between 18 and 20 years. The participants used opiates orally, through smoking, through inhalation, through injection with IV or intramuscular, or other. The following Tables 1, 2, and 3 describe the race distribution and referral sources of the sample:

<table>
<thead>
<tr>
<th>Race</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alaska Native</td>
<td>303</td>
<td>.6</td>
</tr>
<tr>
<td>American Indian (other than Alaska Native)</td>
<td>432</td>
<td>.8</td>
</tr>
<tr>
<td>Asian or Pacific Islander</td>
<td>445</td>
<td>.9</td>
</tr>
<tr>
<td>Black or African American</td>
<td>13,556</td>
<td>27.9</td>
</tr>
<tr>
<td>White</td>
<td>25,239</td>
<td>51.9</td>
</tr>
<tr>
<td>Other single race</td>
<td>8,653</td>
<td>17.8</td>
</tr>
<tr>
<td>Two or more races</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Table 1: Race/Ethnicity in 1998
<table>
<thead>
<tr>
<th>Race</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alaska Native</td>
<td>127</td>
<td>.1</td>
</tr>
<tr>
<td>American Indian (other than Alaska Native)</td>
<td>1,466</td>
<td>.1</td>
</tr>
<tr>
<td>Asian or Pacific Islander</td>
<td>121</td>
<td>.1</td>
</tr>
<tr>
<td>Black or African American</td>
<td>11,581</td>
<td>9.8</td>
</tr>
<tr>
<td>White</td>
<td>96,037</td>
<td>81.5</td>
</tr>
<tr>
<td>Other single race</td>
<td>6,711</td>
<td>.6</td>
</tr>
<tr>
<td>Two or more races</td>
<td>1,769</td>
<td>1.5</td>
</tr>
</tbody>
</table>

Table 2: Race/Ethnicity in 2014

<table>
<thead>
<tr>
<th>Primary Source of Referral</th>
<th>1998</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual/self-referral</td>
<td>54.5%</td>
<td>55%</td>
</tr>
<tr>
<td>Alcohol/Drug Abuse Provider</td>
<td>13%</td>
<td>10%</td>
</tr>
<tr>
<td>Other Healthcare Provider</td>
<td>8%</td>
<td>7%</td>
</tr>
<tr>
<td>School</td>
<td>.3%</td>
<td>.1%</td>
</tr>
<tr>
<td>Employer/EAP</td>
<td>.8%</td>
<td>.3%</td>
</tr>
<tr>
<td>Other Community Referral</td>
<td>7%</td>
<td>8%</td>
</tr>
<tr>
<td>Court/Criminal Justice</td>
<td>17%</td>
<td>19%</td>
</tr>
</tbody>
</table>

Table 3: Referral Source by Year of Admission

An independent samples T-test was used to test for significant differences in education and employment between treatment admissions from 1998 and those in 2014.

**Results**

The mean education level of the treatment admissions from 1998 was 2.76 and the mean education for the 2014 admissions was 2.97. The higher the value, the greater the level of education. Levene’s test for equality of variance was significant (p < .00), therefore t-test results for equality of means was used to test for significant differences. The t-test was significant (p < .05) with a mean difference of -.214. Table 4 and Figure 1 describe the demographic changes in relation to education from 1998 to 2014.
Table 4: Year of Admission Education Status Crosstabulation

<table>
<thead>
<tr>
<th>Year of Admission</th>
<th>8 YEARS OR LESS</th>
<th>9–11</th>
<th>12</th>
<th>13–15</th>
<th>16 OR MORE</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1998</td>
<td>3890 (8%)</td>
<td>15297 (31%)</td>
<td>20104 (41%)</td>
<td>7265 (15%)</td>
<td>2056 (4%)</td>
<td>48612</td>
</tr>
<tr>
<td>2014</td>
<td>6497 (5%)</td>
<td>24787 (21%)</td>
<td>57151 (47%)</td>
<td>24227 (20%)</td>
<td>5229 (4%)</td>
<td>117891</td>
</tr>
<tr>
<td>Total</td>
<td>10387</td>
<td>40084</td>
<td>77255</td>
<td>31492</td>
<td>7285</td>
<td>166503</td>
</tr>
</tbody>
</table>

The mean rates of employment from 1998 and 2014 was 2.04 for both groups, which is less than part-time employment. The Levene’s test for equality of variance was significant for employment between groups. The independent samples t-test for equality of means was not significant, however (p > .05). Table 5 and Figure 2 describe the demographic changes in relation to employment status from 1998 to 2014.
Table 5: Year of Admission Employment Status Crosstabulation

<table>
<thead>
<tr>
<th>YEAR OF ADMISSION</th>
<th>1998</th>
<th>2014</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>FULL TIME</td>
<td>19476</td>
<td>36088</td>
<td>55564</td>
</tr>
<tr>
<td>(39.8%)</td>
<td>(30.0%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PART TIME</td>
<td>16611</td>
<td>57676</td>
<td>74287</td>
</tr>
<tr>
<td>(34.0%)</td>
<td>(48.0%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UNEMPLOYED</td>
<td>2815</td>
<td>8641</td>
<td>11456</td>
</tr>
<tr>
<td>(5.7%)</td>
<td>(7.1%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NOT IN LABOR FORCE</td>
<td>9300</td>
<td>16331</td>
<td>25631</td>
</tr>
<tr>
<td>(19.0%)</td>
<td>(13.6%)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>48202</td>
<td>118736</td>
<td>166938</td>
</tr>
</tbody>
</table>

Table 6: Group Statistics

Table 6 shows a summary of the group statistics for both education level and employment rates of individuals in treatment for heroin and/or opioids in 1998 and 2014.

<table>
<thead>
<tr>
<th>EDUCATION</th>
<th>YEAR OF ADMISSION</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error</th>
<th>Std. Error Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>1998</td>
<td>48612</td>
<td>2.76</td>
<td>.946</td>
<td>.004</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td>117891</td>
<td>2.97</td>
<td>.902</td>
<td>.003</td>
<td></td>
<td></td>
</tr>
<tr>
<td>EMPLOYMENT STATUS</td>
<td>YEAR OF ADMISSION</td>
<td>N</td>
<td>Mean</td>
<td>Std. Deviation</td>
<td>Std. Error</td>
<td>Std. Error Mean</td>
</tr>
<tr>
<td>1998</td>
<td>48202</td>
<td>2.96</td>
<td>1.110</td>
<td>.005</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2014</td>
<td>118736</td>
<td>2.96</td>
<td>.962</td>
<td>.003</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 6: Group Statistics
Discussion

The purposes of this study were to examine whether individuals in treatment for heroin and/or opioids in 2014 have a higher level of education than individuals in treatment for heroin and/or opioids in 1998, and to determine if individuals in treatment for heroin and/or opioids in 2014 have higher rates of employment than individuals in treatment for heroin and/or opioids in 1998. As hypothesized, the levels of education in individuals in treatment for heroin and/or opioid misuse in 2014 showed a statistically significant rise from individuals in treatment for heroin and/or opioids in 1998 (DASIS, 2009). The results of this study tie into the literature about the vast changes in the demographics of individuals using heroin and/or opioids (Cicero et al., 2014; Cleland, Rosenblum, Fong, & Maxwell, 2011). Cicero, et al. (2014) stated that the data showed more users were older and from more suburban areas, as compared to previous decades when the majority of individuals were from inner cities. They also noted the participants in their study were more likely to use heroin as a gateway from previously prescribed opioids (p. 825, 2014).

While the change in the data for populations being treated for opioid heroin and/or opioid misuse show some marked changes, the t-test analysis of the data shows that levels of employment have not risen significantly from 1998 to 2014 (DASIS, 2009). This information is not consistent with the hypothesis that was made for the purposes of this research. Inferences will not be made here about what the research data reflects in relation to the unchanging employment status of those being treated for heroin and/or opioid misuse.

When looking at the presented data in this study and other research (CDC, 2015; Cicero et al., 2014; Cleland et al., 2011; Dart et al., 2015; Luthra, 2017; NIDA, 2017; SAMHSA, 2013) the conclusion could be made that individuals with higher education have more readily access to opioids due to location. Individuals who use heroin are typically those that started with opioid prescriptions and transitioned to heroin use due to ease of access and increased expense of keeping up the misuse of opioid pain relievers (NIDA, 2017; Cicero et al, 2014).

With these changes and combined demographic understanding of this population, professionals are able to create a clearer conceptualization of individuals who use heroin/opioids.

Implications for Practice

As professionals, it is important to understand who the client is. This study informs professionals working with individuals with substance use disorders that the changing trends in demographics of individuals using heroin and/or opioids also reaches education levels. While education level has changed employment, rates have not. To better understand clients who use heroin/opioids, researchers must further explore the specific differences in education and employment rates of this population. Having a clear understanding of individuals who use heroin/opioids is beneficial for not only practitioners working with individuals but also those who are working proactively to stop this epidemic. These results will inform professionals of their target audience for interventions and educational purposes. Professionals need to recognize not only who their clients are, but that they are changing. This will hopefully lead to looking at the bigger picture of drug use, education, and treatment.
Limitations and Suggestions for Future Research

The researchers believe the results from this study were very informative in expanding the demographic understanding of individuals in treatment for heroin/opioid use. At the same time, the authors are aware of several limitations of the study. First, the TEDS-A database used for data analysis only looks at individuals who are in treatment. The authors did not look at individuals who could not, or chose not, to access treatment. Second, 2014 is the most recent data set available through TEDS-A. Based on this data, the authors cannot determine whether any additional demographic changes have occurred in the last four years concerning education and employment. In addition, TEDS-A does not collect data from all treatment facilities, only those receiving public funding. For a clearer and broader picture of individuals using heroin/opioids, it would be beneficial to look at all treatment facilities and those not in treatment. Third, the authors did not further delve into the subcategories of heroin and opioids (e.g. hydrocodone, OxyContin, etc.). The authors chose to look at the broader scope of heroin and opioids.

More research is needed to determine longitudinal changes in the education levels and employment rates of those being treated for heroin and/or opioid misuse as well as what this may mean for the future of heroin and/or opioid misuse in the USA (DASIS, 2009). It would be beneficial to review TEDS data when it is updated to determine if the current findings are still accurate. As understanding of the demographics of this population grows, it will be important to further explore how to more accurately to address this epidemic of using heroin/opioids. It would be beneficial for researchers to explore and gain understanding of the shift in demographics of individuals using heroin and/or opioids. In addition, research pertaining to the mental health issues behind heroin/opioid addiction could broaden the understanding of increased use. While understanding mental health issues, it is also important to understand the treatment being provided. Are the individuals getting access to treatment, and is the treatment effective? Further research is needed to ensure these individuals have the best possible care.

Conclusion

Through this study, the authors were able to expand the understanding of today’s individuals who use heroin and/or opioids. The authors found through the TEDS-A data that there have been statistically significant amounts of change in this population in terms of level of education, but not in employment rates. This new demographic information is intriguing because while the individuals in 2014 have higher levels of education, they are no more employed than the individuals in 1998. Better understanding of this population will help professionals not only conceptualize who they are working with, but also provide more focused preventative measures.
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Parents’ Attitude toward Inclusion of their Children with Autism in Mainstream Classrooms

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Abstract

Despite the growth of inclusive education programs adopted by many schools across India, children with special needs rarely find themselves included in them. Autism being a pervasive disorder, it becomes hard for autistic children to communicate and express themselves in a socially appropriate manner. Hence, the objective of this study was to explore the perceptions of parents about inclusion of children with autism in mainstream classrooms. A sample of 20 parents whose children were already enrolled in a mainstream school was selected from a school in Jaipur, Rajasthan, India. Participants were assessed on Parent’s Attitudes to Inclusion (PATI, 1998). The result of the study showed the attitude of parents towards the quality of educational services in mainstream education is negative; whereas, when it comes to child acceptance and treatment in mainstream education the parents have a positive attitude. It was also found that parents of children with autism have a neutral attitude towards the mutual benefits of inclusive education. The findings also revealed that regardless of their positive outlook, parents had certain conjectures about such inclusivity. These pertained primarily to childcare responsibilities, children’s transition tasks and teachers’ challenges of managing everything effectively while teaching both students with and without diagnosis of autism in the same classroom. This study can be used by special educators, school authorities and teachers teaching in an inclusive classroom to better understand the concerns of parents of children with Autism Spectrum Disorder (ADS).

Keywords: autism, inclusive education, mainstream education, special education
Introduction

Autism Spectrum Disorder (ASD) is a neurological disorder typically diagnosed in childhood and has a wide range of symptoms, varying in their severity. These symptoms mainly consist of three basic factors that are communication, socialization/behavioral and interest impairments, as well as minimal social skills (Weiss, Wingsiong & Lunsky, 2013). Due to these indicators, a child with ASD diagnosis faces challenges relating to peers and forming meaningful relationships. As well, there has been an increase in such diagnosis over a short period of time. Approximately 18 years ago, cases of autism ranged from five per 10,000 (American Psychiatric Association, 2000) to 60 per 10,000 (Altiere & von Kluge, 2009); today, this is as common as one in 59 children (Baio, Wiggins, Christensen, et al., 2018). At present, ASD has become widely prevalent, with males being affected 4.5 times more by this diagnosis than females (Rice, 2009).

Children diagnosed with autism may communicate verbally, nonverbally or a combination of both, depending on the severity and treatments/therapies they receive. Due to this aspect of autism, it is difficult to include them within mainstream education systems. Children with diagnosis of autism require special attention and thus, school curriculum and special education services may need to be modified in accordance to their individuality. Also, inclusive education brings with it problems that are related to the other children in the classroom and their parents. Although inclusive education is now a part of Indian legislation, it is extremely difficult to change the mindset of people regarding children with special needs. In an inclusive classroom, child diagnosed with autism are often looked upon by their peers as being socially awkward.

To define inclusive education, it may be enumerated as an approach that addresses the learning needs of all children. Inclusive education is a medium that allows children with special needs to withstand and receive education, training, schooling or learning in any form in mainstream classes—Although inclusive education is a relatively new concept in India, supporters of such education believe children with special educational needs can achieve wonders in mainstream education programs, provided they are given additional aids and services. Inclusive education requires all learners—children with differing abilities—study and grow together through access to common pre-school provisions, schools and community educational settings with an appropriate network of support services. This is possible only in a flexible education system that is ready to assimilate the needs of a varied range of learners and adjusts itself to meet the needs of all children. Such a system not only helps the children but all stakeholders involved—the learners, parents, community, teachers, administrators and policy makers—to cope with diversity in a positive way and see it as a healthy and positive challenge rather than a major problem.

Both extant research and anecdotal reports by practitioners have shown that parents’ perceptions are of great importance in determining the success of such inclusion, as parents are the second teachers and most responsible for implementing inclusive service delivery models.

Challenges Faced by Parents of Children with ASD Compared to Parents of Typically Developing Children

Parents of children diagnosed with Autism Spectrum Disorder (ASD) face numerous challenges that cause them to experience substantial complications compared to other parent groups. Overall, the psychological impact of caring for a child with ASD is reported to be massive for parents (Cullen & Barlow, 2002). Studies show these parents reported more stress
compared to parents of Typically Developing (TD) children and were found to be approximately three times as vulnerable to psychological and physical complications (Brobst, Clopton, & Hendrick, 2009; Dillenburger, Keenan, Doherty, Byrne, & Gallagher, 2010; Gau et al., 2012). The first study to determine that parents (n=67) and siblings (n=37) of children with ASD obtained significantly higher scores of in depression scales compared to parents and siblings of TD children was conducted by Piven and colleagues (1990). Any indiscretions or disruptions in daily routines elicited anxiety in children with diagnosis of ASD and their mothers; also, the children’s difficulties in participating in activities, their struggles to communicate, and disturbing behaviors, triggered anxiety in their mothers (Larson, 2006). The children’s disruptive behaviors or autism-related symptoms seemed to be significant determinants in parents’ mental health status, with the latter experiencing lower levels of distress as their child’s behavior improved over time and became less disruptive (Gray, 2006; Hoffman, Sweeney, Hodge, Lopez-Wagner, & Looney, 2009).

As well, King, Greenberg, and Seltzer (2010) conducted a study with 406 mothers of children of various ages with diagnosis of ASD to find that children’s health problems were a direct source of stress for mothers, as such concerns in children usually led to behavioral problems that increased the mothers’ stress levels. Approximately 41% of parents of a child with diagnosis of ASD described experiencing some form of emotional, physical, financial, or marital relationship stress difficulties compared to parents of TD children (Higgins, Bailey & Pearce, 2005; Lecavalier, Leone, & Wiltz, 2006). A study conducted by Ingersoll and Hambrick (2011) revealed that 56% of parents of eight-year-old children with diagnosis of ASD obtained significant scores in depression scales, and 85% of parents scored in the clinically significant range for parenting stress. It appeared that mothers and fathers of a child with diagnosis of ASD were pretentious and contrary in their mental health status, with mothers being more negatively affected by their child’s impairment than fathers (Ekas, Lickenbrock, & Whitman, 2010). Similar results were observed in a study conducted by Davis and Carter (2008), in which more mothers (33%) of toddlers diagnosed with ASD than fathers (17%) reported clinically significant depressive symptoms. Further, mothers who did not have a husband or a partner were more likely to be depressed than married mothers (Ekas et al., 2010).

In a study by Benjak, Vuletic Mavrinac, and Pavic Simetin (2009) it was discovered that parents of children diagnosis of ASD reported significantly poorer self-perceived health compared to parents of TD children. Energy, vitality and social functioning were particularly low dimensions of self-perceived health. The only dimension of health in which there was no difference with the parents of TD children was physical health, which can be explained by the fact that 71% of surveyed parents with children with diagnosis of ASD were under 50 years of age. Another interesting finding was that 35% of parents of autistic children perceived their health as worse compared to the previous year, and this was 18% higher in comparison to parents of TD children. This discrepancy in self-perceived health between parents was confirmed by the finding that 41% of parents of children diagnosed with autism as opposed to 30% of parents of TD children who reported the existence of a chronic medical condition.

The stress experienced by parents of children with diagnosis of ASD was a strong predictor of heightened risk of divorce (Hartley et al., 2010). However, even though such parents reported more emotional stress, they remained more resilient compared to parents of TD children (Lam, Wong, Leung, Ho, & Au-Yeung., 2010). According to a study conducted by Lai, Goh, Oei, and Sung (2015) parents of children with diagnosis of ASD reported significantly more parenting stress symptoms such as negative parental self-views lower satisfaction with the parent–child bond, and more depression symptoms, than parents of TD children. Despite
findings such as these which suggest that parents of children with diagnosis of ASD are more anxious and depressed and under greater pressure than parents of TD children, the field has rarely focused on an in-depth investigation of psychological outcomes for this parent group (Benderix, Nordström, & Sivberg, 2006). Researchers such as Krauss, Seltzer, and Jacobson (2005) have argued that in-depth investigations into mental health outcomes have been difficult to initiate with parents of children with diagnosis of ASD because they are overburdened with numerous and long-term responsibilities in caring for their child during childhood, adolescence and adulthood as autism is a lifelong condition.

Parents of children with autism also appear to be in greater distress when compared to parents of children with differing abilities. For instance, the level of general stress experienced by parents of a child with autism was significantly higher than for parents of a child with Down Syndrome (DS) (Dabrowska & Pisula, 2010). Studies conducted with mothers of children with diagnosis of ASD have reported higher levels of parenting stress and psychological distress than mothers of a child with Developmental Delay (DD) (Estes et al., 2009). Studies comparing parents of children with autism with parents of children with other developmental disorders in relation to mental health status and coping strategies (Estes et al., 2009; Greenberg et al., 2004) have generally reported that the former report more parenting stress and psychological distress compared to parents of children with other differing abilities.

Value of Inclusion

Educational inclusion entails rights of children to enroll themselves with non-disabled peers and add an opportunity to learn along with non-disabled children. The inclusion movement, like its prototypes in mainstreaming and integration movements, has been “driven by values regarding increasing acceptance of diversity in classrooms” (Coots, Bishop, & Grenot-Scheyer, 1998, p. 317; see, also, Dorries & Haller, 2001; Pereira Dos Santos, 2001). The concept of inclusive education has been extended to address socially constructed and contextual aspects of diversity, arising from ethnic opportunity and linguistic barriers to effective education (Elkins, van Krayenoord, & Jobling, 2003), but access to regular education for children with special needs which is the focus of the present study that is aimed at a person-based diversity.

In practice, the right of children with special needs to be enrolled in regular schools and to be included in regular classes has created difficulties. Parental aspiration, teacher expertise, school resources, and system policy have influenced how this right is exercised. Parents and educators often hold conflicting views, with the issues confronting parents and schools typically seen as multidimensional (e.g., appropriateness of educational services, reciprocal benefits, the social context for learning). Attitudinal research on inclusion has confirmed multiple, sometimes discrepant, and ultimately unresolved perspectives on people's attitudes (Elkins et al., 2004). Therefore, the process of finding consensus and identifying areas of agreement traverses a range of educational issues based on what is affirmed and what is experienced.

Perhaps it is because achieving consensus about inclusive acceptance among stakeholders is such a dynamic process, that studies of general attitudes towards inclusion and its benefits (i.e., what stakeholders want and why they want it) have continued to attract maximum research effort. The need to articulate who to include, why to include and when to include has maintained a research focus on perspectives, values, and beliefs (Bond & Hebron, 2016). The present study acknowledges this diversity of views, in opting to target the specific points at which parent responses affirm or depart from a general consensus with other parents of children with autism.
Rationale

In the recent past, studies have been conducted on children with special needs, but so far it has been focusing on education/rehabilitation programs for children and teachers’ experiences at large. The fact is that parents also undergo continuous and tremendous stress and face difficulties while their child is in a mainstream school. It is worthy to understand the perspective of parents regarding inclusive education. Thus, this study was designed with the following objectives.

Objectives

1. To conduct the item-wise analysis of parents’ attitude towards the mainstream education of their children obtained from PATI scale.
2. To explore parents’ attitude towards the quality of educational services in mainstream education.
3. To explore parents’ attitudes towards child acceptance and treatment in mainstream education.
4. To explore parents’ attitude towards the mutual benefit of mainstream education.

Participants

As illustrated in Figure 1, total number of participants was 20 parents, equally divided between fathers and mothers of already diagnosed children with ADS who were in mainstream schools. The sample was collected within the premises of Jaipur city. The purposive sampling technique was used to obtain data.

Measures

1. **Base Line Proforma:** This contains background information about the participants such as age, education, qualification, income, and so on. Basic information about the child was also taken such as age of diagnosis, severity, mental and chronological age, birth order, and so forth, along with few important questions about day-to-day routine of the child.

2. **Parent’s Attitude to Inclusion (PATI):** This was developed by Palmer, Borthwick-Duffy, and Widaman (1998) to understand the attitude of parents towards inclusion of their children in mainstream classrooms. The tool consists of 10 questions that deliberately incorporate the “multidimensional nature of parent perceptions regarding inclusive practices for children with significant cognitive disabilities” marked on a 5-point Linkert scale.
Results and Discussion

The data collected for this study was analyzed using descriptive statistical methods. The findings explained below in Table 1 are based on the objective set for the study.

Objective 1: To conduct item-wise analysis of parents’ attitude towards the mainstream education of their children obtained from PATI scale.

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<th>Item 1</th>
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<td>Strongly Agree (5)</td>
<td>0 0 14</td>
<td>70 0 0 6</td>
<td>30 0 0 7</td>
<td>35 0 0 0</td>
<td>0 6 30</td>
<td>8 40</td>
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<td>Agree (4)</td>
<td>1 5 6</td>
<td>30 13</td>
<td>65 3 15</td>
<td>11 55</td>
<td>12 60</td>
<td>3 15 6</td>
<td>30 8 40</td>
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<td>Neutral (3)</td>
<td>4 20</td>
<td>0 0 4</td>
<td>20 0 0 4</td>
<td>20 1 5</td>
<td>4 20 0 0 3</td>
<td>15 1 5</td>
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<tr>
<td>Disagree (2)</td>
<td>12 60</td>
<td>0 0 3</td>
<td>15 9</td>
<td>45 2 10</td>
<td>0 0 13</td>
<td>65 13</td>
<td>65 5 25 3</td>
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<td>Strongly Disagree (1)</td>
<td>3 15</td>
<td>0 0 0</td>
<td>0 0 2</td>
<td>10 3 15</td>
<td>0 0 0 0 4</td>
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Table 1: Item-wise Analysis of Parents’ Attitude towards Mainstream Education

Table 1 shows the scores and its percentage of 20 parent’s response to each item on the PATI scale. The first item in the PATI scale is *the more time my child spends in a regular classroom, the more likely it is that the quality of his/her education will improve* and 60% of parents showed their “disagreement” to this statement. It shows majority of parents do not have faith that if their child diagnosed with autism spends more time in the mainstream classroom, it increases the quality of their education.

The second and third items in the scale aim to explore parents’ attitude towards child acceptance and treatment in mainstream education. Item 2 stated *the more time my child spends in a regular classroom, the more likely it is that he/she will be mistreated by other nondisabled students in that room* and 70% parents strongly disagreed with this statement and showed their positive attitude. The third item in the scale was *the more time my child spends in a regular classroom, the more likely it is that he/she would end up feeling lonely or left out around the regular education students*. For this statement, 65% parents agreed, while 15% parents showed neutral attitude. From the response, it can be concluded that most of the parents of children...
with autism agree inclusive or mainstream education is nurturing the value of acceptance and positive treatment towards children with special needs.

Item 4 stated *it is impossible to modify most lessons and materials in a regular classroom to truly meet the needs of my child* and 45% of the sample disagreed with this statement and expressed their negative attitude towards this. Item 5 in the scale was *if my child were to spend a lot of time in a regular classroom, he/she would end up not getting the extra help he/she needs* and 11 participants out of 20 (55%) agreed and showed positive attitude towards the comprehensive approach in mainstream education for the children with autism.

For the 6th statement in PATI, *if my child were to spend much of his/her day in a regular classroom, he/she would become friends with nondisabled students in that room* and 95% participants showed their positive attitude towards this and agreed their children will get more non-disabled friends if they spend much time in regular school.

Item 7 in PATI is about the mutual benefit of inclusive education. This stated *the quality of a regular education student’s education is enriched when a student with severe disabilities participates in his/her class*. To this, 13 (65%) participants disagreed, while 4 (20%) participants took a neutral stand. It can be inferred that parents of children with autistic do not believe quality of general education will be improved when their children are present in the mainstream classroom.

The eighth and ninth items in PATI compare services provided in mainstream and special schools. The majority of respondents (85%) showed their negative attitude in discontinuing the services of special schools for children with autism. The response to Item 9 in PATI indicate 60% of parents agreed their children are getting more services and opportunities in mainstream schools than regular schools.

The tenth item in PATI scale was, *the more time my child spends in a regular classroom, the more likely it is that he/she will be treated kindly by the nondisabled students in that room*. To this, 80% participants agreed typically developing children will understand and their child will be treated more kindly if their child spends more time in the regular classroom.

Objective 2: To explore the parents’ attitude towards quality of educational services in mainstream education

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<td>20</td>
<td>2.38</td>
<td>1.3</td>
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Table 2: Mean and SD of Parents’ Attitude towards Quality of Educational Services in Mainstream Education

To assess parents’ attitudes towards quality of educational services in mainstream education, items 4, 5, 8 and 9 on PATI scale were computed. Table 2 shows the result of the analysis. The mean value 2.38 depicts attitude of parents towards quality of educational services in mainstream education is negative. It could thereby be concluded that parents are not satisfied with existing measures to improve quality of mainstream education.
This result suggests that provisions such as preparation and competence of teachers, both at initial and at the in-service level, and the provision and possible training of non-teaching support staff is needed to provide quality education. Greater linkages between mainstream and special schools with pupils going back and forth or special school staff acting as outreach support teachers in mainstream settings and vice versa, is a further possibility to enhance quality. The increased promotion of an inclusion agenda as a feature of other educational and governmental initiatives should be considered.

Objective 3: To explore the parents’ attitudes towards child acceptance and treatment in mainstream education

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<td>20</td>
<td>4.03</td>
<td>0.85</td>
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Table 3: Mean and SD of Parent’s Attitudes towards the Child Acceptance and Treatment in Mainstream Education

Items 2 and 3 in PATI were studied to find out parents’ attitudes towards child acceptance and treatment in mainstream education. The mean value is 4.03, which shows parents have a positive attitude towards child acceptance and treatment in mainstream education.

Parents often have two concerns: interactions with peers and quality of education programs. However, parents of children in inclusive settings reported very few difficulties with peers and agreed that inclusive settings promote positive social contact for all children. Many parents of children with disabilities want their children to form friendships with typically developing children and reap the benefits of real-world experiences offered by the school.

Objective 4: To explore the parents’ attitude towards mutual benefit of mainstream education

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<td>20</td>
<td>3.30</td>
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Table 4: To explore the parents’ attitude towards mutual benefit of mainstream education

In order to find the attitude of parents with autistic children towards the mutual benefit of mainstream education, this study used items 1, 6, 7, and 10 on the PATI scale. The mean value is 3.30. It can be inferred attitude level of parents is neutral. The result of the study throws light on the need of awareness among parents regarding the benefit of inclusive education for all children in the classroom.

Conclusion

Based on the results of this study, in general it may be averred that inclusive programs have received both positive as well as negative responses from parents. Studies have shown the success of inclusive education depends, to a large extent, on the readiness and aptitude of all
stakeholders, most importantly parents, to make room for individuals with special needs. In conclusion, interviews with parents serve to confirm the common arrangement on a general right to inclusion and the need for extra support and training to all. Regardless of agreement about inclusion, attitude of parents remained mixed about practices related to inclusion.

The findings that emerged from the current study are supported by results of prior studies which argued that students, teachers and other main stakeholders in an inclusive classroom are more inclined to successfully include students with ASD, if they are knowledgeable about applying effective guidance strategies to meet the needs of such students (Lindsay, Proulx, Thomson, & Scott, 2013; Smith et al., 2000). Furthermore, past studies noted teachers who have knowledge and experience in this regard are more motivated to display a positive attitude and offer support regarding including students with ASD (e.g., Wilkerson, 2012; Simpson et al., 2003).

Additionally, findings from the present study and those from previous research suggest that the attitudes of teachers, students, and parents of TD children regarding inclusion are heavily dependent on the severity of the disorder (Lindsay et al., 2013; Segall et al., 2012; Smith & Smith, 2000; Wilkerson, 2012). Moreover, it highlights the importance of collaboration among parents and school administrations in order to effectively meet the needs of students and facilitate greater success (Hart et al., 2011; Leach & Duffy, 2009). The present study and many others emphasize the importance of ensuring that strategies and practices are kept in unison between the home and school environment (e.g., Hart et al., 2011; Leach & Duffy, 2009).

The findings of the present study validated insights gained from previous literature by rediscovering the fact that some teachers lack resources that can be implemented in classrooms to help autistic students achieve greater success (Lindsay et al., 2013; Smith & Smith, 2000). However, the present study also offered new insights regarding physical adaptations that can be established in the classroom to help students diagnosed with ASD experience greater success. Additionally, the findings revealed more strategies should be developed to help increase behavioral skills for autistic students.

The present data further revealed parents have a positive attitude regarding academic outcome that are established when students with ASD are educated in inclusive classrooms and reinforced the social benefits when interacting with their TD peers daily.

Implications

This study highlights the effort on the part of schools to find significant and creative ways for parents of children diagnosed with ASD to participate and contribute to the school community so that their attitude becomes positive towards inclusion. The study is also relevant for special educators, counselors and teachers of inclusive educational systems to understand the environment and help parents cope well with difficult situations. Moreover, this study sheds light on certain areas of concerns for parents and can be used as a base for an intervention program to equip parents.
References


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Addressing Psychological Challenges: Attitude of Medical Students in Oman

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Abstract

Emotional challenges and mental health issues are common among young adults, especially college students. College students also experience multiple barriers with regard to help-seeking behavior for psychological difficulties. This study, conducted at the Oman Medical College (OMC), aimed to explore the help-seeking behavior of medical students for psychological needs. The Inventory of Attitudes towards Seeking Professional Help for Psychological Problems was used. Results from 393 medical students indicated moderate levels of personal privacy and stigma with regard to help seeking for psychological difficulties, but they believed in the effectiveness of counseling and psychotherapy. Obtaining an insight into help-seeking behavior for psychological needs would further facilitate provisions for effective psychological counseling service delivery on campus.

Keywords: college counseling, help-seeking, Oman
Introduction

The college environment is considered to be universally stressful where students face many challenges (Baysden, 2002; Rice & Van Arsdale, 2010). For many students, this period represents the first major life transition and requires adjustment with regard to support systems and resources (Baysden, 2002). Coupled with novel decisions and challenges, this period also epitomizes a time of identity exploration (Syed, 2010), transition into more adult roles and responsibilities, and finalizing concrete career choice and development (Duffy & Sedlacek, 2010). Research also suggests that university students are a high-risk population for mental health problems (Ryan, Shochet, & Stallman, 2010) and that being at university may present threats to students’ emotional well-being (Wittenberg, 2001).

The need for counseling services among college students is also well documented. Though students may be in great need of professional counseling to help deal with these stressors, research contends they are less likely to seek professional counseling and more apt to visit the medical health center to treat associated somatic symptoms (Baysden, 2002). Even when they do seek counseling, the primary reasons are educational and vocational in nature (Leong & Sedlacek, 1985).

Medical school involves a period of significant psychological distress due to the intense demands of the training program. A systematic review of depression, anxiety and other indicators of psychological distress among U.S. and Canadian medical students by Dyrbye, Thomas, and Shanafelt (2006) suggests a high prevalence of depression and anxiety with levels of overall psychological distress consistently higher than in the general population. A study by Jafri et al., (2017) concluded that stress levels of medical students were found to be significantly higher than those of non-medical professional students. The study also highlighted that medical students should be provided with appropriate counseling and stress relieving activities to prevent long-term antagonistic effects of elevated stress on the physical and mental health of future doctors. Gold et al., (2015) reported that medical students had a significant unmet need for mental health care, influenced by barriers to accessing care, stress, burnout and depression. It is, therefore, vital to address the mental health issues of medical students for which obtaining insight into their help-seeking behavior is important.

The present study was conducted at Oman Medical College, the first private medical school in the Sultanate of Oman. The Sultanate of Oman, in southwest Asia, is located on the southeast coast of the Arabian Peninsula. Al-Busaidi et al., (2011) conducted a study on the prevalence of depressive symptoms among university students in Oman. Results indicated that 27.7% of participants had depression of various grades. The authors concluded that the tendency for depression might be a common mental health problem among college students in Oman. Al-Alawi et al., (2017) investigated the prevalence of burnout syndrome and depression among medical students. They reported that 7.4% experienced burnout, while 24.5% medical students were depressed. Jahan et al., (2016) also reported high levels of stress experienced by medical students in Oman. Identical to the universal student experience, the emotional well-being of medical students in Oman is affected. Research by Al-Bahrani (2014b) concluded positive psychological help-seeking attitudes existed among non-medical students but was commonly associated with an external locus of control. Though the prevalence of emotional difficulties among medical students in Oman has been previously studied, their help-seeking behavior towards psychological challenges is unexplored. It is therefore critical to understand the psychological help-seeking behavior of Omani medical students to facilitate the effective implementation of psychological counseling services.
Method

Participants
This study was conducted among students at Oman Medical College (OMC), Sohar campus, Sultanate of Oman. Students at OMC undergo three domains of training – premedical, preclinical and clinical. A total of 393 students consented to be part of the study. Of these, 114 belonged to the premedical years, 202 were in the preclinical program and 77 were obtaining clinical training. Nearly 90% of participants were female as the college caters predominantly to female students. The mean age of participants was 21.32 years (SD=1.43).

Measure
The investigators used the “Inventory of Attitudes towards Seeking Professional Help for Psychological Problems”. This scale is an adaptation of Fischer and Turner’s “Attitudes towards Seeking Professional Psychological Help Scale”. The adaptation was carried out by Mackenzie, Knox, Gekoshi and Macaulay (2000) from Queen’s University, Kingston. Test-retest reliability and validity for the scale have been established. The scale has 24 items and measures three dimensions – psychological privacy, informed openness to treatment, and perceived stigma. Psychological privacy factor reflects the extent to which individuals believe personal problems can and should be dealt with privately. They could engage in denial of psychological problems and see such problems as a sign of personal weakness. Higher scores are indicative of a lower need for psychological privacy and reflect an openness to address & share personal difficulties. The informed openness to treatment factor reflects the extent to which individuals are open to professional psychological help, and confident in both its effectiveness and their ability to obtain mental health services. Higher scores are indicative of higher levels of help-seeking propensity. Scores on the perceived stigma factor reflect the extent to which individuals are concerned about what various important others might think should they find out the individual was seeking help for psychological problems. Higher scores are indicative of lower levels of concern with respect to stigma (Mackenzie, 2000).

Participants had to choose one of the following options for each item on the questionnaire – disagree (0), somewhat disagree (1), undecided (2), somewhat agree (3) and agree (4). Six items required reverse scoring.

Procedure
The study was approved by OMC’s institutional Research and Ethics Committee. Participants were required to complete a consent form. They were then requested to complete the questionnaire, to read each item carefully and choose the most appropriate option. The average time taken to complete the questionnaire was between 7 to 10 minutes. Data obtained was tabulated and analyzed.

Results
Results were analyzed thematically and are presented below. Data was also analyzed comparing the responses among the different groups of students – premedical, preclinical and clinical.

Factor 1: Psychological Privacy
The mean for the domain on psychological privacy was 2.01 and corresponding SD was 1.31. The mean score indicates that though students believe that psychological problems need to be addressed, moderate level of personal privacy exists.
A majority of students reported that they would not discuss personal issues outside their family (74%), hesitate to discuss personal problems (68%) and hesitate to confide their difficulties with anyone (69%) as seen in Figure 1.

Analysis also reported there was no statistically significant difference among means obtained by students in three training groups (premedical, preclinical and clinical) as determined by one-way ANOVA with post-hoc Tukey test (Wessa, 2017). The response across these three groups of students is shown in Figure 2. The chart shows approximately uniform responses that students experience psychological privacy, indicating that there is a hesitation to share details of emotional challenges experienced.

**Factor 2: Informed Openness to Treatment**

The mean for the domain on informed openness to treatment was 2.27 and corresponding SD was 1.23. The mean score indicates students were convinced of the value and the effectiveness of psychological intervention. This portrays openness to professional psychological help to address emotional difficulties.
Figure 3: Factor 2 – Informed openness to treatment

Figure 4: Factor 2 – Informed openness to treatment scores distribution among student groups

Figure 3 shows a majority of students believed they would get professional psychological help if upset for a long time (64%), they would recommend others get professional psychological help (64%), and they had confidence in counseling and therapy (66%). Only 23% students reported they have access to professional psychological services.

Analysis also shows there was no statistically significant difference among means obtained by students in three training groups (premedical, preclinical and clinical) as determined by one-way ANOVA with post-hoc Tukey test. The response across these three groups of students is shown in Figure 4. The graph indicates students currently undergoing clinical training felt they have more access to obtain professional help if they wanted. The chart otherwise indicates approximately uniform responses that students are open to receiving professional psychological help.

Factor 3: Perceived Stigma
The mean for the domain on perceived stigma was 1.59 and corresponding SD was 1.30. The mean score indicates moderate level of stigma exists among students with regard to perception of mental illness and seeking professional psychological help.
Students felt mental illness has a burden of shame (62%) and reported they would feel embarrassed if seen going to a counselor (52%) as seen in figure 5.

Analysis also shows there was no statistically significant difference among means obtained by students in the three training groups (premedical, preclinical and clinical) as determined by one-way ANOVA with post-hoc Tukey test. The response across these three groups of students is shown in Figure 6. Students from premedical years seemed more open to sharing emotional challenges faced with members of their family when compared to other students. The figure otherwise indicates approximately uniform responses with regard to domain of perceived stigma.

**Discussion**

Results indicate though medical students in Oman experience moderate levels of personal privacy and stigma, they believe in the effectiveness of utilizing counseling services to address psychological difficulties. These attitudes are similar to those reported in a study by Vidourek, King, Nabors, and Merianos (2014) where students’ barriers to mental health help-seeking were examined. The authors concluded stigma-related attitudes were highly prevalent, even
though students believed mental health services to be effective. Common barriers to help seeking include social stigma, treatment fears, fear of addressing negative emotions, anticipated risks and self-disclosure (Vogel, Wester, & Larson, 2007).

A qualitative exploration of the help-seeking process among Omani college students by Al-Bahrani (2014a) indicated students were open to seeking help for academic and administrative issues but did not seek help (though available) for associated emotional challenges, an indication of a hesitation to discuss psychological issues. This is consistent with the results of the study that a moderate level of personal privacy exists among Omani medical students.

Results of the present study indicate medical students in Oman are open to, and convinced of, the effectiveness of psychological counseling and therapy services. Research in other middle-eastern regions also indicates students’ openness to professional psychological services. A study by Koydemir-Ozden and Evel (2010) among university students in Turkey concluded they had less negative attitudes towards formal help seeking. Also, female students were more comfortable towards seeking psychological help than male students. A study conducted in the Sultan Qaboos University by Qubtan, Lawati, Alawi, & Sinawi (2015) among medical students concluded students’ attitudes towards psychiatric services was moderately positive and the attitude positively increased among those who completed the psychiatry rotation. Students at OMC are exposed to courses in behavioral science throughout their medical training. They do an introduction to psychology in premedical training, behavioral science and psychopathology during preclinical study followed by the clinical rotation in psychiatry. This may highly contribute to their informed openness to mental health treatment and high help-seeking propensity for psychological difficulties.

Gulliver, Griffiths, & Christensen (2010) concluded that young people perceived stigma and embarrassment, problems recognizing symptoms (poor mental health literacy) and a preference for self-reliance as the most important barriers to help-seeking. Al-Alawi et al., (2017) reported Omanis share the worldwide tendency to harbor stigmatizing attitudes towards mental illness. Al-Senawi and Al-Adawi (2014) reported many people with psychiatric illness in Oman are still unlikely to seek psychiatric help until they have reached an advanced stage of irreversible pathology or until treatment shopping from complementary medicine has failed to provide any benefit. It was also noted that with modernization, Omanis show an increased preference for an individualistic rather than traditional collectivistic mind-set and social behavior. Students at OMC possess moderate stigma towards mental illness and associated services probably due to the existing cultural influence, but their openness to psychological help-seeking may stem from a transition towards individualistic preferences and mind-sets.

As the majority of students at OMC are female, it was not possible to explore gender differences. This is a limitation of the present study.

**Conclusion and Implications**

Medical students in Oman experience moderate levels of personal privacy and stigma with regard to help seeking for psychological difficulties, but they believe in the effectiveness of counseling and psychotherapy. A review by Hunt and Eisenberg (2010) on mental health problems and help-seeking behavior among college students highlighted the significant and increasing burden of mental illness among young people. The authors also stressed the college environment offers a promising venue for prevention and treatment which can help students on
a path to success and well-being. The importance to formulate a cohesive response informed by research evidence was also highlighted.

In view of the prevalence of high levels of stress and anxiety among students in OMC (Jahan et al., 2016) and the results of the present study, there was an initiative to establish a Student Counseling Center on campus to offer professional psychological services. The results of the present study facilitated this project and OMC’s Student Counseling Center was established in 2016. Though privacy and stigma among medical students was expected, the attitude of openness to counseling and psychotherapy services was encouraging. The center has two full-time student counselors, supported by the faculty of the department of Psychiatry and Behavioral Science. Presently, at any given time, around 7% to 10% of the student population at OMC receives psychological services from the Student Counseling Center. Awareness and orientation programs are also conducted regularly to reduce perceived stigma and foster optimal utilization of the available professional psychological services. Understanding medical students’ attitudes towards seeking psychological counseling has tremendously contributed to implementation of mental health service delivery at OMC.
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Link between Adverse Childhood Experiences and Five Factor Model Traits among Filipinos

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Abstract

The relationship between adverse childhood experiences (ACEs) and personality pathology is a growing area of research. Problems with the categorical model of personality disorders have led researchers to explore the relationship between dimensional models of personality and ACEs. Seven hundred seventeen Filipinos, aged between 18 and 87, completed the ACE-IQ and NEO-FFI-3. Results revealed all Five Factor Model (FFM) traits were influenced by ACEs. In general, ACEs increased neuroticism (decreased emotional stability), decreased extraversion (increased introversion), decreased agreeableness (increased antagonism), and decreased conscientiousness (increased disinhibition). For openness, however, the relationship was complex. Some ACEs were positively correlated with openness, while others were negatively correlated, leading to no significant correlation between openness and total ACE-IQ score. ACEs thus affect the total personality, including openness. Understanding the relationship between ACEs and personality pathology, however, may involve going beyond the ACE-IQ total score in order to examine the influence of particular ACEs. In our study, 12 of 13 ACE categories were significantly correlated with at least one FFM trait, the exception being community violence.

Keywords: adverse childhood experience, five factor model traits, personality disorders, Filipinos
Introduction

Adverse Childhood Experiences (ACEs) include physical, emotional or sexual abuse, physical or emotional neglect, and household dysfunctions. An expanding literature documents the negative outcomes of ACEs across the lifespan (Burke Harris, 2014), including stress-proneness, a greater tendency to develop PTSD in response to traumatic stress (Fletcher & Schurer, 2017), and even a higher tendency to contract certain diseases (Ballard et al. 2015). Youth who have experienced high levels of adversity face academic and social risks, including conduct problems, perpetration of violence (Maneta, Cohen, Schulz, & Waldinger, 2012), subsequent adult victimization (Briere & Elliott, 2003), juvenile delinquency (Stouthamer-Loeber, Loeber, Homish, & Wei, 2001), high-risk sexual behavior (Senn & Carey, 2010), and other risk-taking behaviors during adult life (Shiner, Allen & Masten, 2017).

A body of research has addressed the relationship between ACEs and personality disorders (PDs). Emotional abuse is strongly related to the development of PDs (Hengartner, Ajdacic-Gross, Rodgers, Müller, & Rossler, 2013; Raposo, Mackenzie, Henriksen, & Afifi, 2014), and is more common among women (Waxman, Fenton, Skodol, Grant, & Hasin, 2014). According to Waxman et al. (2014), physical neglect is strongly linked with paranoid, narcissistic, borderline, and schizotypal PD, while emotional neglect is linked to paranoid, avoidant, and schizoid PD. Hengartner, Ajdacic-Gross, Rodgers, Müller, and Rossler (2013) linked the emergence of PD in adulthood to specific types of abuse and neglect sustained during childhood. Unfortunately, efforts to uncover relationships between PDs and their developmental antecedents have been complicated by well-documented problems with the categorical model of PDs (Widiger, 1993; Trull & Durrett, 2005), in particular diagnostic overlap and the predominance of PD-NOS. For this reason, the focus of research linking ACEs and personality pathology has shifted toward dimension frameworks (Costa & McCrae, 1990).

A growing number of studies have chosen the Five Factor Model (FFM) as the dimensional framework from which to explore effects of ACEs on personality. However, these studies are often focused on either a particular form of abuse or maltreatment, rather than on some comprehensive list of ACEs. An overview of this research (Allen & Lauterbach, 2007; Moran et al., 2011; Hengartner et al., 2015; Fletcher & Schurer, 2017) is presented in Table 1.

<table>
<thead>
<tr>
<th>Type of Abuse, Neglect, or Maltreatment</th>
<th>Neuroticism</th>
<th>Extraversion</th>
<th>Openness</th>
<th>Agreeableness</th>
<th>Conscientiousness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical abuse</td>
<td>Higher³</td>
<td>Higher³</td>
<td>Lower³</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional abuse</td>
<td>Higher³</td>
<td>Lower³</td>
<td>Higher³</td>
<td>Lower³</td>
<td>Lower³</td>
</tr>
<tr>
<td>Sexual Abuse</td>
<td>Higher²,³,⁴</td>
<td></td>
<td></td>
<td></td>
<td>Lower²</td>
</tr>
<tr>
<td>Childhood abuse history</td>
<td>Higher¹</td>
<td>Higher¹</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physical neglect</td>
<td>Higher³</td>
<td></td>
<td>Lower³</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional neglect</td>
<td>Higher³</td>
<td>Lower³</td>
<td>Lower³</td>
<td>Lower³</td>
<td></td>
</tr>
<tr>
<td>Parental neglect</td>
<td>Higher⁴</td>
<td>Lower⁴</td>
<td></td>
<td></td>
<td>Lower⁴</td>
</tr>
</tbody>
</table>

Table 1: Overview of research findings on the relationship of ACEs and the FFM (Allen & Lauterbach, 2007¹; Moran et al., 2011²; Hengartner et al., 2015³; Fletcher & Schurer, 2017⁴)
Allen and Lauterbach (2007) found that higher Neuroticism and higher Openness suggested a history of childhood abuse. Moran, et al. (2011) found childhood sexual abuse to be associated with higher Neuroticism and lower Agreeableness. Hengartner et al., (2015) focused on emotional abuse and neglect, physical abuse and neglect, and sexual abuse. Fletcher and Schurer (2017) explored parental maltreatments such as sexual abuse and parental neglect. In all of these studies, higher levels of Neuroticism related to all forms of childhood adversities investigated. However, there are many types of abuse, neglect, and maltreatment. Clearly, it is necessary to evaluate the relationship between some comprehensive list of ACEs and some comprehensive measure of personality. Otherwise, a complete overview of the adult consequences of ACEs become bogged down by the piecemeal nature of the research.

A similar situation afflicts research oriented toward the adult consequences of childhood abuse in the Philippines. While much research could be cited, a comprehensive overview is hard to obtain. In the Philippines, child maltreatment research has emphasized abuse and neglect. Sarmiento and Rudolf (2017) indicated that the rate in which young Filipino adults experience minor physical violence during childhood is four out of five, while for severe physical violence it is one out of four. Based on the reports from parents and children in the cross-cultural study conducted by Lansford et al., (2010), the Philippines has one of the highest frequencies and incident rates of mild corporal punishment in the world. This is due to the belief that respect and obedience to authority will result from strategies such as corporal punishment (Luster, Rhoades, & Haas, 1989). Philippine legislation encourages and sanctions parents physically disciplining their children (Appleton & Stanley, 2011). Certain parts of The Child and Youth Welfare Code of 1974 and the Family Code of 1987 imply the use of corporal punishment (Sarmiento & Rudolf, 2017). Most common methods of punishment include pinching, followed by beatings, with a tendency to punish sons more harshly than daughters (Sanapo & Nakamura, 2011). One of the reasons for these punishments include being perceived as naughty or disobedient by their caretakers, which could mean anything from being a disruption in adult conversation by making loud noises, to fighting with siblings (Sanapo & Nakamura, 2011). Numerous researchers have shown that physical punishment affects children’s development negatively (Durrant & Ensom, 2012). Although punishment is considered a traditional means to discipline children, no study has proven that physical punishment enhances developmental health in any way. As of 2014, a legislative bill encouraging positive forms of discipline that do not involve any form of violence is still pending for public hearing (Sarmiento & Rudolf, 2017). The prevalence and perceived norm of corporal punishment as a disciplinary method in the Philippines indicates a wide exposure to ACEs for Filipino adults.

The purpose of the present study is to examine the relationship between personality traits and ACEs directly, in order to determine which ACEs are significantly linked with the major factors of the FFM within Filipino culture. Rather than examine the adult effects of a particular form of abuse, we seek to establish relationships between an entire taxonomy of abuse types, as represented by the ACE International Questionnaire, and a dimensional model of the total personality, as represented by the FFM. We do not examine intervening mechanisms that might link specific instances or kinds of abuse with specific FFM factors. Nor do we propose an overarching theory that might tie the existence of abuse in childhood more directly to the consequences for personality in adulthood through mediating effects. Instead, our purpose is to document the relationships that exist across the total domains of abuse and personality, in order to provide as comprehensive a picture as possible regarding the effects of childhood abuse on the whole person.
Method

The point-biserial correlation was used to document relationships between the FFM factors and specific ACEs.

Participants

Participants were a convenience sample of 717 Filipinos residing in the Philippines, totaling 467 (65.13%) females and 250 (34.87%) males, ranging in age from 18 to 87 years ($M = 31.29$; $SD = 13.53$). Through the help of acquaintances and their referrals, willing participants were recruited to complete the ACE-IQ and NEO-FFI-3 measures (described below). Subjects who were not ethnically Filipino (i.e., subjects from other Southeast Asian countries) were excluded. A total of 441 participants completed college or university, 255 participants finished secondary school or high school, and the remainder completed only primary school. No remuneration was given for the voluntary participation.

Research Instruments

**Adverse Childhood Experiences International Questionnaire (ACE-IQ).** Developed by the World Health Organization (WHO), the ACE-IQ measures adversities experienced during the first 18 years of life. The ACE-IQ questions are sorted into 13 categories, namely physical abuse, emotional abuse, contact sexual abuse, living with a household member who was also a substance abuser, living with a household member who was incarcerated, living with a household member who was mentally ill or suicidal, violence against household members, having one or no parents, parental separation or divorce, emotional neglect, physical neglect, bullying, community violence, and collective violence. Each category represents a type of ACE.

Initially, the ACE-IQ was field tested in seven countries including China, the Former Yugoslav Republic of Macedonia, Philippines, Thailand, Saudi Arabia, South Africa, and Vietnam. Currently, the test is still being evaluated for its reliability and validity. Kazeem (2015) examined its validity in Nigeria and showed that the ACE-IQ and Childhood Trauma Questionnaire (Bernstein & Fink, 1988) have concurrent validity. Excluding the demographic items of the ACE-IQ, the same study yielded an internal consistency and Cronbach’s alpha value of .80 (Kazeem, 2015). Meinck, Cosma, Mikton, and Baban (2017) noted that since its release, the ACE-IQ has been used in Kenya (Goodman, Martinez, Keiser, Gitari, & Seidel, 2017), Brazil (Soares et al., 2016), Saudi Arabia (Almuneef, Qayad, Aleissa, & Albuhairan, 2014), Iraq (Al-Shawi & Lafta, 2015) and Vietnam (Tran, Dunne, Vo, & Luu, 2015). A Cronbach alpha reliability measure of .89 for the ACE-IQ was obtained in the present study.

**NEO Five-Factor Inventory-3 (NEO-FFI-3).** The NEO-FFI-3 is the brief version of the NEO-PI-3, which is used to measure the FFM of personality developed by Costa and McCrae (2010). The self-report version totals 60 items, twelve for each factor. Sample items include “I often feel tense and jittery” (Neuroticism), “I really enjoy talking to people” (Extraversion), “I often enjoy playing with theories or abstract ideas” (Openness to Experience), “I try to be courteous to everyone I meet” (Agreeableness), and “I waste a lot of time before settling down to work” (Conscientiousness). Items are answered on a five-point Likert scale from Strongly Disagree to Strongly Agree. The internal consistency of each factor scale ranges from acceptable to high ($\alpha = .78 - .86$). In the current study, the Cronbach’s alpha reliabilities yielded for each factor were .77 for Neuroticism, .68 for Extraversion, .62 for Openness, .64 for Agreeableness, and .81 for Conscientiousness.
Procedure
Ethics approval was obtained from the College of Science Review Board of the University of Santo Tomas after which participants were sourced through convenience sampling from various locations in Metro Manila, Philippines (e.g. Manila, Quezon City, Mandaluyong City). After completing the informed consent, participants were given the questionnaires and were instructed to answer as honestly as possible, there being no right or wrong answers. Test administration lasted 50 to 60 minutes in comfortable and distraction-free environment. Data sheets were inspected for completeness when turned in and participants were advised to complete any missing responses. All of the selected participants possess a Filipino ethnicity, and in consequence, have experienced and embraced the Filipino culture. Subsequently, the data gathered were then encoded and underwent statistical analysis with SPSS Version 23.

Results
The total ACE score is considered to be the sum of the scores for each category, each of which is scored either 0 or 1. For a score of 1 in any ACE category, the participant is required to have experienced the particular event “many times.” The total possible ACE score thus ranges from 0 to 13, depending on the number of types of ACEs experienced. The total ACE score averaged 2.37, with an SD of 1.66, indicating that each subject experienced an average of 2.37 adverse childhood events. As shown in Table 2, total ACE score was significantly correlated with Neuroticism ($M=24.49$, $SD=7.03$), Extraversion ($M=28.04$, $SD=5.45$), Agreeableness ($M=30.15$, $SD=5.46$), and Conscientiousness ($M=31.30$, $SD=6.58$), but not with Openness to Experience ($M=29.92$, $SD=5.02$).

<table>
<thead>
<tr>
<th>The Five Factors</th>
<th>Neuroticism</th>
<th>Extraversion</th>
<th>Openness</th>
<th>Agreeableness</th>
<th>Conscientiousness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adverse Childhood Experience</td>
<td>.190**</td>
<td>-.140**</td>
<td>.011</td>
<td>-.104**</td>
<td>-.241**</td>
</tr>
</tbody>
</table>

*Note: N = 717; **p < 0.01

Table 2: Pearson Correlation of ACE Total Score with the Five Factor Model Traits

In an effort to understand the data at a more fine-grained level, Table 3 shows the point-biserial correlation between the 13 ACE categories and the FFM traits. With the exception of community violence, each ACE category was significantly correlated with at least one FFM trait. Four ACE categories, notably physical abuse, emotional abuse, having one or no parents / parental separation / divorce, and emotional neglect, were significantly correlated with four FFM factors. Five ACE categories were significantly correlated with three FFM factors. To better understand which personality factors are most impacted by ACE categories, the number of significant correlations by factor were counted. Conscientiousness was significantly correlated with ten ACE categories. Neuroticism and Openness were significantly correlated with eight ACE categories. Agreeableness was significantly correlated with six ACE categories. Extraversion was correlated with four ACE categories.
The Five Factor Model

<table>
<thead>
<tr>
<th></th>
<th>Neuroticism</th>
<th>Extraversion</th>
<th>Openness</th>
<th>Agreeableness</th>
<th>Conscientiousness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical abuse</td>
<td>.100**</td>
<td>-.097**</td>
<td>.072</td>
<td>-.018**</td>
<td>-.147**</td>
</tr>
<tr>
<td>Emotional abuse</td>
<td>.283**</td>
<td>-.114**</td>
<td>.210**</td>
<td>.006</td>
<td>-.189**</td>
</tr>
<tr>
<td>Contact sexual abuse</td>
<td>.125**</td>
<td>-.137**</td>
<td>.023</td>
<td>-.064</td>
<td>-.187**</td>
</tr>
<tr>
<td>Alcohol and/or drug abuser in the household</td>
<td>.013</td>
<td>-.028</td>
<td>-.079*</td>
<td>-.043</td>
<td>-.048</td>
</tr>
<tr>
<td>Incarcerated household member</td>
<td>-.006</td>
<td>-.039</td>
<td>-.011</td>
<td>-.098**</td>
<td>-.079*</td>
</tr>
<tr>
<td>Someone chronically depressed, mentally ill, institutionalized, or suicidal</td>
<td>.081*</td>
<td>-.051</td>
<td>.088*</td>
<td>-.076*</td>
<td>-.122**</td>
</tr>
<tr>
<td>(Mother) Household member treated violently</td>
<td>.158**</td>
<td>-.050</td>
<td>.118**</td>
<td>-.024</td>
<td>-.149**</td>
</tr>
<tr>
<td>One or no parents, parental separation or divorce</td>
<td>-.190**</td>
<td>.067</td>
<td>-.121**</td>
<td>.135**</td>
<td>.179**</td>
</tr>
<tr>
<td>Emotional neglect</td>
<td>.214**</td>
<td>-.115**</td>
<td>-.010</td>
<td>-.128**</td>
<td>-.159**</td>
</tr>
<tr>
<td>Physical neglect</td>
<td>-.005</td>
<td>-.038</td>
<td>-.170**</td>
<td>.044</td>
<td>-.023</td>
</tr>
<tr>
<td>Bullying</td>
<td>.149**</td>
<td>-.030</td>
<td>.141**</td>
<td>-.035</td>
<td>-.131**</td>
</tr>
<tr>
<td>Community violence</td>
<td>-.007</td>
<td>-.007</td>
<td>-.014</td>
<td>-.020</td>
<td>-.012</td>
</tr>
<tr>
<td>Collective violence</td>
<td>-.001</td>
<td>-.044</td>
<td>-.141**</td>
<td>-.180**</td>
<td>-.117**</td>
</tr>
</tbody>
</table>

*Note: N = 717; * p < 0.05, **p < 0.01

Table 3: Correlation of the 13 ACE Categories and Five Factor Model traits

Discussion

The current study explored the relationship between ACEs and the FFM factors. As noted, most research examining the effects of childhood abuse on the adult personality have focused on specific kinds of abuse or particular dimensions of personality. Effects designed to relate the total domain of abuse types to some comprehensive set of personality factors has been lacking. As such, a comprehensive overview of the effects of abuse is also lacking.

The total ACE score was related to four FFM factors (excluding Openness), and most strongly related to Conscientiousness ($r = -.241$) and Neuroticism ($r = .190$). Broadly speaking, it appears that ACEs strongly impact these two domains of personality, with secondary impacts in Extraversion ($r = -.140$) and Agreeableness ($r = -.104$). Within the FFM, each factor is
believed to have a more positive or healthy pole and a more negative or unhealthy pole (Costa & McCrae, 1992). Neuroticism is the unhealthy pole of Neuroticism versus Emotional Stability. Introversion is the unhealthy pole of Extraversion versus Introversion. Rigidity is the unhealthy pole of Openness versus Rigidity. Antagonism is the unhealthy pole of Agreeableness versus Antagonism. Disinhibition is the unhealthy pole of Conscientiousness versus Disinhibition. Based on our data, ACEs appear to consistently move personality factor scores in the direction of personality pathology, with the strongest effects on Conscientiousness and Neuroticism.

An examination of Table 3, however, shows that no simple rule determines the breadth of personality impact for a particular ACE. In our study, only one ACE, community violence, was not significantly correlated with any personality factor. Two ACEs were correlated with only one factor, notably alcohol and/or drug abuser in the household and physical neglect, both of which impacted Openness. All other ACEs impacted two or more factors, and four ACEs were correlated with four personality factors. Five ACE categories were significantly correlated with three FFM factors. Because 9 of 13 ACEs impact three or more FFM factors, we can say that, as a general rule, ACEs exert a broad impact on personality, moving scores in the direction of personality pathology. The possible exception to this generalization is Openness. In our sample, the total ACE scores obfuscated the relationship between ACEs and Openness. We say this because some ACEs were positively correlated with Openness, while others were negatively associated with Openness, effects which washed out when the total ACE score was correlated with Openness. Examining the data at a more fine-grained level, then, we conclude that ACEs affect the total personality, and that Openness is no exception.

Findings from the current literature relating childhood abuse and adult personality pathology should be evaluated with the broad effects of ACEs in mind. Below, we discuss some of the existing literature that links childhood abuse to the FFM. Note that the breadth of the available literature supports diverse and extensive effects of ACEs on adult personality, exactly what we observed in the current study.

Conscientiousness was significantly correlated with 10 of 13 ACE categories. Fletcher and Schurer (2017) observed that children who experienced parental neglect scored low in Conscientiousness. In their study, Conscientiousness was one of the personality traits that was “significantly and robustly” predicted by ACEs. Hengartner et. al. (2015) found low Conscientiousness to be strongly related to emotional abuse and neglect. Likewise, Lee and Song (2017) found that Conscientiousness decreases as emotional abuse increases, with the same relationship also applying to physical abuse. Mathews, Kaur, and Stein (2008) found that emotional neglect and sexual abuse during childhood were found to be significantly correlated with lower conscientiousness. McElroy and Hevey (2014) found low Conscientiousness to be associated with higher stressors and lower well-being. Bogg and Roberts (2004) explored the correlation of Conscientiousness and violent behaviors and outcomes such as incarceration, domestic violence, and community violence that spans interpersonal aggression. Conscientiousness had an inverse relationship with all these violent behaviors.

According to Hengartner et al. (2015) Neuroticism is related to all forms of childhood maltreatment, some of which include physical abuse, emotional abuse, and neglect. Hovens, Giltay, van Hemert and Penninx (2016) found that childhood maltreatment led to increased hopelessness, rumination, and an external locus of control. Frequent sexual abuse and parental neglect were also found to have a significant relationship with Neuroticism (Fletcher & Schurer, 2017). Shiner et al. (2017) stated that experiences of adversity from childhood through
adolescence and adulthood are associated with increased Neuroticism. In the current study, Neuroticism was significantly correlated with 8 of 13 ACEs. One ACE category was found to have an inverse relationship with Neuroticism, namely one or no parents, parental separation or divorce. This finding stands in contrast to most research that states parental neglect has a positive association with Neuroticism (Fletcher & Schurer, 2017). The reasons for this are unclear.

According to Hovens, et.al. (2016), ACEs are related to higher Introversion. Hengartner et al. (2015) found Extraversion to be correlated with childhood abuse and neglect. Huh, Kim, Yu, and Chae (2014) argued that among the ACEs, physical abuse, emotional abuse, and emotional neglect contribute to dominant/controlling and intrusive/needy interpersonal patterns leading to a risk of entering abusive or traumatic relationships in adulthood. A number of studies have found that childhood abuse leads to strained intimate relationships later in life (Ducharme, Koverola, Battle, 1997; Roche, Runtz, & Hunter, 1999; Davis, Petretic-Jackson, & Ting, 2001; Hankin, 2005). Sexually abused children were found to be more introverted, possessing a low self-concept, and to be more anxious compared to non-sexually abused children (Deb & Mukherjee, 2009). In line with these studies, Extraversion was found to be significantly correlated with 4 of 13 ACEs in the current study, which are physical abuse, emotional abuse, sexual abuse, and emotional neglect.

Carver, Johnson, McCullough, Forster, and Joorman (2014) stated that, ACEs lead to lower levels of Agreeableness (higher Antagonism), specifically emotional abuse (Hengartner et al., 2015) and sexual abuse (Moran et al., 2011). According to Belsky, Steinberg, and Draper (1991) and Belsky (2012), early adversity causes the victim to think that resources will be unavailable, and people are untrustworthy. Furthermore, Conger, Cui, Bryant, and Elder (2000) found that children tend to learn problematic interpersonal behaviors through growing up in homes with marital discord, possibly affecting their views regarding romantic relationships (Pickhardt, 2015). While both death of a parent and divorce influence child personality and development, it has been found that the latter leads to a more profound impact (Prevoo & ter Weel, 2014). Moreover, children who have experienced parental incarceration are more prone to manifesting aggressive and antisocial behavior (Murray, Farrington, & Sekol, 2012; Geller, Garfinkel, Cooper, & Mincy, 2009). Persons with incarcerated mothers or fathers during childhood were more susceptible to criminal justice involvement as adults (Gius, 2016; Huebner, & Gustafson, 2017).

In contrast to previously published findings (e.g., Pos et al., 2016), the current study found no significant relationship between total ACE score and Openness. Examining the pattern of correlations with specific ACEs, however, shows that some are significantly positive, and some are significantly negative. Thus, it is the net effect across all ACEs which results in a non-significant correlation between total ACE score and Openness. Specifically, emotional abuse, living with someone who is chronically depressed, mentally ill, institutionalized, or suicidal, a household member treated violently, and being a victim of bullying were found to increase Openness, while having an alcohol and/or drug user in the household, having one or no parents, parental separation, or divorce, physical neglect, and collective violence were found to decrease Openness. Obviously, then, Openness is strongly influenced by ACEs, but the specific effects are concealed by looking only at the correlation of Openness with total ACE score. Note that a similar effect was observed in Table 1, where parental neglect resulted in lower Openness, but physical abuse, emotional abuse, and having a childhood abuse history increased Openness.
Readers may wonder what the implications are for stakeholders at the individual, community, and societal levels. Stakeholders at all levels must be aware that there is no simple one-to-one relationship between childhood abuse and adult personality. Results show the effects of ACEs to be broadly toxic to the development of the person, but particularly to Conscientiousness and Neuroticism. In these two factors, individuals with ACEs are likely to sustain broad deficits. Both factors are concerned with regulation. Conscientiousness may be conceptualized as regulation of the self in accordance with the expectations of others and society. Neuroticism may be conceptualized as regulation of the emotional aspects of self. Since the effects of ACEs overflow Neuroticism and Conscientiousness, however, it is important to understand, for any particular individual, that extreme personality functioning on any of the five factors could have its precedent in abusive childhood experiences. Mental health professionals should be alert to this possibility and actively inquire about such experiences with their clients.

**Limitations**

The current study is not without limitations. The alpha internal consistency values for Extraversion, Openness, and Agreeableness were below the desirable value of .70, indicating that such traits may have been affected by extraneous variables. The ACE categories are scored as dichotomous variables, which limits statistical power when correlated with the continuous FFM score. Using a culture fair or culture specific personality instrument which encapsulates the Filipino experience might better capture the “Filipino personality” and thus, render more accurate results and relationships with childhood adversity. An adequate sample coming from all over the Philippines, instead of predominantly from Luzon and Mindanao, would also be beneficial to the generalizability of the study.

Finally, at the level of the individual, not all incidents result in detrimental effects. Mittal, Griskevicius, Simpson, Sung, and Young (2015) found that people raised in unpredictable environments were still able to profit from new experience, a sign of resilience. Another entire body of research has investigated the phenomenon of post-traumatic growth (Tedeschi & Calhoun, 2004). Such findings do not, in any circumstance, applaud adversity but rather shed some light on the fact that some individuals do transcend adversity and choose their own destiny (Hustad, 2017). Future research could consider investigating ethnic or cultural background as a source of variations in Filipino personality traits. Additionally, exploring other variables that may be a factor in the present results, such as the respondents’ gender, age, socioeconomic status, educational background, or even religion will be a way of bridging the gap in knowledge.
References


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To Buy or not to Buy:  
Antecedents of Fair Trade Apparel Purchase Behavior  

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Abstract  

Fair trade represents one of the most influential social movement that encourages sustainability and ethical consumerism in the past 20 years. While fair trade movement of apparel products is rapidly expanding, there is a dearth of understanding about the characteristics of consumers who regularly purchase fair trade apparel products. The purpose of the study was, therefore, to explore whether demographics, ethical traits, and individual characteristics such as clothing involvement helped predict fair trade purchase behaviors. Demographic variables such as gender, generational cohorts, education, and income were effective in predicting fair trade purchases. Ethical traits such as altruism, ethical concerns, and ethical obligation along with socially responsible attitudes were also able to differentiate fair trade purchase behaviors from non-purchaser behaviors. The final set of variables in a hierarchical regression model were price sensitivity, materialism, and clothing involvement. Among the individual characteristics, only the extent to which consumers were involved in clothing was associated with fair trade purchases. Investigating several sets of variables closely related to ethical consumption contributed to the literature in the context of fair trade consumer behavior.  

Keywords: ethics, fair trade, individual characteristics
Introduction

Fair trade represents one of the most influential social movement that encourages sustainability and ethical consumerism in the past 20 years. The mission of fair trade aims to improve social and environmental conditions by supporting economically disadvantaged producers around the world and promoting environmentally conscious production among them (World Fair Trade Organization, n.d.). More than 1.6 million farmers and workers benefited from fair trade certified sales in 2017 which represented approximately 1 billion USD only in the United States and 9.7 billion USD across the world (Fairtrade International, 2017). Some examples of fair trade certified products are coffee, sugar, wine, and non-food products like apparel and home goods. Among the product categories, coffee shows the largest import to the United States which exceeded 140 million pounds in 2016, according to Fair Trade USA (2016). In spite of the greatest market size and sales volume in the coffee sector, the fastest growing product category of fair trade is apparel and home goods (Fair Trade USA, 2015). In 2015, the import of the fair trade certified apparel and home goods increased by 389% from the previous year in the U.S. market, and such steep growth is in part attributed to the participation of clothing companies such as West Elm, Patagonia, prAna, and PACT in the fair trade program (Fair Trade USA, 2015). According to Fair Trade USA (2015), the significant growth of the fair trade market has enabled a substantial increase in total Fairtrade Premium earned by cotton farmers and factory workers in four countries such as India, Sri Lanka, Ethiopia, and Pakistan, supporting seed cultivation, raincoats, healthcare, bicycles, training and more. The key driver that distinguishes fair trade from other socially responsible business sectors is the premium (Fair Trade USA, 2015) that is an additional earning that is saved as a communal fund for farmers and workers to use to enhance their economic, social, and environmental conditions (Fairtrade Foundation, n.d.).

In spite of the increasing consumer interest, fair trade performance of online and offline stores has been an ongoing concern among researchers considering the competitive fashion industry. While apparel companies like Patagonia have contributed to the growing awareness of fair trade apparel products, Fair Trade Organizations (FTOs) have played a significant role in marketing goods produced by the world’s most marginalized artisans and workers. Researchers investigated the performance of FTOs to provide insights to the nonprofit organizations that often face difficulties creating long-term customer patronage and challenges of maintaining volunteer commitment (Littrell & Dickson, 1998). Suggested strategies were increasing flexibility in the supply of artisans; recruiting volunteers for sales and retailing in the US; increasing quality and ethnicity in product design; linking customer to artisans; and creating new store images. Website designs between FTOs and mainstream retailers were also compared to encourage competitive approaches of marketing (see Halepete & Park, 2006).

Along with the competitiveness of fair trade apparel products, examining consumer values and characteristics such as benevolence has been an important goal for many researchers to understand what drives fair trade consumption. Users of fair trade non-food products tend to be more benevolent and have greater interests in the world than those who have not purchased such products (Ma & Lee, 2012). They also tend to be more acceptable and adaptable to new things or unexpected circumstances. These values have been suggested as antecedents that drive positive belief, attitudes, and purchase intentions of fair trade apparel products. Together with belief and attitudes towards fair trade products, perceived behavioral control is found to be a crucial predictor of fair trade consumption (Ma, Littrell, & Niehm, 2012). For example, consumers who feel confident to purchase fair trade non-food products are more likely to show greater intention to buy them in the future.
With the fast growing consumer awareness, fair trade apparel has been a target for research in the areas of retail performance (Halepete & Park, 2006; Littrell & Dickson, 1998), corporate commitment (Goworek, 2011; Jones, Hillier, & Comfort, 2014), consumer characteristics (Halepete, Littrell, & Park, 2009), and purchase behaviors (Ma & Lee, 2012). While fair trade movement of apparel products is rapidly expanding, there is a dearth of understanding about the characteristics of consumers who regularly purchase fair trade apparel products. The purpose of the study was, therefore, to explore whether demographics, ethical traits, and individual characteristics such as clothing involvement helped predict fair trade purchase behaviors. Understanding factors that distinguish fair trade consumers from non-consumers is essential to encourage future consumption of both consumer groups who have or do not have purchase experiences through market segmentation, advertising campaigns, or other important marketing activities.

Several studies attempted to understand buying behavior of fair trade non-food products with consideration of generational cohorts and socio-demographic profiles. This study aimed to fill the research gap by examining fair trade purchase behaviors of two age cohorts such as Generation X (born between 1965 and 1977) and Y (born between 1978 and 1994). In spite of their buying power and socially conscious attitudes, there is little research that incorporates both consumer groups and compares their characteristics and impact on the fair trade market. Another important demographic information such as gender, education, and income is also compared between fair trade purchasers and non-purchasers. In addition to demographics, this study examined whether the two consumer groups show differences in their ethical traits and attitudes towards social responsibility in the apparel industry. Ethical traits such as altruism, ethical concerns, and ethical obligation are the important precursors of forming positive attitudes toward ethical business practices and patronizing the businesses (Shaw, Shiu, & Clarke, 2000). In turn, socially responsible attitudes have a direct, positive influence on ethical consumption. Due to their significant roles in predicting purchase intention, ethical traits and socially responsible attitudes were included in determining the differentiating characteristics of fair trade consumers and non-consumers. Furthermore, individual characteristics have insightful moderating effects on ethical consumption (Trevino & Youngblood, 1990). Specifically for apparel products, examining consumers characteristics such as price sensitivity, materialism, and clothing involvement is critical because such factors are important considerations for consumers to decide actual purchases. Taken together, this study examined whether demographic backgrounds (e.g., education and generational cohort), ethical traits of consumers (e.g., altruism), and individual characteristics (e.g., clothing involvement) predicted purchases of fair trade apparel products.

**Literature Review and Hypotheses Development**

Demographics, personal values, positive attitudes, and social norms have been addressed as driving factors of fair trade consumption (Han & Stoel, 2016; Littrell, Ma, & Halepete, 2005; Ma & Lee, 2012). However, there is a paucity of studies that examined the roles of ethical values and individual characteristics in differentiating fair trade consumers from non-consumers to understand what other factors may motivate fair trade consumption.

**Socio-Demographic Factors and Fair Trade Consumption**

Some of the early fair trade research was supported by North American fair trade businesses including MarketPlace and Ten Thousand Villages to collect essential information to effectively market fair trade goods and to understand consumer attitudes. As an example, Littrell and her colleagues (2005) were interested in finding differences among generational
cohorts in terms of their shopping preferences and behaviors. Consumers across the generational cohorts highly valued fair trade philosophy such as paying a fair wage and considering worker safety and the environment. What distinguished the generations was their different focus on product attributes and socio-political attitudes. Unlike swing (born between 1934 and 1945) and baby boomer (born between 1946 and 1964) shoppers, Generation X shoppers (born between 1965 and 1977) put less importance on product quality and comfort. They were also less interested in ethnic clothing or product authenticity and less likely to be a local activist. Baby boomers were found to be most likely to be fair trade consumers in comparison to other generational cohorts. No specific differences were found in their study regarding gender, income, or education. Recently, a different study by Benson and Hiller Connell (2014) identified various barriers to fair trade consumption among the baby boomer cohort such as limited product options, high price points, and difficulties in identifying fair trade products. Ma and Lee (2012) focused on broader aspects of socio-demographic factors such as education and income along with age to identify influential variables of fair trade apparel consumption. Individuals in their 60s indicated greater purchase experiences while most of the non-purchasers were in their 30s. Fair trade purchasers obtained higher education than non-purchasers in two educational levels such as Bachelor’s and Master’s degree. Income also showed the similar pattern in that higher income indicated greater experiences in fair trade consumption.

As the baby boomers are retiring and Generation Y (Gen Y) (born between 1978 and 1994) has been starting their careers, the latter consumer group has become imperative for any businesses to target (Culclasure, 2016). Generation X (Gen X) and Generation Y are present and future working professionals who have higher discretionary income which leaves greater rooms for them to spend on fair trade products than any other generational cohorts. Gen X is known to be the well-educated and technologically literate generation (Reisenwitz & Iyer, 2009). However, they tend to be more cynical and skeptical than Gen Y who grew up in a more prosperous environment with abundant possibilities and technological advancement (Reisenwitz & Iyer, 2009). Similar to the generation of their parents (i.e., baby boomers), Gen Y tends to be environmentally and socially conscious, but much more acceptable to cultural diversity (Hewlett, Sherbin, & Sumberg, 2009). Both Gen X and Gen Y purchase products to seek status (Eastman & Liu, 2012), value volunteer work, and put importance on their careers, but Gen Y is more technologically savvy, more risk-taking, and less loyal to brands compared to Gen X (Reisenwitz & Iyer, 2009). Similarly, Parment (2013) identified that Gen Y chooses a product first rather than selecting a specific brand beforehand during as their consumption process, which indicates that the generation is less brand loyal. Gen Y, however, tends to put substantial time and efforts to purchase a product with whom they are highly involved (Parment, 2011). A more recent study focused on Gen Y consumers’ purchase intentions of fair trade apparel products (Hwang, Lee, & Diddi, 2015). The sample in their study showed lacking knowledge of the Gen Y consumer group toward products with ethical attributes, such as fair trade. Based on the research findings, Gen Y is more likely to be fair trade apparel consumers; however, there is inadequate understanding about whether the generational difference affects fair trade consumption.

Of the few studies focused on fair trade apparel products, socio-demographic information emerged as influential factors driving fair trade purchases. In the context of fair trade apparel consumption, there is still limited research investigating socio-demographic factors in forming fair trade purchases. Given that researchers in ethical product consumption have demonstrated contradictory findings about the impact of demographic information, it is worth further examining the factors. Also, Gen X and Gen Y have been targeted for fair trade research in
separate studies (Han & Stoel, 2016; Hwang et al., 2015; Littrell, et al., 2005), but no studies have compared the two generational cohorts to understand their purchase behavior of fair trade apparel. Furthermore, studies that included gender as a differentiating factor in the particular domain were not found. With that logic, the first hypothesis (H1) was developed to fill the research gap and contribute to the generalization of research findings in demographics:

H1: Gender, generational cohort, education, and income will predict fair trade apparel purchase behaviors vs. non-purchase behaviors.

**Ethical Traits and Fair Trade Consumption**

Personal values are critical factors in shaping positive attitudes toward certain behavior, which in turn leads to an actual behavior (Homer & Kahle, 1988). They have been considered underlying traits that drive ethical consumption including fair trade purchases. For example, Ma and Lee (2012) examined personal values using the Schwartz value theory (1992) to compare fair trade purchasers and non-purchasers. The study found that consumers of fair trade goods tend to be higher in their self-transcendence and openness to change values than those who do not have experiences in fair trade purchases. They are more interested in the world and people and seek variety in their lives. Similarly, these self-transcendent and openness to change values have shown their significant roles in understanding socially conscious or donating behaviors in other studies (Joireman & Duell, 2007; Pepper, Jackson, & Uzzell, 2009). As general personal beliefs, values appear as particular forms of individual traits (Smith, 1982). One example is altruism which refers to a pro-social behavior to benefit others (Krebs, 1970). While consumers tend to engage in ethical consumption due to their altruistic considerations for others (Shaw, Shiu, & Clarke, 2000), it is unknown whether altruistic values distinguish fair trade purchasers from non-purchasers. Considering that altruistic people take an action in the manner to support others, consumers’ altruistic values may provide a useful basis to compare them in the context of fair trade purchases.

Fair trade consumers may engage in ethical consumption due to their concerns about ethical issues such as environmental damage, labor standards, or worker exploitation (Doran, 2009). In the context of apparel consumption, consumers are more responsive to human right related matters than environmental impact. While Kim and Damhorst (1998) did not find a strong association between environmental concerns and apparel consumption, concerns about problems related to workers in the United States or foreign countries predicted consumers’ greater willingness to support socially conscious businesses in Dickson’s (2000) study. However, it is unknown whether ethical concerns help predict fair trade consumption. While concerns about ethical issues refer to worries and interests in environmental or societal problems (Cowe & Williams, 2000), ethical obligation is structured moral rules that help individuals distinguish what is appropriate to behave (Shaw & Shiu, 2002). Hwang and her colleges (2015) examined moral obligation to understand purchase intentions of Gen Y. Three items included measuring moral obligation by asking how moral it is to buy apparel products made of fair trade materials over those produced by conventional clothing companies. Even though the variable was to be an important antecedent of fair trade purchase intention among Gen Y consumers, the current study questions whether buying fair trade goods over standard products should be considered as more moral as some of the mainstream apparel companies perform ethical business practices by paying a fair wage to their factory workers. Thus, the current study measures ethical obligation with more general questions focusing on consumer responsibility towards ethical issues and purchasing products that have less negative impact on the environment and factory workers.
Attitudes toward social responsibility in the apparel and textiles industry also predict ethical consumption. According to Dickson and Eckman (2006), socially responsible clothing and textile businesses put emphasis on the environment and its people with the aim of causing minimum harm to them. Consumers who have positive attitudes toward social responsibility in business are more likely to support such companies that consider ethical issues for their production. For example, Patagonia is well known for its environmental sustainability efforts such as offering Fair Trade Certified™ products and producing goods made of recycled materials. With this campaign, “Don’t Buy This Jacket” in 2011, the company informed consumers to reconsider before buying their products by reminding them of environmental and societal costs of production. While consumers became frugal after the economic depression, the company was able to increase its revenue by 30 percent in 2012 through this message (Thangavelu, 2015). As reflected, consumers are more responsive to socially responsible companies to than those who are not. This study explores consumer attitudes toward social responsibility in the apparel and textiles industry to distinguish fair trade purchasers from non-purchasers. Based on the previous studies related to altruism, ethical concerns, ethical obligation, and attitudes toward social responsibility, hypotheses two (H2) tests whether fair trade buyers are different from non-buyers regarding the traits and attitudes.

**H2**: Altruism, ethical concern, ethical obligation, and attitudes toward social responsibility in the apparel and textiles industry will predict fair trade apparel purchase behaviors vs. non-purchase behaviors.

**Individual Characteristics and Fair Trade Consumption**

Although consumers are willing to buy a particular product, situational or personal circumstances may hinder them from the purchase. In the domain of ethical consumption, feeling concerned or responsible about the environment or unprivileged workers in developing countries may be interrupted by other considerations such as price, recognizable brands, and fashionability.

Price is vital in choosing a product and continuous price-based promotions in the marketplace reflect its significance. Consumers react differently on price in that some consumers are more responsive to it than others. This tendency explains price sensitivity which refers to “the extent to which individuals perceive and respond to changes or differences in prices for products or services” (Wakefield & Inman, 2003, p. 201). Findings of previous studies indicated price as an impeding element of ethical purchases because ethically made products include premiums. Consumers tend to pay extra dollars only when products are ethically certified by reputable organizations (Freestone & McGoldrick, 2008) or when product attributes are commensurate with price levels (Ha-Brookshire & Norum, 2011). Thus, it is likely that price sensitive consumers would choose a different option when the expected value of the product is less than the price range although it has fair trade certification. However, consumers with low price sensitivity would choose an ethical product even though they do not receive the value for the price as they would be more likely to sacrifice the value for other aspects of consumption such as helping the environment or other people around the world.

It is also uncertain whether materialistic consumers would purchase products for socially conscious reasons and choose to sacrifice brand recognition that communicates self-concept. Materialism refers to “the importance a consumer attaches to worldly possessions” (Belk, 1985, p. 291). Materialistic consumers possess goods that signal social status, achievement, and wealth (Presndergast & Wong, 2003). According to Kozar and Marcketti (2011), consumers who show high ethics in their purchase decisions such as avoiding buying counterfeit items are
less materialistic than those who have buying experiences of copied products. Companies that sell fair trade items are less recognized among consumers, which may make worldly shoppers away from acquiring such product type since materialistic consumers seek apparent product features that signal wealth and status such as logos (e.g., Han, Nunes, & Drèze). Even though a few well-known companies like Patagonia sell products certified to be fair trade, the brand may not be adequate for materialistic consumers to signal their possession. Since materialism is a core value of consumption, it is worth investigating whether this characteristic would help predict fair trade purchases or non-purchases.

For apparel products, interests in the product category would also trigger individuals seeking different types of items or brands and paying attention to related information. A personal characteristic that portrays the statement is clothing involvement, which refers to the extent to which consumers put importance on fashion products in their lives and make much effort for the purchases (O’Cass, 2004). Individuals high in clothing involvement are more likely to have greater knowledge about fashion brands and their products. Fair trade consumers and ethnographic textile collectors tend to share similar characteristics such as expressing personal identity and individuality through purchasing unique items (Yurchisin & Marcketti, 2010). According to Littrell et al. (2005), fair trade buyers consider fashionability and highly valued unique designs of ethnic products. Given that most of the fair trade fashion items are from various countries with unique cultural backgrounds, consumers highly involved in clothing may show greater interests in such products. Following the logics regarding price sensitivity, materialism, and clothing involvement described above, hypothesis three (H3) was developed.

H3: Price sensitivity, materialism, and clothing involvement would predict fair trade apparel purchase behaviors vs. non-purchase behaviors.

Method

A total of 290 apparel shoppers ($M = 24.6$ years, 60% female and 40% male) answered a paper-pencil survey at shopping areas in the western state of the United States. Seventy-three respondents (25%) of the total participants had reported “yes” to the question of whether they had purchased fair trade apparel goods while 217 respondents (75%) answered “no.” Eighty-one respondents were Gen X (27–47 years old) which was 28 percent of the total whereas 209 respondents were Gen Y (18–26 years old: 72%). The questionnaire included (1) demographics, (2) ethical traits, (3) attitudes toward social responsibility in the apparel and textiles industry, and (4) individual characteristics such as price sensitivity, materialism, and clothing involvement. The section for demographics asked questions for respondents’ age, gender, ethnicity, educational level, and household income (see Table 1).
<table>
<thead>
<tr>
<th>Demographic Variable</th>
<th>Categories</th>
<th>Frequency/Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (M = 25 years old)</td>
<td>Gen Y: 18–26 years old</td>
<td>174 (72.1%)</td>
</tr>
<tr>
<td></td>
<td>Gen X: 27–47 years old</td>
<td>116 (27.9%)</td>
</tr>
<tr>
<td>Gender</td>
<td>Female</td>
<td>174 (60%)</td>
</tr>
<tr>
<td></td>
<td>Male</td>
<td>116 (40%)</td>
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<td>Black or African American</td>
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<td>Hispanic</td>
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<td></td>
<td>White</td>
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<td></td>
<td>Other</td>
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<td>Education</td>
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<td></td>
<td>Some college or associate degree</td>
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<td></td>
<td>College degree</td>
<td>65 (22.4%)</td>
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<td>Graduate or professional degree</td>
<td>40 (13.8%)</td>
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<tr>
<td>Income</td>
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<td>$100,000 or above</td>
<td>27 (9.3%)</td>
</tr>
</tbody>
</table>

Table 1. Demographic Profiles of the Sample

Seven items used to measure altruism were from the Self-Report Altruism Scale developed by Rushton, Chrisjohn, and Fekken (1981). For ethical concerns, a total of eight items were adapted from the New Environmental Paradigm (NEP) Scale (Dunlap, Van Liere, Mertig, & Jones, 2000) along with questions developed by Dickson (2000) and Hustvedt and Dickson (2009). Regarding ethical obligation, five items from the studies by Kaiser and Shimoda (1999) and Sparks, Shepherd, and Frewer (1995) were adapted, and two items were created by the researchers of the current study. Ten questions developed by Dickson (1999, 2000) and Creyer and Ross (1997) examined attitudes toward social responsibility in the apparel and textiles industry. A total of four questions from Anglin, Stuenkel, and Lepisto (1994) as well as Goldsmith and Newell (1997) measured price sensitivity. Items created by Richins and Dawson (1992) measured materialism, and seven questions by Mittal (1995) and Mittal and Lee (1989) examined clothing involvement. All of the questions used a seven-point Likert scale (1 = strongly disagree to 7 = strongly agree). Principle component analyses showed that all multi-item constructs appeared to be one factor, except that ethical concerns emerged with two factors: 1) concern for environment and 2) concern for production) and that ethical obligation emerged with two factors: 1) personal contribution and 2) self-obligation. Reliability analyses showed that all constructs and factors had acceptable Cronbach’s alpha values between 0.76 and 0.92 (Nunnally, 1971).
Results

A hierarchical binary logistic regression was conducted in which the purchase experience of fair trade apparel products (0 = no previous fair-trade purchases and 1 = previous fair-trade purchases), gender (0 = female and 1 = male), generational cohorts (0 = Gen Y and 1 = Gen X) were categorical variables and the constructs described in the method section were the continuous independent variables. The regression model is useful for the data with clustered structures and a binary dependent variable (Wong & Mason, 1985). The regression process allows researchers to create blocks that have a fixed order of variables to control for the influence of covariates or to examine the impact of particular independent variables above and beyond the effects of others (Wong & Mason, 1985). For the current study, demographic variables were entered in the first block, followed by ethical traits along with attitudes toward social responsibility in the apparel and textiles industry in the second block, and individual characteristics in the third block. The Omnibus test of the model coefficients was significant (Chi-Square ($\chi^2$) = 89.55, df = 28, $\rho < .001$). The Nagelkerke R Square depicted that 46.7% of the variation in the outcome variable are accounted for by this logistic regression model. Further, Hosmer and Lemeshow test indicated that the regression model showed an appropriate goodness-of-fit. The chi-square ($\chi^2$) value for the test is 5.27 with a significance level of .729. The value is larger than .05 which indicates a good fit of the model (Chi-Square ($\chi^2$) = 5.27, $\rho = .729$). Since the Goodness of Fit Test developed by Hosmer and Lemeshow points out a significance result below .05 as a poor fit, the model of the study was supported (Pallant, 2005).

According to the test for hypotheses, fair trade apparel purchasers were predicted by female ($\beta = -1.02$, $p < .05$), from Generation X ($\beta = 2.27$, $p < .01$), with higher levels of education (graduate or professional degree, $p < .05$), and income ($100,000$ or above, $p < .05$). The model had five levels of education, including less than high school graduate, high school graduate, some college or associate’s degree, college degree, and graduate or professional degree. The reference point for education was the highest level, graduate or professional degree. This education level showed a statistical difference from college education. In this example, respondents with graduate or professional education degree were more likely to be fair trade purchasers than those with college degree. Furthermore, there were seven levels of income from $19,999$ or less to $100,000$ or above. This level was compared with six other levels and the results showed that the highest income level was statistically different from $65,000 – $ 79,999 as well as $80,000 – $99,999 at the significance level of .05. Thus, H1 was supported.

When controlling for the demographic factors, higher levels of altruism ($\beta = .70$, $p < .01$), personal contribution ($\beta = .50$, $p < .05$), and attitude towards socially responsibility in the apparel and textiles industry ($\beta = .78$, $p < .01$) help predicted fair trade purchases vs. non-purchases. There were two factors that explain ethical concerns: 1) concern for environment and 2) concern for production. The results was marginally significant for the latter factor ($\beta = .36$, $p = .09$), but concern for environment showed a statistical significance ($\beta = -.76$, $p < .01$). However, the effect of the environmental concern on the purchase of fair trade was negative in that concern about the environment played a more important for fair trade non-purchases than fair trade purchases. Hence, H2 was partially supported.

After controlling for the demographics along with ethical traits and socially responsible attitude, results showed that higher levels of clothing involvement predicted fair trade purchase of apparel products ($\beta = .45$, $p < .05$), but price sensitivity and materialism did not ($\beta = -.08$, $p = .55$; $\beta = -.30$, $p = .15$, respectively). Therefore, H3 was also partially supported. See Table 2 for the regression results.
<table>
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Table 2. Logistic Regression Results for the Hypotheses

**Discussion and Conclusions**

The purpose of this study was to predict fair trade purchase behaviors vs. non-purchase behaviors by examining demographic backgrounds, ethical-related variables, and individual characteristics. In contrast to previous findings, the first hypothesis showed gender to be a significant factor in fair trade consumption. Unlike the finding of Littrell and her colleges (2005) who did not find the effect of gender, the current study found that females were more likely to be fair trade purchasers than males. The finding may be because the current study focused on fair trade apparel products and females tend to purchase more apparel than males (O’Cass, 2004; Pentecost & Andrews, 2010). While previous studies focused on Gen X (Littrell et al., 2005) or Gen Y (Han & Stoel, 2016; Hwang et al., 2015), this study investigated which of the two generations was more inclined to purchase fair trade apparel products. According to the finding, the older group tended to shop more for fair trade goods compared to the younger group. With consideration of the roles of education and income, the result was consistent with the effect found in the study of Ma and Lee (2012) in that fair trade buyers showed higher education and earnings than non-fair trade buyers. It seems evident that consumers with higher education may also be more knowledgeable about products, especially those products that have less negative impact on the environment and society, and thus show greater interests in such products (Finisterra do Paço, Barata Raposo, & Filho, 2009; Starr, 2009). When it comes to the role of income in ethical consumer behavior, there have been inconsistent findings from extant research. In the context of sustainable consumption and post-consumption behavior, middle-income consumers reported more active consumption practices throughout the consumption cycle than those in higher income in one study (Abeliotis, Koniari, & Sardianou, 2010). However, the participants in the highest income level of the current study were more likely to be the buyers of fair trade products. This finding shared the same pattern shown in other studies.
Ethical traits such as altruism, ethical concerns, and ethical obligation along with socially responsible attitudes were also able to differentiate fair trade purchase behaviors from non-purchaser behaviors. Similar to the study done by Ma and Lee (2012) who revealed benevolence as a fundamental personal value that fair trade buyers tend to possess, this study was also able to connect altruistic value to fair trade consumers. These results make it obvious that fair trade purchases are partially driven by consumers’ motivation to help impoverished farmers and producers around the world. However, the second hypothesis was partially supported because ethical concerns (concern for production) and ethical obligation (self-obligation) did not help predict fair trade purchases vs. non-purchases. The production of fair trade products has two goals: (1) minimizing the harmful impact on the environment and (2) helping workers and producers (Fairtrade America, n.d.). This study incorporated two types of concerns that consumers may have about fair trade consumption for the first time. However, ethical concerns did not help predict fair trade purchases. One factor of the construct (i.e., concern for production) showed a marginal positive significance, whereas the other factor (i.e., concern for the environment) revealed a negative statistical significance. Unexpectedly, fair trade non-purchasers reported higher levels of general environmental concerns than those who have experiences in purchasing fair trade goods. The most plausible reason of the finding could be that ethical concerns are less effective in predicting ethical consumption (e.g., Shaw, Shiu, & Clarke, 2000). The unexpected finding could also be explained by the fact that some consumers just limit consumption due to their concerns for the environment (e.g., Shaw & Newholm, 2002). The participants who showed more concerns for the environment might believe that consumption is not desirable even though it is fair trade. For the other factor of ethical concerns, the participants were not different in the levels of their concerns for the environmental and social impact of apparel production. Consumers may feel less concerned about the fair-trade apparel production considering that it is mostly handmade and not mass produced which requires substantial energy consumption. Ethical obligation was also found to have two factors: personal contribution and self-obligation. Only the first factor distinguished fair trade purchases vs. non purchases. Although the extent to which the participants felt obliged to the environment and society did not predict whether they would make fair trade purchases or not, greater belief toward their contribution to ethical issues such as environmental and societal problems did help explain the difference in their purchase behaviors of fair trade apparel. This finding is similar to what previous studies found related to the effect of ethical obligation on fair trade consumption (Hwang et al., 2015; Shaw et al., 2000), even though the current research specifically identified personal contribution (one factor of ethical obligation) as the most effective ethical trait that linked to fair trade purchases. In addition to the three types of ethical traits, differences in attitudes toward social responsibility in the apparel and textiles industry were also evident between the two consumer groups. Attitudes toward socially responsible activities of apparel and textiles companies helped predict fair trade purchases vs. non-purchases. Consumers with positive attitudes toward socially responsible activities of apparel companies believed that clothing companies should be ethical, but were also willing to pay premiums and travel more miles to support such businesses. Labels designating socially responsible activities were important for them to identify socially responsible manufacturers and patronage them, similar to the finding of Hyllegard, Yan, Ogle, and Lee (2012).

The final set of variables in the hierarchical regression model were price sensitivity, materialism, and clothing involvement. Among the individual characteristics, only the extent to which consumers were involved in clothing was associated with fair trade purchases. Willingness to pay a premium for ethically made products has been one of the favorite topics...
in ethical consumer behavior (Freestone & McGoldrick, 2008; Ha-Brookshire & Norum, 2011). Consumers are willing to pay more for ethical products; therefore, price sensitivity may not be a good indicator of fair trade consumption. The prices for fair trade products vary to a great extent (e.g., $15 cotton shirts on everlane.com vs. $35 cotton shirts on patagonia.com) that can be cheaper or more expensive than the same types of products without fair trade certification. Thus, it is hard to distinguish fair trade consumption based on how sensitive or insensitive consumers are toward the price points. Likewise, materialism did not support the hypothesis as well. Materialists tend to value possession of objects and acquire goods to signal success, achievement, and wealth (Belk, 1985; Richins & Dawson, 1992). According to Belk (1985), materialists display possessiveness, non-generosity, and envy. While possessiveness refers to consumers’ tendency to control or retain ownership of goods, non-generosity portrays that materialists avoid sharing their possessions with others. Further, materialistic individuals are envious toward people due to their ownership, reputation, or success. From his viewpoint of materialism, consumers with high levels of materialism may not be as interested in buying fair trade products. It is presumable that possessing fair trade goods itself can be associated with materialism, or fair trade consumption is another way of showing conspicuous altruism (Van Vugt, Roberts, & Hardy, 2007). Although materialistic consumers tend to engage in visual purchases to improve their social status (Christopher, Marek, & Carroll, 2004), it is unknown whether fair trade consumption has an association with any factor of materialism. Finally and most importantly, clothing involvement solely differentiated buyers from non-buyers. Fair trade apparel or fashion items are unique among the types of ethical products in that they have designs and details with various cultural characteristics and authentic values. Due to the product attributes, a previous study identified preference toward ethnically inspired clothing and wearing behavior as predictors of greater purchase intention for fair trade apparel (Littrell et al., 2005). Individuals highly involved in fashion goods display enthusiasm to search for such products and show greater knowledge on related information (O’Cass, 2004). In this respect, it is more likely for consumers high in clothing involvement to show interests in fair trade apparel items and buy them more frequently.

Implications and Future Research

Investigating several sets of variables closely related to ethical consumption contributed to the literature in the context of fair trade consumer behavior. Generation X and Y purchasers have been favorite targets among researchers from various domains including advertising (Bush, Martin, & Bush, 2004), decision-making styles (Bakewell & Mitchell, 2003), and ethical consumption (Han & Stoel, 2016; Hwang et al., 2015). While researchers focused on the two generational cohorts in their separate fair trade research, this study has broadened knowledge about the groups in their ethical consumption by incorporating them. Other demographic factors such as education and income also supported the previous findings. While previous researchers did not identify gender differences in fair trade consumption (Halepete et al., 2009; Littrell et al., 2005), the study added information regarding the influence of gender. These findings related to demographics are useful for marketers and advertisers. Considerable marketing and advertising efforts toward female consumers, especially those who are Generation X, can be practical to enhance fair trade product awareness among consumers in the generational group and potentially increase profitability.

Further, the study revealed that ethical obligation was a more powerful predictor of fair trade purchases than individual concerns for ethical issues (Shaw et al., 2000). Unlike other studies, the construct was divided into two factors: personal contribution and self-obligation. Previous studies identified its strong role to predict ethical consumption, whereas the current study
specifically found a stronger effect of personal contribution. That is, the fair-trade purchasers of the study demonstrated that they could help the environment and society than did the non-purchasers. Based on this result, companies may create advertising primed to feel a responsibility toward ethical problems by assuring that their personal efforts can change business practices, which can help the environment and people associated with production. This study is correlational, but future research can explore ethical concerns and obligation in the experimental paradigm to investigate the effect of the two different primes on attitudes and willingness to purchase fair trade product associated with each prime.

Clothing involvement did play a role in the fair trade apparel purchases. The finding provides a crucial insight to apparel producers and marketers to approach potential customers and efficiently communicate with them. Even though more studies are required to identify fashion styles that fair trade customers would prefer (i.e., ethnic uniqueness vs. trendy fashionability), this finding is useful for producers to consider when they design fair trade apparel as the result of the study suggested that consumers with a higher level of interest in clothing are more likely to purchase fair trade apparel. Fair trade apparel producers may focus on creating unique apparel designs and details in order to add value for the specific product category and increase sales. Also, instead of offering messages with the reason to support fair trade or explaining how it helps the environment and others, creating an appealing advertisement with fashion trends or providing information with the authentic procedure of fair trade production would attract customers more successfully.

Finally, price sensitivity and materialism did not help predict fair trade apparel purchase behaviors. As Richins and Dawson (1992) mentioned, materialism is a composite construct of various factors that include success, centrality, and happiness. Based on the scale developed by the researchers, materialistic individuals tend to gauge success by owned objects, consider possession of products critical to their lives, and feel unsatisfied when they do not own what they want. In association with conspicuous altruism reviewed by Fine (2010) and White and Peloza (2009), it is interesting to know whether consumers buy fair trade goods for their sake to signal social status or indeed to help poor workers and producers across the world.
References


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