Prosocial Personality, Perceived Empathic Self-Efficacy and Principle of Care in Volunteers in Irish Society

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Table of Contents

Acknowledgements...........................................................................................................4

Abstract...............................................................................................................................5

Chapter 1: Introduction.......................................................................................................6

1.1 Perceived Empathic self-Efficacy.................................................................................10

1.2 Prosocial Personality....................................................................................................11

1.3 Principle of Care...........................................................................................................13

1.4 The Present Research.................................................................................................14

Chapter 2: Method................................................................................................................16

2.1 Participants..................................................................................................................16

2.2 Design.........................................................................................................................17

2.3 Materials......................................................................................................................18

2.4 Procedure....................................................................................................................20

Chapter 3: Results.................................................................................................................22

Chapter 4: Discussion..........................................................................................................28

4.1 Hypotheses..................................................................................................................28

4.2 Further Analysis..........................................................................................................30

4.3 Limitations...................................................................................................................32

4.4 Strengths.....................................................................................................................33
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ABSTRACT

The present research aimed to examine differences on scores of the moral principle the principle of care across three voluntary status groups, and to investigate the relationship of prosocial personality variables to new concepts in helping behaviour. Measures for a two-dimensional prosocial personality, the principle of care and a perceived empathic self-efficacy scale were applied to 143 participants. There was no significant difference on scores of principle of care across the three groups. The hypotheses postulating that there will be a significant correlation between helpfulness and perceived empathic self-efficacy; and other-orientated empathy and principle of care were both supported which is conclusive with previous research. Further analysis between the variables yielded significant results; implications for future research are discussed.
Chapter 1: INTRODUCTION

Prosocial behaviour is a particularly relevant research area as it is a universal concept. Prosocial behaviour can be defined as any action that is intended to improve the situation of the help-recipient where the helper is not motivated by professional obligations (Bierhoff, 2002, p. 9). Why an individual helps another person with no apparent benefit to themselves in some contexts and not others has been long examined since the bystander effect (Darley & Latane, 1970), a psychological phenomenon in which the possibility of an individual helping another in distress decreases with the number of other witnesses present due to a diffusion of responsibility. Cialdini, Kendrick and Baumann (1982) posit that witnessing another person’s distress will occasion a negative mood state and the only way to diminish this negative mood state is through helping the distressed person. However, helping research took a more altruistic approach with Batson’s empathy-altruism hypothesis (1987), Batson proposed that upon perceiving the distress or need of another it could lead instead to an empathic reaction in the witness through perspective taking and so this would motivate the individual to act altruistically to increase the welfare of the other person.

Buck (2002) took a biological evolutionary approach toward explaining the altruism-egoism debate. He focused on neurochemical affects and deemed there to be both prosocial and selfish affects. He posits that the left hemisphere of the brain is more associated with prosocial emotions and feelings than the right and that these affects pertain to communicative genes that underlie genuine altruism (Buck, 1999). His proposal that prosocial acts function as a means to gain an advantage over others is supported by Evolutionary Biologist Richard Dawkins who posits that “on closer inspection acts of apparent altruism are really selfishness in disguise” (1989, p.4). However, Bucks affect theory has been criticized as there is little
empirical support for his proposal that hemispheric differences are correlated with prosocial and selfish affects (Gray, 2002).

While much of the research on prosocial behaviour has focused on spontaneous incidents of helping (Eisenberg & Neal, 1979; Eisenberg, Pasternack, Cameron & Tyron 1984; Batson, 1987; Dovidio, Piliavin, Gaertner, Shroeder & Clark., 1991; Carlo & Randall., 2002), planned prosocial behaviour is a relatively minute research area (Amato, 1985, as cited in Bierhoff, 2002; Greensdale & White., 2005). Volunteers engage in prosocial action (Penner, Dovidio, Piliavin & Shroeder., 2005). Volunteering has been defined as a “specific form of social action” where individuals willingly give their time and efforts, without expectation of reward or compensation, purely for the good or welfare of others (Omoto & Snyder, 2010). Volunteers registered with Volunteer Ireland in 2011 gave over 425,000 hours of voluntary service to charities and community groups across Ireland (Volunteer Ireland, 2012).

There has been extensive research in the field of volunteerism and a dominant theme has been motivation (Unger, 1991; Clary & Snyder, 1999; Monga, 2006). Clary and Snyder (1999) took a functional approach toward identifying why people volunteer and they identified six potential personal and social motives for volunteering, known as the Volunteer Functions Inventory (VFI, Clary & Snyder, 1999); these include: values, understanding, enhancement, career, social and protective. Two thirds of respondents reported they had had two or more of the aforementioned motivations to volunteer (Clary & Snyder, 1999, p. 157) and as such Clary & Snyder (1999, p.157) propose their model may be an answer to the altruism-egoism debate as an individual may have both altruistic and egoistic motivations behind their voluntary service. Steinberg (1987) observed that there were two general motivations for people to give charitable donations, the desire to improve public welfare and the desire to receive some personal satisfaction in return for ones’ donation. This suggestion
of mixed motivations was also supported by Dovidio, Allen and Schroeder, (1990) who postulated that egoistic and altruistic motivation may be operating at the same time, however where the egotistic motivation will be related to more generalized helping to accomplish the goal of reducing the negative mood affect, altruistic motivations will lead to specific helping to the current situation. Volunteers are more satisfied with their voluntary service if their efforts are met with functionally relevant benefits and will be then linked to longevity of service (Clary & Snyder, 1999, p. 158). The Volunteer Motivations Inventory (VMI, McEwin & Jacobsen-D’Arcy, 2002 as cited in Esmond & Dunlop, 2004) built on the six motivations identified by Clary & Snyder (1999) factoring in four of their own: reciprocity, recognition, self-esteem and reactivity to form an improved volunteer motivations model which, the authors posit, may be utilised in the recruiting and retaining of volunteers. However, Finkelstein, Penner & Brannick (2005) found that initial motives for volunteering had a weaker than expected relationship with volunteerism. Further, it was found that two of the motivations of the VFI (Clary & Snyder, 1999; Esmond & Dunlop, 2004) the career and protective motivations were not in fact associated with volunteer satisfaction and while volunteer satisfaction was positively associated with the amount of time devoted to volunteering, it was unrelated to longevity as a volunteer in older volunteers (Finkelstein, 2007).

It has been shown that role identity mediates the relationship between motives and sustained volunteering (Finkelstein & Penner, 2004). Identity achievement has been shown to be predictive of prosocial tendencies and identity status found to be associated with prosocial tendencies (Barry, Padilla-Walker, Nelson, & Madsen, 2008). Individuals may engage in helpful behaviour to maintain a positive self-image or achieve their ideals (Schwartz & Howard, 1982). Janoski, Musick & Wilson (1998) postulate a habitus theory of volunteerism, that people acquire the habit of volunteering through social situations and relationships where
the skills and behaviours are developed for voluntary work. The role of individual differences particularly an individual’s social value orientation have been highlighted in volunteer research (Penner et al., 2004), of the four main social value orientations, those with a prosocial orientation have shown to show greater concern for the common good than the other orientations such as competitors and individualists. It has been shown that prosocial attitudes are associated with volunteering and that volunteers link their own welfare to that of others (Janoski, et al., 1998).

Empathy has been well-established as a factor in the execution of altruistic helping (Batson, 1987; Dovidio, Allen & Shroeder., 1990; Rushton, 1995). Volunteers are more empathic than non-volunteers (Musick & Wilson, 2008). Empathy enhances the individual’s sensitivity to the needs of others and also in considering the possible consequences of one’s own actions on the other person (Sibicky, Schroeder, & Dovidio., 1995). It was found that empathy was a stronger predictor of helping when the recipient of the helpful action was an in-group member rather than an out-group member (Sturmer, Snyder & Omoto, 2005). Children were better able to understand and respond empathically to friends than to acquaintances (Costin & Jones, 1992). Cialdini, Brown, Lewis, Luce and Neuberg (1997) identified that relationship closeness had a significant impact on empathic concern and oneness, and that these variables would in turn predict helping. Despite the contrary, Batson, Chang, Orr and Rowland (2002) reported that feeling empathy for a member of a stigmatized group may motivate an individual to help that group. Affective perspective-taking elicited greater empathic arousal in the helper and lead those individuals in the affective perspective-taking group to offer more help than those in a cognitive-perspective taking group (Oswald, 1996). Attachment style has been shown to be related to the ability to experience empathy and engage in helpful behaviours (Wayment, 2006). The avoidant attachment style has been negatively associated with willingness to volunteer, and while individuals with an anxious
attachment reported they would volunteer it would be for selfish or egoistic reasons (Gillith, Shaver, & Mikulincer, 2005; Erez, Mikulincer, van Ijzendoorn, & Kroonenberg, 2008).

**Perceived Empathic Self-Efficacy**

It has been found that helpful people are more self-assured and confident in their abilities (Penner & Fritzche, 1993), moreover self-efficacy beliefs have been shown to play an important role in producing helpful behaviour, more specifically affective and interpersonal self-efficacy beliefs are important determinants in sustaining and promoting an individual’s prosocial behavioural tendencies (Caprara 2002; as cited in Caprara, Alessandri, Di Giunta, Panerai, & Eisenberg, 2009). Perceived Empathic self-efficacy may be defined as a belief in one’s own ability to sense another person’s feelings, to experience emotions from their point of view and to respond empathically to their distress or misfortune and thus confidence in one’s own ability to empathize is crucial in the generation of prosocial actions (Caprara et al., 2009). The ability to control ones emotions has been associated with prosocial tendencies (Lopes, Salovey, Cote, Beers & Petty, 2005). Empathic self-efficacy beliefs are relatively strong predictors of an individual’s tendencies to behave prosocially (Caprara, Alessandri & Eisenberg, 2012). Self-efficacy and empathy have been correlated with helpfulness (Penner, Fritzscbe, Craiger & Freifeld, 1995).

The Perceived Empathic Self-Efficacy scale (Bandura et al., Caprara et al., 2001; as cited in Di Giunta, Eisenberg, Kupfer, Steca, Tramontano & Caprara, 2010) has been applied longitudinally (Caprara et al., 2009), and to a diverse sample of Italian, American and Bolivian participants (Di Giunta et al., 2010); and has been shown to predict prosociality (Caprara et al., 2012). However, the authors only used a 12-item self-report scale to correlate prosociality and this measure has not been applied to volunteers who actively engage in
prosocial behaviour but to samples of college students in each of the aforementioned countries which is not representative of the general population.

**Prosocial Personality**

While empathy is a well-established contributing factor in helpful behaviour and in turn volunteering, researchers have tried to identify specific personality traits that may predict how likely a person is to engage in volunteering activities. Volunteers have been found to score significantly higher on the personality trait agreeableness than non-volunteers (Paterson, Reniers & Vollm, 2009) and it has shown to have a significant direct effect on volunteering (Carlo, Okun, Knight & Guzman, 2005). Extraversion has been shown to predict volunteering (Kosek, 1995; Burke & Hall, 1986). However, in the case of helpline volunteers there was no significant difference on scores of extraversion when compared with non-volunteers. Carlo, Okun, Knight and Guzman (2005) posit that their findings show no support for the pathway in which extraversion and prosocial value motivation to volunteer will predict volunteering. Research linking personality traits and volunteering is relatively modest and statistically insignificant (Omoto & Snyder, 1995). However, the Prosocial Personality Battery (Penner et al., 1995) provides evidence for a prosocial personality and that a prosocial personality may in fact lead people to seek out volunteer opportunities (Penner, 2002 as cited in DuBois & Karcher, 2005).

Penner et al., (1995) devised the Prosocial Personality Battery (PSB) to assess the personality variables involved in helpful behaviour. Volunteers tend to score highly on both of its dimensions: helpfulness and other-orientated empathy. Graziano & Eisenberg (1997) describe altruism as an ability to enact helping actions and an ‘other-orientation’. Helpfulness is the behavioural aspect of helping and has been significantly correlated with a sense of self-efficacy (Penner & Menon, 1993; Poindexter, 1994; Midili, 1994 as cited by Penner et al.,
1995). Those scoring highly on this factor report a history of helpful behaviour and are unlikely to experience personal distress when another person is in trouble. Helpfulness has also been significantly correlated with sympathetic concern and positive affect (Penner et al., 1995). Helpfulness has been shown to predict prosocial behaviour (Penner et al., 1995).

The other-orientated empathy dimension of the PSB has been highly correlated with sympathetic concern (Penner et al., 1995) and agreeableness (Alessandri et al., 2010); and is more related to planned helping (Dovidio, 2006, p. 235). Those who score highly on this factor will report more sympathy and concern someone in trouble and will estimate the cost of helping another as lower (Carlo, Eisenberg, Troyer, Switzer & Spear, 1991; Penner et al., 1995; as cited in Dovidio, 2006, p.234). Other-orientated empathy has been significantly correlated with social desirability therefore persons who score highly on this factor may desire the approval of others and have a positivistic biased view of who they are (Paulhus, 1989 as cited in Penner et al., 1995).

The PSB has previously only been applied predominantly to undergraduate university students, which isn’t representative of the overall population, and in the field of volunteerism application has been limited. The PSB was previously applied in four studies, two of those involved individuals volunteering in a formal capacity, i.e. with an organisation (Penner et al., 1995; Penner, Finkelstein & Brannick, 2005) and each involved a small sample of volunteers from a single organisation; one involving a sample of volunteers of a homeless shelter and the other a sample of hospice volunteers, the PSB has also been applied in two studies to informal volunteering (Penner & Finkelstein, 1998; Finkelstein & Brannick, 2007). All application of the PSB has been in America and those correlating prosocial personality variables with volunteering did not involve a comparative element with non-volunteers or those who no longer volunteer.
**Principle of Care**

Batson (1987) postulated that when a person witnesses another person in distress they will help out of experiencing empathic arousal. However, Wilhelm & Bekkers (2010) posit that sometimes people are not empathically aroused but they help another nonetheless and that this is due to an internalized value that one should help those in need. The authors named this moral principle the principle of care and posit that both empathy and the principle of care work together in the production of helping behaviour. Hoffman (2000) interpreted this empathy-care relationship in his moral development theory as care being a “natural extension of empathic distress” (Hoffman, 2000, p. 255). Support for this theory is found in Batson, Turk, Shaw & Klein’s (1995) manipulation of empathic responses and values of another’s welfare, it was shown that once an individual experienced empathy for someone in need there was an increase on the valuing of that person in needs welfare and this valuing remained stable even after empathy had decreased. Much of the emphasis on helpful behaviour has been focused on the empathy-helping relationship and so this internalized value is one that has only been reached in the research indirectly or confounded with another construct (Wilhelm & Bekkers, 2010). Values particularly those pertaining to helping others in need have been strongly associated with helping behaviour (Clary, Snyder & Stukas, 1996; Midlarsky, Kahana, Corley, Nemeroff & Schonbar, 1999; Clary & Snyder, 1999; Smith, 2003). Role identity has been shown to determine helping behaviour (Piliavin & Callero, 1991, Finkelstein & Penner, 2004; Penner et al., 2005); this may provide indirect evidence of the relationship between principle of care and helping behaviour as role identity derive from personal norms. Personal norms are feelings of moral obligation that affect choices whether to engage in an action or not (Schwartz & Howard, 1984 as cited in Wilhelm & Bekkers, 2010) and these originate from higher level moral values. Other orientated empathy has been correlated with sympathetic concern (Penner et al., 1999) the principle of care is defined as
the moral principle behind acting out of concern for another in need. Other-orientated empathy is a construct which Wilhelm & Bekkers (2010) pertain combines dispositional empathic concern and taps into the principle of care but the care-helping relationship cannot be identified as separate from the empathy-helping relationship. However, Penner et al., (1999) postulate that other-orientated empathy is unrelated to actual helping behaviours. Wilhelm & Bekkers (2010) posit that the empathy-helping relationship is weakened once principle of care is partialled out and that the principle of care is more directly correlated with helping behaviour than empathic concern. Their findings, while they may show support for an empathy-helping relationship, once the principle of care is taken out of the equation empathy is only directly correlated with spontaneous helping.

Wilhelm & Bekkers (2010) measure of principle of care is based on items from the Altruistic values scale (AVS, Smith, 2003). The authors posit that it is more effective at measuring the principle of care than the similar Eisenberg et al., Care Orientation (2002, as cited in Wilhelm & Bekkers, 2010) as unlike the Care Orientation items, the principle of care items refer explicitly to the less fortunate other instead of the help-giver making a decision. They applied their measure to a large nationally representative U.S. sample obtained from the results of a survey from the National Opinion Research Centre in Chicago and relied on participants’ accounts of their own helpful behaviours in the previous twelve months. It has not been explicitly applied to a specific sample such as volunteers who actively engage in helping behaviour and they did not control for prosocial personality variables.

**The Present Research**

The purpose of this study is to investigate the relationships of and between prosocial personality variables, perceived empathic self-efficacy and the principle of care with volunteer behaviour. The proposed research aims to better understand the principle of care as
it is a relatively new concept in the study of helpful behaviour (Batson, 1994; Hoffman, 2000; as cited by Bekkers & Wilhelm, 2010), its relationship to the prosocial personality dimension other-orientated empathy and how it affects an individual’s engagement in helpful behaviour by applying it to a sample of both volunteers and non-volunteers. Principle of care suggests evidence for a care-helping relationship; the current research intends to explore differences on scores of principle of care between volunteers, non-volunteers and those who used to volunteer to further understand this relationship. Prosocial personality variables will be accounted for by use of the PSB. This research also aims to investigate the relationship of perceived empathic self-efficacy to helpfulness as a means to better understand the role an individual’s beliefs in their own empathic capabilities plays in helpful behaviour. Self-efficacy and empathy have previously been correlated with helpfulness (Penner et al., 1999) and perceived empathic self-efficacy has shown to be predictive of prosocial behaviour (Caprara et al., 2009).

The current research aims to address the limitations outlined in the previous research by use of a sample that includes volunteers from more than one setting, individuals who no longer volunteer and non-volunteers; investigating the relationship between the principle of care and prosocial personality variables and applying a prosociality scale of 56 items to perceived empathic self-efficacy. The benefits of the proposed research is that it may lead to a better understanding of and to further research in what determines the helpful behaviour volunteers actively engage in.

The current research proposes that a) there will be a statistically significant difference in scores of principle of care among volunteers, ex-volunteers and non-volunteers; b) there will be a statistically significant relationship between helpfulness and perceived empathic self-efficacy and c) there will be a statistically significant relationship between other-orientated empathy and principle of care.
Chapter 2: METHOD

Participants

The sampling method in the current study consisted of two elements: that of convenience and snowball sampling. The convenience sample aspect involved distribution of hard copy questionnaire booklets to the volunteers of two charitable organisations in Dublin: a children’s helpline and a charity shop, and to the students of a Psychology class in an urban college. A snowball sampling method was then employed by uploading the questionnaire booklet to Google.docs, the link to the survey was sent on to all members of the researcher’s friend list on Facebook inviting them to participate. Some of the participants then forwarded the survey onto their own friend list inviting them too to take part.

One hundred and forty three participants in total were involved in the current research, of those 142 of the participants included their gender with 69% (N=98) female and 31% (N=44) were male. Participants ages ranged from 19 years of age to 68 and the mean age was 32.45 years old (SD= 11.98). Participants over the age of eighteen were specifically chosen due to ethical considerations when dealing with minors, and most voluntary organizations only recruit volunteers over the age of eighteen. Participants were asked to define their nationality from a list of three options: Irish, EU citizen or Other; the nationalities of the 143 participants were as follows: 122 were Irish, 11 reported themselves as EU Citizens and 10 of those were recorded as Other.

The participants were divided into three groups: current volunteers, ex-volunteers, and non-volunteers. The current volunteer group consisted of 61 participants and were obtained from various charitable organizations in Ireland including those aforementioned in the convenience sample. There were 40 participants whom reported to have volunteered in the past for a charitable organization and were included if they had reported to have volunteered for a minimum of two months, while there were 42 participants in the non-volunteer group,
most of which were obtained through the online survey and in part through the application to psychology students in an urban third-level college.

![Bar chart showing gender breakdown for voluntary status]

Figure 1: Gender Breakdown for Voluntary Status.

**Design**

The research design in the present research was that of a mixed one, consisting of a cross-sectional element and a correlational element. The cross-sectional aspect involved was employed to examine the differences on scores of the variable principle of care between the groups: current volunteers, ex-volunteers and non-volunteers. The demographic sheet included a question asking the participant if they were currently volunteering with a charitable organization and if not, had they ever done so. Groups were then assigned according to their answer on this question, if the participant reported they were a volunteer at present they were assigned to the current volunteer group, if they were not a volunteer at present but had volunteered at some time in the past for a period of two months or more, which is generally the minimum commitment organizations will ask of a volunteer, they
would then be placed into the ex-volunteer group. If the participant reported to have never been involved in any voluntary work they were then placed into the non-volunteer group. The independent variables were the current volunteer group, the ex-volunteer group and the non-volunteer group; and the dependant variable was principle of care.

The correlational element was applied to investigate the relationships within-subjects between a) the variables perceived empathic self-efficacy and helpfulness; and b) the variables principle of care and other-orientated empathy. In the case of a) the predictor variable was perceived empathic self-efficacy and the criterion variable was helpfulness; and for b) the predictor variable was the variable principle of care and the criterion variable was other-orientated empathy.

For further analysis, some of the predictor and criterion variables changed. The predictor variable perceived empathic self-efficacy became a dependant variable in determining differences on scores of the variable for voluntary status groups. The criterion variables helpfulness and other-orientated empathy became dependant variables too in determining differences of scores of the variables between voluntary status defined groups. The variable other-orientated empathy also took a predictor role in a Spearman’s rho correlation with perceived empathic self-efficacy and helpfulness as its criterions.

**Materials**

The materials used in the current research was a self-report questionnaire booklet including a demographic questionnaire, the Prosocial Personality Battery (PSB; Penner, et al., 1995), three items from the Altruistic Values Scale (AVS; Smith 2003, as cited in Bekkers & Wilhelm, 2010) and the Perceived Empathic Self-Efficacy scale (PESE; Bandura et al., 2003, Caprara et al., 2001, as cited by Di Giunta, et al., 2010). The demographic questionnaire consisted of questions addressing age, sex and nationality of participant; and whether they
were currently volunteering for a charitable organization and or if they had ever volunteered for a charitable organization. The questionnaire also included a debriefing sheet consisting of a list of helplines that might be beneficial.

The Prosocial Personality Battery (PSB; Penner et al., 1995) is a 56-item standardized questionnaire that assesses the two dimensions of the prosocial personality: helpfulness, the behavioural aspect of prosociality, and other orientated empathy, the thoughts and feelings facet of the prosocial personality; as defined by Penner et al., (1995). The measure includes items that refer to the participants empathic concerns such as: “I often have tender, concerned feelings for people less fortunate than me”, items concerning altruistic behaviours the individual may have engaged in: “I have offered to help a handicapped or elderly stranger across a street” and statements relating to social responsibility: “You can't blame basically good people who are forced by their environment to be inconsiderate of others”. Participants are asked to rate statements on a five-point scale of how much they agree or disagree, e.g. where 1= strongly disagree and 5=strongly agree for items 1 to 42; while for items 43 to 56 participants are asked to rate how often they engage in the behaviours described on a 5-point scale where 1= Never and 5= Very Often. Sixteen items were then recoded and the relevant sections were computed into two scale variables, other-orientated empathy and helpfulness, giving a single score for each. The alpha coefficients for the two factors other orientated empathy and helpfulness were .77 and .85 respectively (Penner et al., 1995, p. 8).

The Principle of Care (Wilhelm & Bekkers, 2010) is a measure derived from the Altruistic Values Scale (AVS; Smith, 2003; as cited in Wilhelm & Bekkers, 2010) and contains three of the items from the scale. Wilhelm & Bekkers (2010) posit that this three-item measure will assess the respondent’s adherence to the moral principle that one should help those in need. The items are follows: “people should be willing to help others who are less fortunate”; “personally assisting people in trouble is very important to me”; and ““these
days people need to look after themselves and not overly worry about others”. The respondent is asked to rate his/her agreement with the statements on a 5-point scale where 1= strongly agree and 5= strongly disagree. The scores of the three items were combined to give a total score for principle of care, on a scale range of 3 to 15. The alpha coefficient of the three item principle of care is .54 (Wilhelm & Bekkers, 2010, p.11).

The Perceived Empathic Self-Efficacy scale (PESE; Bandura et al., 2003, Caprara et al., 2001; as cited by Di Giunta et al., 2010) is a six item measure that gives an overall score variable for Perceived Empathic Self Efficacy. The six-item scale was chosen instead of the original twelve item scale for the current research as it is a reliable measure for use in surveys with reduced space (Di Giunta et al., 2010). The respondent is asked how well they can recognize emotion related situations such as “How well can you recognize whether a person is annoyed with you” and to rate their answer on a 5-point scale where 1= cannot do well at all and 5= can do very well. Ratings of each of the six items were combined to give a total score for perceived empathic self-efficacy. The cronbach’s alpha coefficient for the PESE is .79.

Procedure

Once permission was granted by the Ethics Committee in Dublin Business School, a notice was placed on the volunteer noticeboard in a children’s helpline and a charity shop. The notice explained that the research aims to explore the relationship between prosocial personality traits and helping behaviour; and invited volunteers from each of the organizations to take part. The questionnaire booklets, including a debriefing sheet explaining the true nature of the study, were then consequently administered to those volunteers who wished to participate. Forty five questionnaires were administered to volunteers from the helpline and ten to the charity shop volunteers. The participants were informed of the
anonymous nature of the research and their right to withdraw at any time. After fifteen minutes, the questionnaires were collected, each given an identification number and stored in a locked filing cabinet. The questionnaire, including a cover letter and debriefing sheet, was uploaded to an online survey site, Google.docs, and a link was then sent to all of the researchers’ friends on Facebook. Sixty participants’ responses were recorded in this way. The questionnaire was then administered to twenty eight Psychology students in an urban third level college; who were, like the volunteer sample, informed the research aim was to explore the relationship between prosocial personality and helping behaviour. The participants were given fifteen minutes to fill out in questionnaires and they were then collected, given an identification number and stored in a locked filing cabinet.
Chapter 3: RESULTS

Table 1: Participants gender and nationality

<table>
<thead>
<tr>
<th>Gender</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>44</td>
<td>31</td>
</tr>
<tr>
<td>Female</td>
<td>98</td>
<td>69</td>
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Nationality

<table>
<thead>
<tr>
<th>Nationality</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Irish</td>
<td>122</td>
<td>85.3</td>
</tr>
<tr>
<td>EU Citizen</td>
<td>11</td>
<td>7.7</td>
</tr>
<tr>
<td>Other</td>
<td>10</td>
<td>7.0</td>
</tr>
</tbody>
</table>

Frequency tables were conducted for gender and voluntary work status; the figures are represented in table 1. Of the 143 participants, 142 reported their gender. 31% (N=44) were male and 69% (N=98) were female. 85% (N=122) of the participants were Irish, 7.7% were EU citizens and 7% reported their nationality as other. The ages of the 143 participants ranged from 19 to 68 years of age. The age range was 49, the mode was 21 and the median was 28. The mean age of participants was 32.45 (SD=11.98).

Table 2: Means and standard deviations of the variables

<table>
<thead>
<tr>
<th>Variable</th>
<th>M</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helpfulness</td>
<td>55.19</td>
<td>9.26</td>
</tr>
<tr>
<td>Other-Orientated Empathy</td>
<td>137.46</td>
<td>14.44</td>
</tr>
<tr>
<td>Principle of Care</td>
<td>6.75</td>
<td>2.04</td>
</tr>
<tr>
<td>Perceived Empathic Self-Efficacy</td>
<td>24.04</td>
<td>3.22</td>
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</tbody>
</table>
Mean and standard deviations for each of the variables: helpfulness, other-orientated empathy, principle of care and perceived empathic self-efficacy are shown in table 2. The variable other-orientated empathy had a mean of 137.46 (SD= 14.44), helpfulness a mean of 55.19 (SD = 9.26), for perceived empathic self-efficacy the mean was 24.04 (SD = 3.22) and for principle of care the mean was 6.75 (SD = 2.04). Helpfulness had a mean of 56.37 (SD = 8.76) for the volunteer group, 57.11 (SD = 10.10) for the ex-volunteer group and 51.63 (SD = 8.32) for the never volunteered group. Perceived empathic self-efficacy scores for the volunteer group had a mean of 24.73 (SD = 3.19), for the ex-volunteer group the mean was 23.55 (SD = 2.81) and the mean for the never volunteered group was 23.53 (SD = 3.49). Principle of care scores for the volunteer group had a mean rank of 65.47, for the ex-volunteer group the mean rank was 73.15 and for the never volunteered group the mean rank was 80.39. For the variable other-orientated empathy the volunteer group had a mean rank of 76.36, the ex-volunteer group a mean rank of 53.46 and the never volunteered group a mean rank of 50.25. Normality testing was carried out for each of the variables; helpfulness and perceived empathic self-efficacy were shown to have a normal distribution while principle of care was negatively skewed (Skewness = .99, Std. Error Skewness = .20) as was the variable other-orientated empathy (Skewness = -.505, Std. Error Skewness = .217).

The mean scores for helpfulness was 55.19 (SD= 9.26) and for perceived empathic self-efficacy was 24.04 (SD= 3.22). A Pearson correlation found that there was a statistically significant weak positive relationship between helpfulness and perceived empathic self-efficacy (r (136) = .26, p < .01), as shown in table 3. Accordingly, when helpfulness increases so too will perceived empathic self-efficacy.

A Spearman’s rho correlation was conducted to investigate the relationship between other-orientated empathy (Mean = 137.46, SD= 14.43) and principle of care (Mean = 6.75, SD= 2.04), it was found that there was a statistically significant weak negative relationship
between the two variables (rho (124) = -.33, p < .01), see table 3. Therefore there is an inverse relationship between other-orientated empathy and principle of care.

A Kruskal-wallis test was employed to explore the differences on scores of principle of care between the three voluntary status groups, it was found that of the three groups, current volunteers, ex- volunteers and non-volunteers did not differ significantly on scores of principle of care ($x^2(2) = 3.36$, two-tailed p = .186).

Further analysis was conducted on the data, a one way ANOVA was used to test for differences on scores of helpfulness among the three voluntary status groups. Helpfulness scores differed significantly across the volunteer, ex-volunteer and never volunteered groups F (2, 134) = 4.47, p = .01. Post hoc analysis showed that the volunteer group (Mean = 56.37, SD = 8.76) had significantly higher helpfulness scores than those in the never volunteered group (Mean = 51.63, SD = 9.26, p = .03). It was also found that the ex-volunteer group (Mean = 57.11, SD = 10.10) reported significantly higher helpfulness scores than the never volunteered group (Mean = 51.63, SD = 9.26, p = .02).

A Kruskal-wallis test was conducted to explore differences between the three voluntary status groups on scores of other-orientated empathy (Mean = 137.46, SD = 14.44). It was found that scores of other-orientated empathy did differ significantly between the groups, volunteers, ex-volunteers and those who had never-volunteered ($x^2(2) = 14.38$, p = .001, two-tailed). A Mann Whitney U-test found that participants in the volunteer group (Mean rank = 53.15) scored significantly higher on other-orientated empathy than those in the never-volunteered group (Mean rank = 34.03) ($z = -3.40$, p = .001). A second Mann Whitney U-test found that participants of the volunteer group (Mean rank = 50.71) also scored significantly higher than those who used to volunteer (Mean rank = 34.63) on scores of other-orientated empathy ($z = -2.87$, p=.004). Interestingly, ex-volunteers (Mean rank =
36.32) scores for other-orientated empathy did not differ significantly from those who had never volunteered (Mean rank = 34.72) (z = -.32, p = .742).

A spearman’s rho correlation was used to test the association between helpfulness (Mean = 55.19, SD = 9.26) and other-orientated empathy (Mean = 137.46, SD = 14.44), see table 3. It was found that there is a weak positive significant relationship between the two variables (rho (121) = .24, p < .01. Hence there is a direct association between helpfulness and other-orientated empathy.

The mean for helpfulness was 55.19 (SD = 9.26) and for age was 32.45 (SD= 11.98). A spearman’s rho correlation coefficient found a statistically significant weak positive relationship between age and helpfulness (rho (134) = .30, p < .01), as illustrated in table 3. Consequently, as age increases helpfulness will too.

A spearman’s rho test was used to investigate the association between principle of care (Mean = 6.75, SD = 2.04) and perceived empathic self-efficacy (Mean = 24.04, SD = 3.22). It was found that there was a statistically significant weak negative relationship between principle of care and perceived empathic self-efficacy (rho (142) = -.23, p < .01), as shown in table 3. Thus when principle of care increases perceived empathic self-efficacy will decrease due to the inverse nature of the association.
Table 3: Correlation table

<table>
<thead>
<tr>
<th></th>
<th>Principle of Care</th>
<th>Other-orientated Empathy</th>
<th>Helpfulness</th>
<th>Perceived Empathic Self-efficacy</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Principle of care</td>
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<tr>
<td>Other-orientated</td>
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<td>empathy</td>
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<tr>
<td>Helpfulness</td>
<td>-.15</td>
<td>.24**</td>
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<tr>
<td>Perceived</td>
<td>-.23**</td>
<td>.41**</td>
<td>.26**</td>
<td></td>
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</tr>
</tbody>
</table>

* p significant at .05 level.

** p significant at .01 level.

A spearman’s rho correlation coefficient found there was no statically significant relationship between helpfulness (Mean = 55.19, SD = 9.26) and principle of care (Mean = 6.75, SD = 2.04), (r (137) = -.158, p = .06). A spearman’s rho was used to test the association between age (Mean = 32.45, SD = 11.98) and principle of care (Mean = 6.75, SD = 2.04), there was no significant relationship between the two variables (rho (139) = .02, p = .77).

There was no significant association between age (Mean = 32.45, SD = 11.98) and perceived empathic self-efficacy ((Mean = 24.04, SD = 3.22) (rho (138) = -.04, p = .59).
Nor was there a significant correlation for age (Mean = 32.45, SD= 11.98) and other-orientated empathy (Mean = 137.46, SD = 14.44) (rho (120) = .01, p = .862).

A one way ANOVA was employed to investigate differences on scores of perceived empathic self-efficacy between the three voluntary groups. It was found that there was no significant differences between volunteers (Mean = 24.73, SD = 3.19), ex-volunteers (Mean = 23.55, SD = 2.81) and those who had never volunteered (Mean = 23.52, SD = 3.49) F (2, 139) = 2.44, p = .09.

A cross tabulation was run for gender and voluntary status and it was found that there was no significant association between gender and whether the respondent had volunteered or not $\chi^2(2) = 2.79$, p = .248.
Chapter 4: DISCUSSION

Hypotheses

The aim of the present research was to apply relatively new concepts in the field of helping behaviour specifically to volunteers and to examine their relations to one another. The hypotheses were to explore differences on scores of principle of care among groups categorized by their voluntary status, to investigate relationships between helpfulness and perceived empathic self-efficacy; and between other-orientated empathy and principle of care.

It was hypothesized that volunteers and ex-volunteers would differ significantly from non-volunteers on scores of principle of care as previous research found evidence for a care-helping relationship and that care was significantly correlated with many types of helping behaviours (Wilhelm & Bekkers, 2010). However, no significant difference was found between the three groups on scores of the principle of care. Therefore the null hypothesis is accepted. This may have been due to the low reliability of the principle of care measure (.54) however the authors pertain that as the measure contains only three items, a cronbach’s alpha coefficient of .54 is sufficient as the items have an average intercorrelation of $r = .31$. The previous study (Wilhelm & Bekkers, 2010) used a 12-item prosocial tendencies measure and did not control for prosocial personality variables, the present research included a 56-item measuring both the behavioural and affective dimension of a prosocial personality perhaps the significance found in the previous study was related to the role of prosocial personality factors in helping behaviour (Penner et al., 1995). The problems may have lied in the distribution of the sample, the groups’ breakdown were as follows volunteers = 61 participants, ex-volunteers = 40 and non-volunteers = 42. The previous research applied the principle of care to a large nationally representative sample and found high correlations
between all helpful behaviours including planned instances, perhaps then principle of care is a universal moral principle that exists for all but it is other associated factors such as self-efficacy beliefs (Penner et al., 1995), empathy (Musick & Wilson, 2008) and an other-orientation (Graziano & Eisenberg, 1997) that engender planned prosocial behaviour such as volunteering. As this is the second study specifically examining the principle of care, a broader research base would have to exist before any concrete conclusions can be drawn on the specific role of principle of care in helping behaviour. Future studies should consider devising a regression model for principle of care to determine whether its role in helping behaviour is a predictive one.

It was hypothesized that other-orientated empathy and the principle of care would have a significant association, other-orientated has previously been correlated with sympathetic concern (Penner et al., 1995), the principle of care has been defined as the moral principle behind acting out of concern for another in need. Other-orientated empathy is more related to planful helping and those scoring highly on this factor will report the cost of helping as much less (Dovidio, 2006, p. 235). The findings of the present research showed a moderate but significant negative relationship between other-orientated empathy and principle of care (rho = -.33). This is conclusive with Wilhelm & Bekkers (2010) theory that there are certain times when an individual helps but doesn’t feel empathic arousal. This is also conclusive with the values motivation of the VFI (Clary & Snyder, 1999) which pertains to helping out of a moral position that one should. These findings may present a new direction to the two dimensional debate on motivation (Cialdini et al., 1982; Batson, 1987) and adds support for a multi-motivational approach (Clary & Snyder, 1999; Esmond & Dunlop, 2004). Wilhelm & Bekkers (2010) posit that other-orientated empathy taps into the principle of care and empathic concern, however the findings in the present study show that other-orientated empathy is negatively associated with principle of care. This is supportive of
principle of care as a moral position on helping others as other-orientated empathy is related to the affective aspect of prosociality (Penner et al., 1995), perhaps then principle of care is related to a more obligated helping that is not truly prosocial in nature. However, as the research on the relationship of principle of care to helping is relatively minute (Wilhelm & Bekkers, 2010); further analysis on its relationship to prosociality must be conducted before drawing any conclusions of the nature of their relationship is possible.

It was hypothesized that there would be a significant relationship between helpfulness and perceived empathic self-efficacy, as self-efficacy beliefs and empathy have previously been correlated with helpfulness (Penner et al., 1995). Both variables have been shown to be predictive of helping behaviour (Caprara et al., 2012). It found there was a statistically significant positive relationship between helpfulness and perceived empathic self-efficacy \( r=.26 \) however while it was weak it was still significant. The results were supportive of previous research that showed relationships between self-efficacy beliefs and helping behaviour (Penner & Menon, 1993; Poindexter, 1994; Midili, 1994, as cited in Penner et al., 1995). Empathy has also been long established as a factor in helping behaviour (Batson, 1987). Di Giunta et al., (2010) previously correlated perceived empathic self-efficacy and prosocial tendencies in samples of college students, the present research included a larger measure for prosocial personality (12- vs. 56 -items) and applied it to a sample including present volunteers, ex-volunteers and non-volunteers, the results were supportive of Di Giunta et al (2010).

**Further Analysis**

As the aim of the research was to develop a better understanding of relatively new concepts in the field of helping behaviour and apply them specifically to volunteers from
more than one setting, further analysis was conducted on the data. A cross tabulation showed that there was no association between gender and voluntary status.

A one way ANOVA found that scores of helpfulness differed significantly across the three voluntary status groups; both the volunteer group and ex-volunteer group reported significantly higher scores of helpfulness than non-volunteers. This is supportive of previous research as volunteers tended to score highly on helpfulness (Penner et al., 1995) and helpfulness has been highly correlated with helpful behaviours (Penner et al., 1995).

A Kruskal-wallis found that volunteers, ex-volunteers and non-volunteers differed significantly on scores of other-orientated empathy; further analysis showed more specifically volunteers had higher scores of other-orientated empathy than both ex-volunteers and non-volunteers. Previously only volunteers and non-volunteers had been compared on scores (Penner et al., 1995), these findings are hence very interesting and can be seen to be supportive of the habitus theory of volunteer work (Janoski et al., 1998) in the sense that if we consider that while the individual is actively in the habit of volunteering they are using social and interpersonal skills to support and help others but when they are no longer in the habit of volunteering they are thus no longer using these skills and show results akin to that of those who had never volunteered.

To better understand the relationship between the behavioural and affective dimensions of the prosocial personality a spearman’s rho was conducted for helpfulness and other-orientated empathy. Results showed a weak but positive significant relationship which is supportive of previous research (Penner et al., 1995). Interestingly, age was then found to be significantly related to helpfulness (rho=.30) but not to any of the other variables.

Principle of care was correlated with perceived empathic self-efficacy and a significant negative relationship was found (rho= -.23), this is particularly interesting as
perceived empathic self-efficacy has previously been shown to be predictive of helpful behaviour (Caprara et al., 2012) and Wilhelm & Bekkers (2010) posit that principle of care is related to helping behaviour. However, principle of care was not significantly correlated with helpfulness; this does not speak to the question of the care-helping relationship that was outlined in Wilhelm & Bekkers (2010). Further research must be done before one can draw any conclusions about the relation of principle of care to helping.

Perceived empathic-self efficacy was significantly correlated to other-orientated empathy, the affective dimension of prosocial behaviour. These findings are conclusive with previous research, Caprara et al., (2009) posit that empathic self-efficacy plays a crucial role in producing prosocial tendencies.

Further, a one way ANOVA found no difference between volunteers, ex-volunteers and non-volunteers on perceived empathic self-efficacy; this is unsupportive of the hypothesis that self-efficacy beliefs play a predictive role in producing helpful behaviour (Caprara et al., 2009).

**Limitations**

As with most research designs, there were limitations in the present study. One of the limitations was that of the sample, of the 143 participants 98 were female and just 44 were male. In the two main voluntary organisations involved in the study there were more female than male volunteers which may have been due to the nature of the work, i.e. selling clothes and speaking to children in a supportive manner. However, a cross tabulation found no significant association between gender and voluntary status in the sample. The group distribution for the comparative element was unequal, 61 volunteers, 40 ex-volunteers and 42 non-volunteers.
Secondly was the way in which the data was collected. Distributing questionnaires in the voluntary organisations and collecting them as they were completed at a later date meant there was no researcher presence and thus could not control for extraneous factors such as participants conferring over how to answer or the amount of time respondents spent completing it. The online aspect of collecting data yielded 60 participants however distributing data in this way means there may be extraneous variables the research was unable to control for.

The length of the questionnaire booklet was also a limitation for the research as much of the collected data has missing answers and some that were collected were unusable as they were unfinished. Therefore, participants may have found the survey too long and lost interest. The PSB contains 56-items alone, along with the 6-items for perceived empathic self-efficacy and 3-items for principle of care. The way the questions were phrased may have been an issue for those that reported they were not Irish and thus English may have not been their first language.

With the amount of testing done on the data with the hypotheses and also further analysis, there is a chance that some of the significant results obtained are due to percentage error that comes with running many tests. Replication would need to be done on the significant results yielded from the further analysis to clarify that they are not due to standard error.

**Strengths**

The research design, while it had limitations of its own, addressed the limitations found in previous research. New concepts in the field of helping behaviour were applied explicitly to volunteers in Ireland and the differences on the scores of these were examined among participants according to their reported voluntary status i.e. volunteer, ex-volunteer
and non-volunteer. Through having a specific volunteer sample then a non-volunteer sample, it was made possible to include volunteers from multiple settings, as well as the two original organisations; such as fundraising, advocacy, homeless shelters and community support centres. This was the first study of its kind, to examine an empathy-care relationship with prosocial personality variables and perceived empathic self-efficacy in volunteers from multiple types of voluntary service. Significant results were obtained for two of the original hypotheses. The research design allowed for the principle of care and perceived empathic self-efficacy, both relatively new concepts to be correlated with prosocial personality dimensions. A significant relationship was found for helpfulness and perceived empathic research, which is supported by previous research (Penner et al., 1995; Caprara et al., 2012).

A significant negative relationship was found for principle of care and other-orientated empathy, this was not supportive of the previous research however as it is a very new concept in helping behaviour its true role is yet to be determined and it highlights a possible conclusion that there is a form of helping that is purely driven by moral obligation and has no association with prosocial values or tendencies. Further analysis found a significant relationship between age and helpfulness; and a significant difference was found on scores of other-orientated empathy, specifically volunteers were found to score higher on other-orientated empathy than both ex-volunteers and non-volunteers. Which draws the conclusion that perhaps the affective dimension of a prosocial personality is only significantly higher while one is actively utilising it; through the social and interpersonal supportive role as a volunteer and that it is not a stable state once service ceases.

**Future Implications**

The findings of the present study highlight the fact that there is much more to be done to investigate the principle of care and a ‘care-helping’ relationship. While the hypothesis that the principle of care will be associated with other-orientated empathy was found significant,
the relationship was a negative one which may be explained by the dispositional empathy that
the construct other-orientated empathy represents along with principle of care (Wilhelm &
Bekkers, 2010). Also, scores on the principle of care didn’t differ significantly for volunteers,
ex- and non-volunteers as hypothesized, which doesn’t answer to the question of a care-
helping relationship. Perhaps principle of care does not extend to the planned helpful
behaviours that volunteers engage in. However without a broader research foundation, it is
impossible to draw empirically founded conclusions. Recommendations for future research
would be to devise a regression model for the principal of care and helpful behaviours to
determine whether its role in the production of helping a predictive or a mediating one.

Perceived empathic self-efficacy also showed inconclusive results with previous
research, empathic self-efficacy beliefs were shown to play a predictive role in prosocial
behaviour (Caprara et al., 2012). While perceived empathic self-efficacy results positively
correlated with helpfulness, scores on the variable itself did not differ significantly between
volunteers, ex- and non-volunteers. However, this was the first time perceived empathic self-
efficacy has been explicitly been applied to volunteers in a comparative study and there may
have been extraneous variables interplay not controlled for, such as the Big Five personality
trait agreeableness that played a mediating role in perceived empathic-self efficacy and
prosociality in Caprara et al., (2009). It is important to note that agreeableness has been
significantly correlated with other-orientated empathy (Penner et al., 1995) and there was a
significant relationship found between perceived empathic self-efficacy and other-orientated
empathy. Future research with volunteers should control for the mediating role that traits
play in helping behaviour.
Conclusion

In conclusion, the present research yielded significant results in the form of the relationships between other-orientated empathy and principle of care; helpfulness and perceived empathic self-efficacy; perceived empathic self-efficacy and principle of care; perceived empathic self-efficacy and other orientated empathy; other-orientated empathy and helpfulness; and helpfulness and age. Significant differences were also found between volunteers and ex-volunteers on scores of other orientated empathy; and with volunteers and ex-volunteers scoring significantly higher on helpfulness than non-volunteers. These results are important for future research as they add to the present body of knowledge of determinants on planned prosocial behaviour. Some of the results on principle of care and perceived empathic self-efficacy were inconclusive with past research however conclusions were drawn as to how future research can address these findings especially as these concepts are new in the field of helpful behaviour.
REFERENCES


http://deepblue.lib.umich.edu/bitstream/handle/2027.42/45653/11206_2004_Article_415800.pdf?sequence=1


Appendix

Dear Sir/Madam,

My name is Lauren Thompson and I am conducting research in the Department of Psychology in Dublin Business School. The purpose of this research is to explore the relationship between prosocial personality traits and helping behaviour. This research is being conducted as part of my studies and will be submitted for examination.

You are invited to take part in this study and participation involves completing and submitting the attached anonymous survey. Participation is completely voluntary and so you are not obliged to take part.

Participation is anonymous and confidential. Therefore none of the answers can be traced to any one participant. For this reason, it will not be possible to withdraw from participation after the questionnaire has been collected.

The questionnaires will be securely stored and data from the questionnaires will be stored on a password protected computer.

**It is important that you understand that by completing and submitting the questionnaire that you are consenting to participate in the study.**

Should you require any further information about the research, please contact

Lauren Thompson;

Thank you for your time and participation in the research.
Part 1

Age: ____

Are you? Male [ ]

Female [ ]

Nationality: Irish [ ]

EU Citizen [ ]

Other [ ]

If other, please give details

_____________________________________________________________________

_____________________________________________________________________

Are you currently involved in any voluntary work with a charitable organization?

Yes [ ]

No [ ]

If yes, please give details:

_____________________________________________________________________

_____________________________________________________________________

If you answered no to the previous question please answer the following:

Have you ever volunteered with a charitable organization?

Yes [ ]

No [ ]

If yes, please give details (e.g. length of service, nature of work etc.):

_____________________________________________________________________

_____________________________________________________________________

_____________________________________________________________________
Part 2

Below are a number of statements that may or may not describe you, your feelings, or your behavior. Please read each statement carefully and write your answer in the space provided.

There are no right or wrong responses.

1  2  3  4  5
Strongly Disagree  Disagree  Uncertain  Agree  Strongly Agree

1. If a good friend of mine wanted to injure an enemy of theirs, it would be my duty to try to stop them. ____

2. I wouldn't feel that I had to do my part in a group project if everyone else was lazy. ____

3. When people are nasty to me, I feel very little responsibility to treat them well. ____

4. I would feel less bothered about leaving litter in a dirty park than in a clean one. ____

5. No matter what a person has done to us, there is no excuse for taking advantage of them. ____

6. You can't blame basically good people who are forced by their environment to be inconsiderate of others. ____

7. No matter how much people are provoked, they are always responsible for whatever they do. ____

8. Being upset or preoccupied does not excuse people for doing anything they would ordinarily avoid. ____

9. As long as business people do not break laws, they should feel free to do their business as they see fit. ____

10. Occasionally in life people find themselves in a situation in which they have absolutely no control over what they do to others. ____

11. I would feel obligated to do a favour for someone who needed it, even though they had not
shown gratitude for past favours. ____

12. With the pressure for grades and the widespread cheating in school nowadays, the individual
who cheats occasionally is not really as much at fault. ____

13. It doesn't make much sense to be very concerned about how we act when we are sick and
feeling miserable. ____

14. If I broke a machine through mishandling, I would feel less guilty if it was already
damaged
before I used it. ____

15. When you have a job to do, it is impossible to look out for everybody’s best interest. ____

16. I often have tender, concerned feelings for people less fortunate than me. ____

17. I sometimes find it difficult to see things from the "other person's" point of view. ____

18. Sometimes I don't feel very sorry for other people when they are having problems. ____

19. In emergency situations, I feel apprehensive and ill-at-ease. ____

20. I try to look at everybody's side of a disagreement before I make a decision. ____

21. When I see someone being taken advantage of, I feel kind of protective towards them.
____

22. I sometimes try to understand my friends better by imagining how things look from their
perspective. ____

23. Other people's misfortunes do not usually disturb me a great deal. ____

24. If I'm sure I'm right about something, I don't waste much time listening to other people's
arguments. ____

25. Being in a tense emotional situation scares me. ____

26. When I see someone being treated unfairly, I sometimes don’t feel very much
pity for them. ____

27. I am usually pretty effective in dealing with emergencies. ____

28. I am often quite touched by things that I see happen. ____
29. I believe that there are two sides to every question and try to look at them both. ____

30. I would describe myself as a pretty soft-hearted person. ____

31. I tend to lose control during emergencies. ____

32. When I'm upset at someone, I usually try to "put myself in their shoes" for a while. ____

33. When I see someone who badly needs help in an emergency, go to pieces. ____

34. Before criticizing somebody, I try to imagine how I would feel if I were in their place. ____

Below are a set of statements, which may or may not describe how you make decisions when you have to choose between two courses of action or alternatives when there is no clear right way or wrong way to act. Some examples of such situations are: being asked to lend something to a close friend who often forgets to return things; deciding whether you should keep something you have won for yourself or share it with a friend; and choosing between studying for an important exam and visiting a sick relative. Read each statement and write your answer on the space provided.

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<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
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</tbody>
</table>

*Strongly Disagree  Disagree  Uncertain  Agree  Strongly Agree*

35. My decisions are usually based on my concern for other people. ____

36. My decisions are usually based on what is the most fair and just way to act. ____

37. I choose alternatives that are intended to meet everybody's needs. ____

38. I choose a course of action that maximizes the help other people receive. ____

39. I choose a course of action that considers the rights of all people involved. ____

40. My decisions are usually based on concern for the welfare of others. ____

41. My decisions are usually based on my personal principles about what is fair and unfair. ____

42. I choose alternatives that minimize the negative consequences to other people. ____
Below are several different actions in which people sometimes engage. Read each of them and decide how frequently you have carried it out in the past. Use the scale presented below and write your answer in the space provided.

<table>
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<th>4</th>
<th>5</th>
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<tbody>
<tr>
<td></td>
<td>Never</td>
<td>Once</td>
<td>More than Once</td>
<td>Often</td>
<td>Very Often</td>
</tr>
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</table>

43. I have given directions to a stranger. ____
44. I have made change for a stranger. ____
45. I have given money to a stranger who needed it (or asked me for it). ____
46. I have donated goods or clothes to a charity. ____
47. I have done volunteer work for a charity. ____
48. I have helped carry a stranger's belongings (e.g., books, parcels, etc.). ____
49. I have delayed an elevator and held the door open for a stranger. ____
50. I have allowed someone to go ahead of me in a line (e.g., supermarket, copying machine, etc.) ____
51. I have given a stranger a lift in my car. ____
52. I have let a neighbour whom I didn't know too well borrow an item of some value (e.g., tools, a dish, etc.). ____
53. I have bought 'charity' Christmas cards deliberately because I knew it was for a good cause. ____
54. I have helped a classmate who I did not know that well with a homework assignment when my knowledge was greater than his or hers. ____
55. I have, before being asked, voluntarily looked after a neighbour's pets or children without being paid for it. ____
56. I have offered to help a handicapped or elderly stranger across a street. ____
Part 3

Please tell me how much you agree with the following statements, circle your answer after each according to the following scale:

1= Strongly Agree            4= Disagree
2= Agree                     5= Strongly Disagree
3= Neither Agree nor Disagree

1. People should be willing to help others who are less fortunate.
   1 2 3 4 5

2. These days people need to look after themselves and not overly worry about others.
   1 2 3 4 5

3. Personally assisting people in trouble is very important to me
   1 2 3 4 5
Part 4

How well can you:

1. Read your friends’ needs?

   1  2  3  4  5
   
   Not Well At All   Uncertain   Very Well

2. Recognize when someone wants comfort and emotional support, even if (s)he does not overtly exhibit it?

   1  2  3  4  5
   
   Not Well At All   Uncertain   Very Well

3. Recognize whether a person is annoyed with you?

   1  2  3  4  5
   
   Not Well At All   Uncertain   Very Well

4. Recognize when a person is inhibited by fear?

   1  2  3  4  5
   
   Not Well At All   Uncertain   Very Well

5. Recognize when a companion needs your help?

   1  2  3  4  5
   
   Not Well At All   Uncertain   Very Well

6. Recognize when a person is experiencing depression?

   1  2  3  4  5
   
   Not Well At All   Uncertain   Very Well
The title of this research is Prosocial Personality, Perceived Empathic Self-Efficacy and Principle of Care in Irish Volunteers. The purpose of the research is to better understand the role morals and personality plays in the many types of helping behaviour that volunteers engage in. If you have been affected by any of the issues raised in this study please make use of the following services:

_Samaritans_

No: 1850 60 90 90

Email: jo@samaritans.org

_Grow_

No: 1890 474 474

Email: info@grow.ie

Those of you who may be affiliated with the ISPCC may contact the carecall service, the number is available from your supervisors.

_Thank you for your participation._