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**Addressing Individualism-Collectivism in Fear
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Wen-Ying Liu

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**ADDRESSING INDIVIDUALISM-COLLECTIVISM IN FEAR APPEALS:
PROMOTING AIDS-PROTECTIVE BEHAVIORS AMONG UNDERGRADUATE
STUDENTS FROM THE UNITED STATES AND TAIWAN**

By

Wen-Ying Liu

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ABSTRACT

ADDRESSING INDIVIDUALISM-COLLECTIVISM IN FEAR APPEALS: PROMOTING AIDS-PROTECTIVE BEHAVIORS AMONG UNDERGRADUATE STUDENTS FROM THE UNITED STATES AND TAIWAN

By

Wen-Ying Liu

Fear appeal messages have proven to be an effective and persuasive communication device in the culture studied. However, most of the fear appeal research has been conducted with members of individualistic cultures where one places self needs and wants above group concerns. In contrast, little is known about how members from collectivist cultures, who place group needs and wants above self concern, react to fear appeal messages (or other persuasive strategies) in such cultures. The results of this study indicated that fear appeals should address cultural orientation (i.e., individualism versus collectivism orientation) to achieve maximum effectiveness. Thus, the individualist bias in persuasion research is addressed.

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Chapter 1

Introduction

Fear appeals typically threaten audiences with negative outcomes in an attempt to scare people into adopting the recommended behaviors. The focus of a threat in fear appeals usually is on the individual. That is, the threat normally contains some terrible consequences or harm, which will occur to those who do not practice the recommended behaviors. For instance, following is a popular fear appeal.

This is your brain

This is your brain on drugs

Any questions?

Drug users are shown that their brain will "fry like eggs" if they do not quit using drugs.

Fear appeals messages are generally found to be effective in motivating behavior change (i.e., Beck, 1984, Insko, Arkoff, & Insko, 1965; Stainback & Rogers, 1983) among populations studied (e.g., Sutton, 1982; Roger, 1983; Witte, 1992a). However, the populations studied in fear appeals research tend to be relatively homogenous populations from nations with individualist orientations (e.g., the United States, Great Britain, Australia, and Canada). Therefore, the goal of this study is to determine whether or not cultural orientations impact the effectiveness of fear appeals.

Fear Appeal and Cultural Orientation

The assumption in most fear appeal research has been that people are most persuaded when they are concerned for their own safety or health. This is a valid assumption for the individualist cultures where most fear appeal research has taken place. Specifically, four nations where most of the fear appeals research have been conducted reflect some of the most individualist cultures in the world (Hofstede, 1980). Therefore in nearly all of the published fear appeals studies, the threat has focused on individual outcomes or consequences. Only one study could be found where the threat focused on a referent other than the individual (Powell, 1965.) However, one may surmise that individual-targeted threats may be less effective than group targeted threats for members of collectivist cultures. For example, members of collectivist cultures may be more fearful and perceive greater harm when their group is threatened, than when they themselves are threatened. This is because 'in a collectivist culture a person's misbehavior or failure is a disgrace to the family, or even the entire clan. The same failure in an individualist society may, however, invite a shrug of 'tough luck' or at best a sympathetic comment" (Hui & Triandis, 1986, p.231).

Chinese and Americans are two cultures that would fall at opposite ends of the Individualism-Collectivism continuum. For example, Chinese, and other Asian people, are described as high on concerns for the group and low for the individual. They are also said to pay less attention to the pursuit of personal needs and rights such as freedom and democracy (Hsu, 1985). In contrast, Americans are usually found to be self independent of groups, believing they can stand and survive on their own (Hui, 1988). Chinese were closer in communication patterns to the collectivist end of the continuum, while Americans,

regardless of ethnicity, were closer to the end emphasizing self-importance. In a cross-national study, Hofstede (1980, 1983) observed that the United States, along with Great Britain and Australia, was one of the countries found to be most individualist, whereas Chinese from Taiwan, Hong Kong and Singapore were found to be among the most collectivist on the continuum. He described individualists, which most Americans tend to be, having a "preference for a loosely knit social framework in society wherein *individuals are supposed to take care of themselves*" (Italic added, 1983, p. 83). Its opposite, the Chinese, stands for a "preference for a tightly knit social framework in which *individuals can expect their relatives, clan, or other in-group to look after them....*" (Hofstede, 1983, p. 83). In addition, Hofstede showed that Chinese from Hong Kong, Singapore and Taiwan scored in the lower half of an individualism index indicating a more collectivist outlook, while the United States was among the most individualist. For example, Chinese in Hong Kong, Singapore and Taiwan scored 25, 20 and 17 respectively in Hofstede's 1983 cross country study, whereas the United States scored 91 in the test. To represent opposite ends of the Individualism-Collectivism continuum, therefore, Americans and Chinese/Taiwanese undergraduate students from a university in Taiwan from a university in Taiwan will participate in the study.

Overall, the collectivist-individualist literature suggests the following analysis. A collectivist origin implies that Chinese would perceive a greater threat to themselves when their group (e.g., relatives, clan or in-group) is threatened than when they themselves were threatened. On the other hand, Americans who tend to be individualist would feel more

fearful when they perceive a danger directed towards themselves. Overall, threats to the group would not be taken seriously for members of individualist cultures. Therefore, fear appeals placing threats on the group should induce more fear and produce subsequent belief, attitude, and behavior changes for members of collectivist cultures than fear appeals that target the individualist. In contrast, the American individualist should be less persuaded by fear appeals that threaten the group as compared to fear appeals that threaten the individualist. Thus, the purpose of this thesis is to test this hypothesis.

AIDS and HIV Prevention

A report from the World Health Organization (WHO) says, "During the past decade, the world has seen what appeared at first to be an illness largely confined to homosexual men and drug injectors in developed countries become a pandemic affecting millions of men, women, and children on all continents" (World Health Organization Report on AIDS, 1992, p.1). The complex biological structure of the HIV virus and its particular transmission channels make AIDS prevention and intervention practices a challenge to public health practitioners. Compared with the rate of cancer or other deaths (e.g., auto accident, heart disease), AIDS is not among one of the three leading causes (Center for Disease Control, 1995). However, it is estimated that by the year 2000, AIDS could be the first cause of death to the human race, if the treatment of the disease is still unknown. Despite the enormous funds going into AIDS research and developing preventive strategies, the problem continues to grow.

The infected population is not limited to homosexual males or intravenous drug users. Recently, the WHO report also indicated the number of heterosexual, non-drug users who were infected with HIV virus has increased steadily in the world. On the other hand, HIV transmission has leveled off in the United States with exceptions to two minority groups, Hispanic and African Americans. In fact, Hispanic and African Americans have been hit the most by the AIDS epidemic in the U.S., more than other Caucasians.

The staggering rise in AIDS infection is not unique to the developed countries. Although only a relatively small number of cases have been reported yearly, rapid spread in some areas of Asia and Southeast Asia is similar to the situation in Africa a decade ago. For example, WHO estimated annual adult HIV infections in Asia countries would be around 6 million in 1997 and over 1.2 billion at the beginning of the twenty-first century (WHO, 1992). The number of people infected with AIDS almost doubled within a three year span in Asia. That is, by the year 2000, there may be 1.2 billion Asian people who might die of AIDS.

However, effective strategies exist that can help to prevent the transmission of the virus. For example, sexual abstinence, long-term monogamy, consistent condom use with spermicide, and sterile needles can all protect individuals against the disease (Koop, 1986, 1988). All the above strategies are part of the behavior intervention methods. As DiClemente and Peterson noted, "Behavior changes represent the only available strategy for HIV prevention" (1994). It is suggested that behavior intervention seems to be the single

most effective way to prevent people from becoming infected with HIV besides a medical discovery of a cure for the disease.

Public health practitioners have difficulties in persuading individuals to engage in AIDS prevention behaviors. One reason for this difficulty is that campaigns have generally failed to take cultural differences and values into account (Coates, 1990; Peterson & Marin, 1988; Witte, 1992c). For example, Coates (1990) and Marin (1989) noticed it was very difficult to persuade Hispanic-Americans, African Americans, and teenagers to protect themselves against HIV infection. Effective HIV-transmission preventive strategies that are sensitive to cultural differences are desperately needed (Michael-Johnson & Bowen, 1992; Flora & Thoreson, 1988).

As mentioned earlier, most of the persuasive campaigns to prevent AIDS have been studied within countries bearing individualist orientations. The campaign messages produced by those countries usually focused on the individual. This type of message then served as an example for countries, which are slower in implementing AIDS prevention campaigns, to follow. That is, when countries such as Taiwan or Hong Kong wanted to promote safe sex practices, the designers of these projects would “borrow” messages from existing campaigns from countries that have advanced experiences with campaign designs. For example, a campaign sponsored by the Taiwanese Health Ministry to promote condom use among people at high risk (e.g., gay men and individuals who go into prostitution), focused on individual behaviors and outcomes. Specifically, posters were seen in bus stations depicting a happy face on a condom with a message that said, “if you use condom,

you do not have to worry about contracting AIDS." This type of message might be effective for members of individualist cultures, because the focus of the threat is on the self. However, because Taiwanese generally hold more collectivist values, indicating that they place group concerns above personal concerns, a poster threatening the family might be more effective than one threatening the individual. Thus, a poster threatening the individual may not be effective in promoting safe sex practices among people who follow collectivist values.

Overall, little is known about which types of messages or interventions work best with the Chinese in Taiwan. The present work represents a step forward in that it is among the first to conduct an experiment manipulating the content of AIDS prevention messages with members of this culture.

Why choose Chinese in Taiwan?

Before collecting the data, questions regarding the availability of a Chinese sample need to be addressed. Specifically, which part of Chinese population should represent the so-called Chinese culture? As Yang (1986) noted, for ideological or political reasons, there has been almost no empirical research on personality in China during the past twenty years or so. Most of the research conducted on Chinese culture has drawn people from Taiwan and Hong Kong as respondents or subjects. While the limitation is inevitable at present, it is reasonable to make inferences or generalizations about the typical Chinese characters from what has been observed in the Chinese of Taiwan and Hong Kong. In addition,

because a large number of people in these two Chinese societies have come, not long ago, from all major provinces of Mainland China, they are diversified enough to represent the overall Chinese population. In spite of superficial discontinuities, there are basic continuities in the latent cultural and psychological traits of Mainland Chinese and Overseas Chinese (Le, 1979). It is more likely that when two Chinese meet, they would think they are people from the same national culture. Thus, it would be appropriate to use Taiwanese Chinese subjects to represent the Chinese culture in the present study.

Hypotheses

Current fear appeal theory suggests that threatening messages should be persuasive as long as individuals believe they are susceptible to a severe threat that they can effectively avoid (Witte, 1992a). However, the issue of what the threat should target has not been addressed. Fear appeal messages that threaten individuals have been proven to be effective, while little is known about the impact of fear appeals on members of collectivist cultures. Thus, the purpose of this paper is to test if:

H1. Taiwanese students will hold more collectivist orientations than United States students, who will hold more individualist orientations.

H2. Collectivist individuals will be more fearful of the family-targeted fear appeal than the self-targeted fear appeal.

H3. Individualist individuals will be more fearful of the self-targeted fear appeal than the family-targeted fear appeal.

H4. When exposed to the family-targeted fear appeal, collectivists will perceive greater threat than the individualists.

H5. When exposed to the self-targeted fear appeals, individualists will perceive greater threat than the collectivists.

H6. Collectivist individuals will be more persuaded (i.e., have a more positive attitude, intentions, and behaviors) by fear appeals that threaten the family than by fear appeals that threaten the self.

H7. Individualist individuals will be more persuaded by fear appeals that threaten the self than by fear appeals that threaten the family.

CHAPTER 2

Method

Overview

The main purpose of the study is to test if cultural orientations influence individuals' reactions to fear appeals messages focusing on the self or group. After a series of pilot tests to evaluate the message, participants were randomly assigned to fear appeals that either targeted the family with a threat or the individual or individual.

Materials

The AIDS prevention campaign message was modified into two different versions: one focused on threats to individuals, the other focused on threats to the family. For example, Appendix A shows that the individual-targeted fear appeal described an active female college student who had contracted AIDS because she did not believe she could contract the HIV virus, and did not use condoms when she had sexual intercourse. It described the miserable outcomes regarding the symptoms of a deficient immune system such as rotten teeth, loss of hair, loss of an attractive appearance and the alienation of the individual from society.

In contrast, the family-targeted threat message indicated that the family suffered when their college daughter contracted HIV through unprotected sex. Here the parents of the AIDS victim were rejected members from local community activities such as the church and clubs. Worst of all, the victim's father was fired because the company was afraid to have any association with AIDS. Personal suffering caused by the HIV virus was not emphasized in the message.

Translation Procedure

Because the messages as well as the questions were answered by subjects from different language origins, all materials were translated and back translated to achieve the equivalency and appropriate adjustments in language. The process was repeated (i.e. English to Chinese by first translator, Chinese to English by second translator) until the English version and Chinese version were conceptually equivalent to each other (Berry,

1980). Later, a Taiwanese linguist who is excellent both in English and Chinese was asked to review the translations. The names of the characters and cities appeared in the messages were modified according to the country origin (i.e. US: Detroit vs. Taiwan: Taichung).

Pilot Study

These fear appeal messages and questionnaires were then piloted in two separate focus groups (N=5 in each) with college students who were representative of the targeted populations in different regions (i.e. U.S. and Taiwan) from where the main study would take place. Focus group participants perceived the messages to either emphasize personal consequences or family/kin consequences. Manipulation checks in the main study also served to validate the message manipulations.

Measure

A seven-point Likert-type response format was used to assess participants' perceptions for each item, except where noted. Items representing the same construct were averaged to create an index score. All measures are described briefly below. The Chinese language version of the questionnaire was developed in the same manner as the text. First, the questionnaire was developed in English. Then, it was translated into Chinese. Finally, it was translated back into English by a Chinese linguist who is familiar with the English language. The process was continued until item conceptual equivalence for each question

was achieved. Adjustments and clarification of some items were made following focus group evaluations to ensure maximum readability and comprehension.

The questionnaire was validated in three ways. First, the items were deemed face valid by the bilingual research team. Second, the focus group was asked to categorize which items fit with which constructs (using the version of the questionnaire that matched their native language). Their categorization of items to construct was accurate. Third, internal consistency was determined with Cronbach's alpha.

Participants and Demographic Variables

One hundred and ninety-one undergraduate students participated in the study. Ninety-eight U.S. subjects were students enrolled in introductory communication courses at Michigan State University; other participants were undergraduate students at Feng-Cha University located in central Taiwan. The average age of the participants was twenty. Regarding sex composition of the subjects, females comprised 48 percent of the Taiwanese sample and 58 percent of the U.S. sample. Although some variations existed regarding the academic majors and composition of the school year, there was no reason to believe that it may substantively affect the results. In sum, the samples were similar in that all were university students, of similar ages, and sex.

Manipulation Checks

Two questions assessed whether or not subjects perceived the individual or the family to be threatened by AIDS in the poster (e.g., In this message, AIDS was a threat to "Jenny/Mei-Fong (name in Chinese version)" -- "Her family"; "In this message, Jenny/Mei-Fong (name in Chinese version) was worried about the impact of AIDS on," "Herself" -- "Her family").

Fear

Fear arousal was measured by having subjects rate the following mood adjectives ("not at all" to "very much"): anxious, helpless, hopeless, frustrated, and nauseous ($\alpha = .92$).

These items frequently have been used in other fear appeal studies (e.g., Leventhal, Singer, & Jones, 1965; Maddux & Rogers, 1983; Rippetoe & Rogers, 1987) and have been found to correspond adequately to psychological arousal (Mewborn & Rogers, 1979).

Perceived Threat

The perceived threat was assessed by susceptibility and severity. Susceptibility refers to one's subjective perception of the risk of contracting a health condition, while severity indicates one's feelings concerning the seriousness of contracting an illness and its subsequent social consequences (such as effects of the conditions on work, family life, and social relations) (Rosenstock et al, 1994). Subjects were asked to rate their perceptions about contracting AIDS with three items (i.e., "How possible is it for you to

get AIDS?" "I consider my getting AIDS to be: " I am ____ to contracting AIDS:" "not at all possible" -- "somewhat possible" -- "extremely possible"). Internal consistency was adequate ($\alpha = .75$).

The test for severity had two parts: the first three items were assessed their feelings regarding the seriousness of contracting AIDS (i.e., "The threat of my getting AIDS is:" "not at all severe" -- "very severe", "not at all serious" -- "very serious," - "not at all significant".) Subjects were also asked to answer three other items that assessed family members' perceived severity if they have contracted AIDS. (I.e., "The effect on my family if I get AIDS would be:" "not at all severe"-- "very severe, "not at all serious" -- "very serious", "not at all significant" -- very significant".) Internal consistency was good (e.g., α is .89 for self perceived severity and .90 for family perceived severity).

Efficacy

Response and self efficacy were measured through six questions on "strongly agree" to "strongly disagree" scales (i.e., "I think that condoms prevent AIDS." "Using condoms is very effective in preventing AIDS). Internal consistency was adequate ($\alpha = .75$ and .67 respectively).

Intention

Participants rated their intentions to prevent AIDS on seven questions scaled from "definitely no" to "definitely yes." Five questions were used to assess one's own intention

to prevent contracting AIDS (i.e., "Do you intend to buy condoms to prevent AIDS during the next 4-6 weeks?") Internal consistency was good ($\alpha = .85$). The rest of the questions asked the subjects to rate the family's influence on individual's intention of preventing getting AIDS. (E.g., "My intention to use or not use condoms is -- influenced by my concern about protecting my family from having to deal with me contracting AIDS".) Internal consistency was adequate ($\alpha = .76$). In sum, the construct was reliable. The overall alpha for both self and family intention was .85.

Attitude

Attitude towards preventing AIDS was measured by subjects answering three items (i.e. "My using condoms next time I have sex would be," "bad" -- "good," "undesirable" -- "favorable", "not beneficial" -- "beneficial"). Three more questions were asked regarding participants' attitudes toward preventing themselves from contracting AIDS for their family's sake (e.g., "Protecting myself against AIDS in order to protect my family would be:"). Internal consistency was good. (E.g., attitude towards self prevention was $\alpha = .85$, attitude/family $\alpha = .88$, overall attitude $\alpha = .81$).

Subjective Norm

Items in the subjective norms scale measured one's normative beliefs with respect to a given behavior that he or she should or should not perform (Fishbein et al., 1994). Participants were asked to answer "I should use condoms" to "I should not use condoms"

to four questions. (E.g., "Most people who are important to me think:", "my close friends think:", "my parents think: "" The person(s) I am most likely to have sex with think(s):") (alpha= .89).

Defensive Avoidance

An individual's defense mechanism when encountering unpleasant messages was assessed by having subjects rate the following cognitive descriptions: "Want to think about AIDS" to "Not want to think about AIDS", "Want to do something to keep myself from getting AIDS" to "Not want to do something to keep myself from getting AIDS", "Want to protect myself from AIDS"--"Not want to protect myself from AIDS" when they read the item (i.e., "When I was first reading the message, my first instinct was to:"). Internal consistency was adequate (alpha= .67).

Message Minimization

Message minimization was measured by asking participants to rate three questions (i.e., the message is:) " from "boring", "neutral" to "interesting" on a seven-point Likert scale. Internal consistency was acceptable (alpha= .89).

Reactance

Three questions assessed the reactions from the participants regarding their reactions to AIDS prevention messages (e.g., "How do you feel about the message?" "not at all angry" -- "somewhat angry" -- "extremely angry"). Internal consistency was acceptable ($\alpha = .67$).

Individualism-Collectivism Scale

The INDCOL scale consisted of forty-three questions that concerned six collectivities (own spouse, parents/children, kin, neighbors, friends and coworkers/classmates). Responses were made on 7-point scales; most of them were anchored from 'extremely disagree' to 'extremely agree'. The unweighted sum of these 23 questions indicated the subject's overall level of collectivism. The INDCOL Scale is perceived to be valid and reliable (Hui & Villareal, 1989). In this study alpha was good at .92.

Procedure

Administrative permission was secured from the University Committee on Human Subjects. Consent forms were signed by undergraduate students from Taiwan and the U.S. Subjects were run in groups and randomly assigned to one of the conditions. The experiment was described as a study to evaluate the AIDS prevention messages. Participants were told that the materials were in the early stage of development and that their reaction to the messages were needed in order to refine them. Participants were directed to read the messages carefully and to underline important passages. Then, they

immediately completed the post-test questionnaire. Students were thanked for their participation and any AIDS-related questions were answered. Students were referred to the university health center (or local public health facilities in Taiwan) with further questions.

CHAPTER 3

RESULTS

Overview

In this chapter, the findings of this study will be described under the following main heading: (1) manipulation checks, and (2) Results of the main study.

The hypotheses were tested with ANOVA. To adjust for unequal cell sizes, the regression approach to analysis of variance was used, "where each cell mean is given equal weight regardless of its sample size" (Tabachnick & Fidell, 1989, p. 340). Any influence of demographic variables was controlled for when significant (e.g., gender, age, residency).

Manipulation Checks

Manipulation checks for the target of the threat message manipulation (i.e., family vs. self) were computed. The results indicated that the manipulations were effective

(manipulation check $t=3.22$, $df=190$, $p<.01$) such that those participants in the threat to individual group believed the message to be more threatening toward the individual ($M=7.73$) than those in the threat to the family group who believed AIDS to be more threatening to the family ($M=9.26$)

Hypothesis 1 -- Cultural Orientation

Hypothesis 1, was not supported by what the theory would predict (i.e., Chinese/Taiwanese are more collectively oriented while their American counterparts are more individualist oriented was not supported). On the contrary, Chinese/Taiwanese were found to be more individualist while Americans were found to be more collectively oriented. Table 2 (chi-square table) presents a comparison of means between country origins and cultural orientations. Sixty-eight U.S. subjects fall into the more collective category while 70 Taiwanese subjects belong to the more individualist sector. Subjects' cultural orientations were determined by performing an artificial dichotomization on the scored of the INDCOL scale. Those who scored less than the 50th percentile of the overall score were categorized as more individualistic oriented; and those who scored higher than the 50th percentile were considered to be more collectivist orientation (Pearson's chi-square = 51.33, $df=1$, $p<.0001$).

Hypothesis 2 & 3 -- Fear

Hypotheses 2 and 3 were not supported. Specifically, checks were performed to ascertain, as predicted by cultural orientation theory, whether people who are more individualistic oriented would exert more concerns to their own welfare and thus, be more likely to feel threatened when threats are placed on self level; as opposed to those who are more collectively oriented, caring more about the well being of their group, and are more likely to be fearful when threats frighten the group.

Collectivist participants were no more frightened by the messages that threatened family ($M=49.34$, $SD=19.71$) than by the message that threatened the self ($M=48.88$, $SD=18.76$). Similarly, individualist participants were not more frightened by the messages that threatened the self ($M=51.55$, $SD=17.20$) than by the messages that threatened their family ($M=52.20$, $SD=16.70$). That is, subjects in general felt the same level of fear regardless the locus of the threat or their cultural orientation.

Hypothesis 4 & 5 -- susceptibility and severity

Hypotheses 4 and 5 were partially supported. A significant main effect was detected for susceptibility on cultural orientation ($F(1, 177)=6.89$, $p < .01$), and a marginal interaction effect was obtained between cultural orientation and locus of threats. When the threats were placed on the family level, collectivist individuals expressed themselves to be more susceptible to the possible danger ($M=14.78$, $SD=5.53$) than did their individualists counterparts ($M=11.37$). However, when threats were placed on a self level, an unexpected effect emerged; collectivists still felt that the severity of getting

AIDS was more serious ($\underline{M}=13.58$, $sd=5.88$) than the individualists did ($\underline{M}=12.88$, $sd=5.13$) (see figure 2).

Additionally, no significant main effects were found on subject's perceived severity on cultural orientation and the locus of the threats ($\underline{F}(1,176) = .69$, $p > .05$ and $\underline{F}(1,176) = 1.94$, $p > .05$ accordingly). However, a potential, yet contradictory, interaction effect was suggested (see figure 3). Those individualists who were exposed to threats on family generally felt that the consequences of being infected with the AIDS virus was more severe ($\underline{M}=33.60$, $\underline{SD}=6.53$) than did their collectivist counterparts ($\underline{M}=31.33$, $\underline{SD}=7.66$). Conversely, subjects who were exposed to threats on self considered the possibilities of being infected were similar ($\underline{M}=31.94$, $\underline{SD}=7.38$, individualists; $\underline{M}=31.21$, $\underline{SD}=6.81$, collectivists) (see figure 3). In addition, subjects with collectivist orientations did not differentiate between the locus of threat on either family ($\underline{M}=31.33$, $\underline{SD}=7.66$) or individual ($\underline{M}=31.21$, $\underline{SD}=6.81$) level.

Hypothesis 6

Attitude and Intention

No significant main effects were found on the attitude index. Subjects, in general, held an equally positive attitude toward AIDS prevention when the threats in the message were placed onto subjects' family members ($\underline{M}=37.10$, $\underline{SD}=5.34$, individualists; $\underline{M}=36.76$, $\underline{SD}=6.27$, collectivists). On the other hand, collectivist subjects who received the message with self-targeted threat showed a relatively more positive attitude

(\underline{M} =39.33, \underline{SD} =4.71) towards practicing safe sex (e.g., using condoms, avoiding promiscuity) than did the individualists (\underline{M} =37.46, \underline{SD} =6.81) (see figure 4).

In terms of the condom use intentions measure, no significant effect due to cultural orientation or locus of threats were found. Interestingly, subjects who read the messages with threats located on family level expressed a weaker intention to use condoms (\underline{M} =43.65, \underline{sd} =9.48, individualists; \underline{M} =42.81, \underline{sd} =10.27, collectivists) than those who read the messages with self-targeted threat conditions (\underline{M} =44.85, \underline{sd} =10.39, individualists; \underline{M} =45.27, \underline{sd} =10.45, collectivists) (see figure 5).

CHAPTER 4

DISCUSSION AND CONCLUSION

People are, in general, strongly motivated to protect themselves against significant health threats. While much existing research claims that knowledge alone does not lead to self-protective behaviors, fear appeals research does indicate that fear can activate people's self protection action as long as they believe they can reduce the threats. However, previous fear appeals research focused on threats to the individual as a method to gain compliance for recommended behaviors. Although mixed effects were obtained, the present study suggests that cultural orientations may be a better indicator of people's fear than that of locus of threats. For example, it appears that, regardless the targets of fear appeals messages, individualist subjects would perceive greater danger and be more threatened by the message than did the collectivists (see figure 6). Overall, individualist

participants were more willing and more likely to protect themselves against AIDS than collectivist participants. Individualist persons had more positive attitudes toward condom use and stronger intentions to use condoms than did the collectivist persons.

Interestingly, collectivists felt more susceptible to AIDS infection than did individualists.

As predicted, the family targeted threat message induced greater susceptibility than did the self-targeted threat message for collectivists. The opposite pattern emerged for individualists where the self-targeted message induced greater perceptions of susceptibility than did the family-targeted message.

Hypothesis 1 was not supported. In fact, 87% of the Taiwanese/Chinese participants were categorized as individualists regardless of gender differences. In contrast, 90% of US participants clustered on the collectivist end of the INDCOL continuum. This does not necessarily imply that INDCOL scale is invalid. It is possible that the American subjects are transforming from a more individualist stand point to a more collectivist oriented world view while Taiwanese/Chinese culture, after having been influenced by Western philosophy since the 19th century, is aiming at the individualist end of the INDCOL continuum. However, it is always assumed by the Western social scientists that Eastern cultures (e.g., Chinese, Japanese, or Hindu) definitely fall into the collectivist category as opposed to the individualist category. Only a limited amount of empirical research has been conducted to probe culture orientation (Hofstede, 1984, Hui, 1988).

In addition, another possible explanation for the interesting inverted results is that the effect may be caused by the limited perspectives embedded in the INDCOL Scale.

According to Hui (1988), six collectivities were included in the scale as indicators of a person's collectivist orientation. Hofstede (1984) pointed out that if one valued self interest more than that of his/her groups, he or she would be considered as an individualist. Those two studies which had been conducted with subjects from many countries and cultures were only extracting a handful of factors that categorized cultural differences. It is also possible that the INDCOL scale does not tap on the individualistic facets of human psychology; it was only able to demonstrate the collectivist dimension in people. More cultural dimensions (i.e., power distance, high/low context) should be added to the INDCOL scale, rather than using single dimension to probe such a complex phenomenon.

Hypothesis 2 and 3 were not supported. Regardless of locus of threats, members of an individualist culture generally feel more fearful towards the threatening message than members of a collectivist culture. When locus of threats was entered as another independent variable, individualists and collectivists were still equivocal in terms of their fear towards the messages which did not induce more harm to the self or to the family.

At least one explanation can be drawn for the mixed results. In terms of subjects' cultural orientations, it may well be that a stronger fear would emerge from individualists who are exposed to a threatening messages than from collectivists -- regardless of locus of threats. When encountering dangers, those who with individualist orientation may be more frightened, and more worried about the conditions because they are supposed to take care of themselves. Conversely, people with collectivist orientation may have their

family members, and social networks to care for their welfare, thus they express no need to feel such a fear.

As for hypotheses 6 and 7, people with individualist orientations exhibit less positive attitudes than of the collectivists towards AIDS prevention when they themselves are in danger. When accompanied by a relatively high efficacy level (\underline{M} =22.02, single item average=5.51, \underline{sd} =3.74; \underline{M} =22.28, single item average=5.57, \underline{sd} =4.23), individualists were no more willing to practice safer sex or use condoms than those collectivists (see figure 7). That is, with an almost identical efficacy level (\underline{M} =22.90, single item average=5.72, \underline{SD} =4.26; \underline{M} =23.05, single item average=5.76, \underline{SD} =3.89) collectivists were more willing to engage in safer sex behaviors. One way to explain this finding is that people may regard sexual behaviors as personal and private. For collectivists, they may consider sex as a part of the 'collectivist' behavior thus demonstrate more concern on such issue.

Although most of the hypotheses were not fully supported, the present research still raises certain interesting issues such as the importance of incorporating cultural factors into persuasive campaign designs or reconsidering the stereotyping of people in the world as collectivists and individualists. With an improved measure on subjects' cultural orientations, researchers may have a clearer look at the relationship between cultural traits and the relation to fear appeals.

APPENDICES

APPENDIX A

APPENDIX A

Fear Appeal Messages

FACTS ABOUT AIDS

AIDS stands for acquired immunodeficiency syndrome. It is caused by a virus called HIV or human immunodeficiency virus. Very simply, it is a disease caused by a virus that can damage the brain and destroy the body's ability to fight off illness. AIDS by itself does not kill. But it allows other infections - Called opportunistic infections (such as pneumonia, cancer and other illnesses) to invade the body and these diseases can kill. Often the body wastes away until death.

At the present time, there is no known cure for AIDS, and no vaccine that can prevent the disease, However, HIV antibody tests are available for people to determine whether they are infected with the AIDS or not. Your family members or friends can have HIV but no have any symptoms of AIDS yet. AIDS is not a disease that affects only homosexual or minority communities. Center for Disease Control officials fear that people aged 15 to 24 will be the primary victims of the next AIDS epidemic. This group of young family

members was the only group to exercise a rise in HIV infection during the last few years. College students at universities around the nation (including MSU) have alarmingly high rates of HIV infection. Some studies suggest that up to 7 % of all young people such as your younger brothers and sisters have the AIDS virus - especially in large metropolitan area. Such as Detroit. Look around your neighborhood - that means about 1 neighbor out of every 15 could have the AIDS virus. Over 2,000 families in the state of Michigan have already suffered from losing their beloved ones to AIDS. AIDS is now prevalent among heterosexual. In fact, it is the number one cause of death for heterosexual women aged 15-45 (i.e. your sisters or friends) in New York and New Jersey. Research conducted by Harvard and Stanford Universities shows that the best way to prevent AIDS is by using condoms. Anyone can protect his or her family and friends by persuading them to use condoms. The facts about AIDS at this moment, barring celibacy. Using condoms can dramatically reduce chances of HIV contraction. Those who do not use condoms are ten times more likely to contract AIDS than those who do. Other birth control method such as

cervical caps, diaphragm or birth control pills do not protect at all against AIDS infection.

Condom Facts:

- They're convenient and extremely easy to use. They come in packages that have clear instructions on the package.
- Anyone can buy them for their family or friends to protect their beloved on against AIDS. Every convenience store such as 7-eleven or Quality Dairy sells them. The Olin Health Center gives them to student free.
- Sex can be spontaneous and satisfying with condoms, they are easy to use, always available, and you have the peace of mind that you are safe from contracting a disease.

What happens when you get HIV?

(Self-targeted)

About twelve months ago, the youngest daughter of the Hamptons, Jenny, a 21-year-old college student, died of a combination of pneumonia, kidney and heart failure. For the three months period after finding out she was found infected with the AIDS virus, she lost almost 60 pounds (she weighted

only 135 lbs., to start with). Bleeding and oozing sores typical of AIDS victims were all over her body. Nobody dared to be close to her. Her boyfriend, Rick, called her at first, then disappeared. Her best friends who she grew up with were afraid that she would pass the virus to her (which, of course, she couldn't through causal contact) and they soon abandoned her. Jenny's family was ashamed of her, too. They did not want to talk about her or her health problems. Because of Jenny's conditions, the church she went to accused her being a sinner and said she deserved what she had got. Her mother had a nervous breakdown because she could not accept the fact that her daughter was infected with such a terrible disease, Jenny's sorority cancelled her membership, packed up her belongings and mailed them to her parents' home - they did not want to see her anymore. In class, her classmates avoided her and nobody would sit next to her. Jenny loved sports, though she felt weak, she liked to go to the gym and exercise to make her feel better. However, the owner told her that she should not come anymore because the gym's customers did not want to there. One week after she was hospitalized, her family, her boyfriends, her friends and her classmates ignored her existence and no one seemed to care about what

would happened to her. She felt so lonely when people stopped visiting her. During her last two weeks of life, nobody visited her. She died lonely and scared. because she did not use a condom when she had sex.

(Family-targeted)

About twelve months ago, the youngest daughter of the Hamptons, Jenny, a 21-year-old college student, died of a combination of pneumonia, kidney and heart failure. Jenny experienced a lot of physical pain, but it was nothing compared to the psychological and emotional torture her family and friends had to endure because she got AIDS. Her boyfriend Rick suffered from the gossip about his "AIDS girlfriend" . He was humiliated and ridiculed. Jenny's best girl friend with whom she grew up also suffered greatly because everyone thought she was like Jenny. Jenny's family suffered the most. They were shunned by their co-workers and friends. People talked about "that AIDS family" behind their backs and gave them dirty looks whenever they walked by. The family's honor had been destroyed and they were ashamed to leave the house. The church they had always been to did not welcome them and the pastor openly stated that the church did not want her family to come. Jenny's mother

had a nervous breakdown because the women's club she belonged to ask her to leave. Her father lost a promotion opportunity because of Jenny's younger sister had been engaged but her fiancé's family insisted on calling off the wedding. They were worried that jenny's virus could pass to her sister (which, of course, it couldn't). Jenny's family, boyfriend, and friends all suffered as much if not more than Jenny did. The pain Jenny's family experienced with her dying did not go away. People continue to ignore and be mean to them, just because Jenny did not use a condom when she had sex.

APPENDIX B

APPENDIX B

Questionnaire in English

Please answer all questions truthfully and completely. Your answers are confidential and anonymous. Thank you for your participation.

1. In this message, AIDS was a threat to:

1	2	3	4	5	6	7
Jennifer						Her Family

2. In this message, [Jennifer/Chinese name] was worried about the impact of AIDS on:

1	2	3	4	5	6	7
Herself						Her family

3. According to the message you just read, _____ suffered most from Jenny getting AIDS.

1	2	3	4	5	6	7
Jenny						Her Friends

4. This message makes me feel FRIGHTENED FOR MYSELF:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

5. This message makes me feel FRIGHTENED FOR MY FAMILY:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

6. This message makes me feel SCARED FOR MYSELF:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

7. This message makes me feel SCARED FOR MY FAMILY:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

8. This message makes me feel ANXIOUS FOR MYSELF:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

9. This message makes me feel ANXIOUS FOR MY FAMILY:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

10. This message makes me feel WORRIED FOR MYSELF:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

11. This message makes me feel WORRIED FOR MY FAMILY:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

12. This message makes me feel NERVOUS FOR MYSELF:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

13. This message makes me feel NERVOUS FOR MY FAMILY:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

14. This message makes me feel UNCOMFORTABLE FOR MYSELF:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

15. This message makes me feel UNCOMFORTABLE FOR MY FAMILY:

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

16. How possible is it for you to get AIDS?

1	2	3	4	5	6	7
---	---	---	---	---	---	---

Not at all Possible	Somewhat Possible	Extremely ...Possible
------------------------	----------------------	--------------------------

17. I consider my getting AIDS to be:

1	2	3	4	5	6	7
Completely Impossible		Neutral				Highly Likely

18. I am _____ to contracting AIDS:

1	2	3	4	5	6	7
Completely Immune		Neutral				Highly Susceptible

19. The threat of my getting AIDS is:

1	2	3	4	5	6	7
Not at all Severe						Very Severe

20. The threat of my getting AIDS is:

1	2	3	4	5	6	7
Not at all Serious						Very Serious

20. The threat of my getting AIDS is:

1	2	3	4	5	6	7
Not at all Significant						Very Significant

21. The effect on my family if I get AIDS would be:

1	2	3	4	5	6	7
Not at all Severe						Very Severe

22. The effect on my family if I get AIDS would be:

1	2	3	4	5	6	7
Not at all Serious						Very Serious

23. The effect on my family if I get AIDS would be:

1	2	3	4	5	6	7
Not at all Significant						Very Significant

24. Using condoms is very effective in preventing AIDS.

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

25. I think that condoms prevent AIDS.

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

26. Using a condom is _____ for me and a sex partner(s).

1	2	3	4	5	6	7
Extremely			Somewhat			Extremely
Difficult			Easy			Easy

27. A sex partner(s) and I are able to use condoms to prevent AIDS.

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

28. I intend to change my sexual behaviors to prevent AIDS.

1	2	3	4	5	6	7
Strongly						Strongly
Disagree						Agree

29. Do you intend to have sexual intercourse during the next 4-6 weeks?

Yes (1) No (2)

Regardless of your intentions, please answer the following questions as though you will have sex during the next 4-6 weeks.

30. Do you intend to buy condoms to prevent AIDS during the next 4-6 weeks?

1	2	3	4	5	6	7
Definitely						Definitely
No						Yes

31. Do you intend to talk to a sexual partner(s) about using condoms the next time you have sex?

1	2	3	4	5	6	7
Definitely						Definitely

No

Yes

32. Do you intend to use condoms the next time you have sex?

1 2 3 4 5 6 7

Definitely

Definitely

No

Yes

33. Would you use condoms the next time you have sex if you were to have sex with someone you didn't know very well?

1 2 3 4 5 6 7

Definitely

Definitely

No

Yes

34. I plan to use condoms during the next 4-6 weeks _____.

1 2 3 4 5 6 7

Not
at all

Every time
I have sex

35. My intention to use or not use condoms is _____ influenced by my concern about protecting my family from having to deal with me contracting AIDS.

1 2 3 4 5 6 7

Not At
All

Somewhat

Completely

36. I intend to change my sexual behaviors to prevent AIDS the next time I have sex in order to protect my family from having to deal with me contracting AIDS.

1 2 3 4 5 6 7

Strongly
Disagree

Strongly
Agree

lease check your answer.

37. My using condoms the next time I have sex would be:

1 2 3 4 5 6 7

Bad

Good

38. My using condoms the next time I have sex would be:

1 2 3 4 5 6 7

Desirable

Undesirable

39. My using condoms the next time I have sex would be:

1	2	3	4	5	6	7
Unfavorable					Favorable	

40. My using condoms the next time I have sex would be:

1	2	3	4	5	6	7
Not Beneficial					Beneficial	

41. Protecting myself against AIDS in order to protect my family would be:

1	2	3	4	5	6	7
Bad					Good	

42. Protecting myself against AIDS in order to protect my family would be:

1	2	3	4	5	6	7
Undesirable					Desirable	

43. Protecting myself against AIDS in order to protect my family would be:

1	2	3	4	5	6	7
Unfavorable					Favorable	

44. Protecting myself against AIDS in order to protect my family would be:

1	2	3	4	5	6	7
Not Beneficial					Beneficial	

45. Most people who are important to me think

1	2	3	4	5	6	7
I should use condoms.					should NOT use condoms	

46. My close friends think

1	2	3	4	5	6	7
I should use condoms.					I should NOT use condoms	

47. My parents think

1	2	3	4	5	6	7
I should use condoms.					I should NOT use condoms	

48. The person(s) I am most likely to have sex with thinks:

1	2	3	4	5	6	7
I should				I should NOT		
use condoms.				use condoms		

Please think about the message you read when you answer the following questions.

49. When I was first reading the message, my first instinct was to:

1	2	3	4	5	6	7
Want to				Not want to		
think about				think about		
AIDS				AIDS		

50. When I was first reading the message, my first instinct was to:

1	2	3	4	5	6	7
Want to do				Not want to		
something to				do something to		
keep myself				keep myself		
from getting AIDS				from getting AIDS		

51. When I was first reading the message, my first instinct was to:

1	2	3	4	5	6	7
Want to				Not want to		
protect				protect		
myself				myself from		
from AIDS				AIDS		

52. This message is:

1	2	3	4	5	6	7
Boring			Neutral		Interesting	

53. This message is:

1	2	3	4	5	6	7
Overblown			Neutral		Not at all	
					Overblown	

54. This message is:

1	2	3	4	5	6	7
Exaggerated			Neutral		Not at all	
					Exaggerated	

55. This message is:

1	2	3	4	5	6	7
---	---	---	---	---	---	---

Overstated		Neutral		Not at all Overstated
------------	--	---------	--	--------------------------

56. How do you feel about the message?

1	2	3	4	5	6	7
Not at all			Somewhat			Extremely
Angry			Angry			Angry

57. How do you feel about the message?

1	2	3	4	5	6	7
Not at all			Somewhat			Extremely
Manipulated			Manipulated			Manipulated

58. How do you feel about the message?

1	2	3	4	5	6	7
Not at all			Somewhat			Extremely
Exploited			Exploited			Exploited

59. This message deliberately tried to manipulate my feelings.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Disagree						Agree

60. This message was an objective description of AIDS and AIDS-preventive techniques.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Disagree						Agree

61. This message was an accurate description of AIDS and AIDS-preventive techniques.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Disagree						Agree

62. This message was clearly written.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Disagree						Agree

63. I clearly understood this message.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Disagree						Agree

64. I learned a lot about AIDS prevention from this messag

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Disagree						Agree

65. If a husband is a sports fan, a wife should also cultivate an interest in sports.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

66. These days, parents are too stringent with their children, stunning the development of initiative.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

67. It is inappropriate for a supervisor to ask subordinates about their personal life (such as where one plans to go for the next vacation).

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

68. I would not let my cousin(s) use my car (if I have one).

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

69. It is enjoyable to meet and talk with my neighbors regularly.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

70. I would not discuss newly acquired knowledge with my parents.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

71. It is not appropriate for a colleague to ask me for money.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

72. If a wife is a teacher, the husband should also be aware of current issues in education.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

73. When making important decisions, I seldom consider the positive and negative effects my decisions have on my father or mother.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

74. I would not let my neighbors borrow things from me or my family.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

75. When deciding what kind of work to do , I would definitely pay attention to the views of relatives of my generation.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

76. When I am among colleagues/classmates, I do my own thing without minding about them.initiative.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

77. Success and failure in my academic work and career are closely tied out to the nurture provided by my parents.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

78. Married people should have some time to be alone from each other everyday, undisturbed by their spouse.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

79. Teenagers should listen to their parents' advice on dating.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly

Agree

Disagree

80. One needs to be cautious in talking with neighbors, otherwise others might think you are nosy.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

81. When deciding what kind of education to have, I would pay no attention to my uncles's advice.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

82. A person needs to return a favor if a colleague lends a helping hand.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

83. Young people should take into consideration their parents' advice when making education/career plans.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

84. If a person is interested in a job about which the spouse is not very enthusiastic, the person should apply for it anyway.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

85. It is reasonable for a son to contribute his father's business.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

86. I feel uneasy when my neighbors do not greet me when we come across each other.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

87. Each family has its own problems unique to itself. It does not help to tell relatives about one's problems.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

88. The bigger the family, the more family problems there are.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

89. It is better for a husband and wife to have their own bank accounts rather than to have a joint account.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

90. I would share my ideas with my parents.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

91. If possible, I would like co-owning a car with my close friends so that it would not be necessary for them to spend much money to buy their own cars.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

92. A person should be able to count on relatives for help if she/he finds him/her in any kind of trouble.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

93. There is everything to gain and nothing to lose for a classmates to group themselves for study and discussion.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

94. I would help, within my means, if a relative told me that he/she is in a financial difficulty.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

95. If a person is married, the decision of where to work should be jointly made with one's spouse.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

96. A person should practice the religion of his/her own parents.
initiative.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

97. I would help a colleague at work who had financial problems.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

98. I prefer to live close to my good friends.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

99. I am not interested in knowledge what my neighbors are really like.

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

100. Whether a person spends an income extravagantly or stingily is of no concern or one's relatives (cousin, uncles)

1	2	3	4	5	6	7
Strongly			Neutral			Strongly
Agree						Disagree

101. It is desirable that a husband and wife have their own sets of friends, instate of having only a common set of friends.

1	2	3	4	5	6	7
---	---	---	---	---	---	---

Strongly Agree				Neutral				Strongly Disagree
-------------------	--	--	--	---------	--	--	--	----------------------

102. Children should not feel honored even if the father were highly praised and given and award by an important official for his contribution and service to the community.

1	2	3	4	5	6	7
Strongly Agree			Neutral			Strongly Disagree

103. Students should not rely on other students for help in their schoolwork

1	2	3	4	5	6	7
Strongly Agree			Neutral			Strongly Disagree

104. To go a trip with friends makes one less free and mobile. As a result, there is less fun.

1	2	3	4	5	6	7
Strongly Agree			Neutral			Strongly Disagree

105. What the neighbors say about whom one should marry is unimportant.

1	2	3	4	5	6	7
Strongly Agree			Neutral			Strongly Disagree

106. I would confide my personal feelings and ideas with my parents.

1	2	3	4	5	6	7
Strongly Agree			Neutral			Strongly Disagree

107. In most cases, to cooperate with a coworker whose ability is lower than one's own is not as desirable as doing the thing alone.

1	2	3	4	5	6	7
Strongly Agree			Neutral			Strongly Disagree

Please indicate which of the following is true for you.

108. Which of the following best describes your sexual experiences? (Check only one.)

- 1 I only have had sex with men.
- 2 I only have had sex with women.
- 3 I primarily have had sex with men, but I have had sex with women.

- 4 I primarily have had sex with women, but I have had sex with men.
- 5 I have had sex with both men and women in equal numbers.
- 6 I have never had sex.

109. Which of the following best describes how you and a partner(s) handle sex?

- 1 We have sex with each other and neither of us has sex with other people.
- 2 Only my partner has sex with other people.
- 3 Only I have sex with other people.
- 4 We both have sex with other people.
- 5 We don't have sex together or with other people.
- 6 Not applicable, I am not involved sexually with anyone right now.
- 7 Not applicable, I am not in an exclusive relationship now.

110. Do you use condoms?

- 1 Never
- 2 Rarely
- 3 Sometimes
- 4 Most of the time
- 5 Always
- 6 Not Applicable (I have never had sex.)

111. In the last three months, did you have sex with someone that you really didn't know very well? Yes (1) No (2)

112. What is your ethnicity?

- 1 Taiwanese
- 2 White/Caucasian
- 3 Hispanic
- 4 Other Asian
- 5 Black
- 6 Other _____

113. What is your gender? Male (1) Female (2)

114. How many different people did you have sex with during the past three months?

- 1 None
- 2 One
- 3 Two
- 4 Three
- 5 Four
- 6 Five
- 7 Six or more

115. What is your age?

1 17-18

2 19-20

3 21-24

4 25-30

5 31 or over

116. Where is your home town? _____

117. What year are you at Michigan State University?

Freshman/Sophomore _____

Junior/Senior _____

Master's _____

Doctorate _____

118. Have you ever been abroad?

Yes _____ No _____

If yes, where have you been? _____

how long have you been there? _____

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