# Title

Emerging market donors: Do altruism and guilt influence donation behaviour?

**Susanna Carolina Snyman**

**A research report submitted to the Faculty of Commerce, Law and Management, University of the Witwatersrand, in partial fulfilment of the requirements for the degree of Master of Strategic Marketing Management**

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# ABSTRACT

Worldwide, the needs of NGOs are ever expanding, while donor behaviour in the largest donor nations is changing. Currently, giving behaviour has decreased in Western countries and donor fatigue is ever prevalent. Hence NGOs are looking predominantly to emerging markets in Africa, South America and Asia as there has been a surge in giving behaviour. The problem lies in historical disinvestment of donor behavioural studies within these markets. Therefore, this specific study looked at emerging market donors from South Africa and their motivations to make a monetary donation.

The purpose of this study was to investigate the reasons for giving. Prior research in this field identified the constructs “altruism” that consists of pure and impure altruism, that is, warm glow, reciprocal and prestige; and “guilt” that consists of existential and anticipatory guilt

An online web survey was sent out to the donor database of Doctors Without Borders (MSF) Southern Africa, through purposive sampling. A total of 883 surveys were completed. The data were first analysed using an exploratory factor analysis before more tests (Kruskal-Wallis, Mann-Whitney U and post hoc) were used to investigate differences between age, gender and population groups.

The results of the study show that existential guilt is the most prevalent factor within the South African market. However, there are differences spotted between the genders and specifically the white population group in comparison with the other groups. Secondly, impure altruism is the second most prevalent factor, with behavioural differences spotted in older donor groups (warm glow). There were also differences noted among the different population groups and their altruistic tendencies (pure altruism, recognition and warm glow).



Keywords: NGO, donor behaviour, altruism, guilt, warm glow, motivational factors, South Africa, emerging market, prosocial behaviour

## DECLARATION

I, Susanna Carolina Snyman, declare that this research report is my own work except as indicated in the references and acknowledgements. It is submitted in partial fulfilment of the requirements for the degree of Master of Strategic Marketing at the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination to this or any other university.

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Susanna Carolina Snyman

Signed at ……

On the …….. day of …… 20…..

## DEDICATION

To the voiceless and forgotten ones.

# ACKNOWLEDGEMENTS

Firstly, I would like to thank my partner Hein Coetzer for bearing with me during these three years of master's study. I would not be here without you. Your words of encouragement, support and love were mostly what kept me going. You are amazing!

Secondly, I would also like to thank Dr. Yvonne K Saini, as I would not have been able to do this research without her guidance and great knowledge of the subject matter.

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# CHAPTER 1. INTRODUCTION

## 1.1 Introduction

Currently, many studies are being conducted to better understand the donor market. These donor markets consist of organ donors, donations by the corporate sector such as corporate social investments (CSI), donations by the private sector (individuals), in-kind giving (non-monetary donations) and private monetary donations. Most of these studies are European and Western based or focus on one context in the emerging market sphere. The study topics cover different theories from consumer behaviour to pure economics.

This study is based on consumer behaviour with the main focus on the motivational factors of donors. The most prevalent motivational factors in academic research internationally and locally were identified and those that needed to be further investigated were used for this study.

## 1.2 Context of the study

The individuals asked to participate in this study are current donors to Medecins sans Frontieres (MSF) Southern Africa. The organisation is an international humanitarian aid organisation that provides emergency medical assistance to populations in distress (Medecins sans Frontieres SA, 2016). The organisation is governed by 5 headquarters based in Paris, France; Amsterdam, the Netherlands; Barcelona, Spain; Geneva, Switzerland and Brussels, Belgium. All these headquarters have different section offices worldwide (see Appendix A). The aim of the study was to understand which factors motivate their supporters to donate to charitable organisations.

From the research results one would then be able to conclude whether these specific motivational factors were prevalent in the South African MSF donor context. This will contribute to the literature as little research pertaining to charitable giving in emerging markets has been done, unlike in their Western and European counterparts (Hur, 2006).

In the South African market, there are currently upwards of 120 227 not-for-profit organisations that can be divided into three main groups: voluntary associations, not-for-profit companies and not-for-profit trusts (Lehohla, 2017). From 2010 to 2014, the non-profit sector showed a growth of 42%. This implies that this sector will keep on growing in South Africa and therefore research is needed to better understand this market (Lehohla. 2017).

The two main ways of giving towards charitable organisations are either donating money or volunteering time (List, 2011). This study took a closer look at the first option of donating money.

## 1.3 Problem statement

### *1.3.1 Main problem*

The main problem that non-profit organisations face in emerging markets is that they do not understand donor behaviour and why individuals would donate towards their cause (Hur 2006; List, 2011; Thompson, Berger, Blomquist & Allen, 2002). There are many factors that can influence an individual's decision to donate (psychological, economic, cultural) and it is made more difficult to understand because of the lack of academic literature in developing countries (BRICS) that specifically deals with the non-profit/charity sector (Henke & Fontenot, 2009; Ye, Teng, Yu & Wang, 2015).

The importance of the emerging markets is the untapped fundraising growth potential for non-profit organisations internationally and the need for literature to provide an in-depth analysis. As European and other Western countries are becoming more and more donor fatigued, it is important to research and understand the giving culture in new markets for academic and business purposes (Bertracchini, Santagata & Signorello, 2011; Otto & Bolle, 2011). Thus, it was necessary to investigate the motivational factors of donating that the existing literature has identified and test the prevalence of these factors in an emerging market context.

This study looked at the motivational factors of pure altruism namely warm glow, prestige, and reciprocal altruism (Ferguson, Femke, De Kort, & Veldhuizen, 2012; Fong, 2007; Friedrichs, 1960; Harbaugh, 1998; Kolm, 2000) and existential and anticipatory guilt (Cotte, Coulter, Moore, 2005; Izard, 1977; Lwin & Phau, 2014; Rawlings, 1970) and the prevalence of these within the donation process.

### *1.3.2 Primary Research questions*

1) Does altruism influence the decision to donate?
2) Does guilt influence the decision to donate?

### *1.3.3 Secondary Research Questions*

3) Do donation motivational factors differ between males and females?
4) Do donation motivational factors differ between the different age groups?
5) Do donation motivational factors differ between the different population groups?

## 1.4 Significance and justification of the study

The study is relevant due to the gap in academic information pertaining to emerging markets. Within the emerging or BRICS countries (Kurecic & Bandov, 2011), there is little research on motivational factors influencing decision-making regarding monetary donations. There is adequate research pertaining to donors' motivations and attitudinal factors (Bertracchini, Santagata & Signorello, 2011; Otto & Bolle, 2011).

This study will also add insights to the consumer behaviour literature, as most studies in this field focus on purchase behaviour motivation for commercial products and services. In this study the motivation behind non-commercial or even exchange products and services will be researched (Solomon; Dahl; White; Zaichkowsky & Polegato, 2014).

However, to better understand donor behaviour in specific contexts, new studies in this field are needed.

MSF receives 89% of its funding worldwide from private individuals. The results of this study provide MSF with the tools to continue raising funds and remain independent (Medecins sans Frontieres SA, 2016).

This study provides a platform for international NPOs to investigate new and emerging markets. It also gives a better idea of optimal communication channels and messaging to strategically influence the local population to donate towards their organisation.

This study exclusively focused on the monetary donation field within the not-for-profit company sector. No in-kind, organ or government grants were researched. This study strictly focused on researching donors within this framework to better understand the specific motivational factors chosen and how they influenced the donors' decision to donate.

## 1.6 Delimitations

The study included the six motivational factors in the decision-making process of individuals towards monetary donations to MSF.

- It included the measurement of motivational factors for monetary donations by private individuals towards MSF.
- It excluded the organ donor market, CSI and in-kind donations.
- It studied the South African donor market.
- It excluded Western or European contexts.
- It consisted of a quantitative study distributed via email.

- The study was distributed in the predominant language of private donors, that is, South African English.

## 1.7 Definition of terms

This study chose the following definitions for terms used quite extensively:

Motivation is defined by both extrinsic (external) and intrinsic (internal) values whereby an individual is moved (either intrinsically or extrinsically) to do something (Ryan & Deci, 2000). When an individual is inspired and activated towards a specific goal or end, he or she will be considered motivated.

The motivational factors discussed in this study included the following: altruism (pure and impure) (Aknin et al., 2013; Otto & Bolle, 2011; Schnall, Roper & Fessler, 2010), self-esteem (Andaleeb & Basu, 1995; Brown, 2014), guilt (Izard, 1977; Lwin & Phau, 2014; Rawlings, 1970), family responsibility (Alinon, Gbati, Sorum & Mullet, 2013), religious beliefs (Alinon et al., 2013; Chen & Bond, 2012), tax return (Hossain & Lamb, 2012; Kitchen, 2001) and impulse giving (Bennett, 2009; Lee & Chang, 2007).

Non-profit organisations (NPO) are corporations or associations that conduct business to benefit the public. NPOs do not have shareholders or a motive towards gaining profit (List, 2011).

Emerging markets are developing economies that are fast becoming linked financially with larger capital markets (Montiel, 2011). The BRICS countries can be defined as a group of relatively new and powerful emerging markets (Kurecic & Bandov, 2011). The acronym refers to five countries, namely Brazil, Russia, India, China and since 2011, South Africa.

The last definition is that of a regular donor. A regular donor is an individual that gives a monetary donation on a regular basis, for example monthly, quarterly or annually.

## 1.8 Assumptions

- It was assumed that respondents would understand the questionnaire in their language.
- It was assumed that the scales of measurement would be standard.
- It was assumed that respondents would answer truthfully and reflect normal perspectives.
- It was assumed that the donors would yield similar or dissimilar results.

# CHAPTER 2: LITERATURE REVIEW AND CONCEPTUAL MODEL

## 2.1 Introduction

The following segment is a discussion of the literature review. Different definitions of the specific areas of the research topic and how they were applied in this study are explored. Background information about the topic is given and each sub-problem and the accompanying proposition are discussed.

## 2.2 Positioning donation behaviour in the field of consumer behaviour and motivational theories

It is interesting to note that this study covers a wide variety of disciplines such as consumer behaviour, psychology, anthropology, social influences, business, charitable fundraising and the consumer decision-making process. This was observed by the researcher whilst doing the literature review.

One of the fundamentals of this study's interest can be found in the consumer decision-making model of Schiffman, Kanuk and Wisenblit (2010), as seen in Figure 1 below.

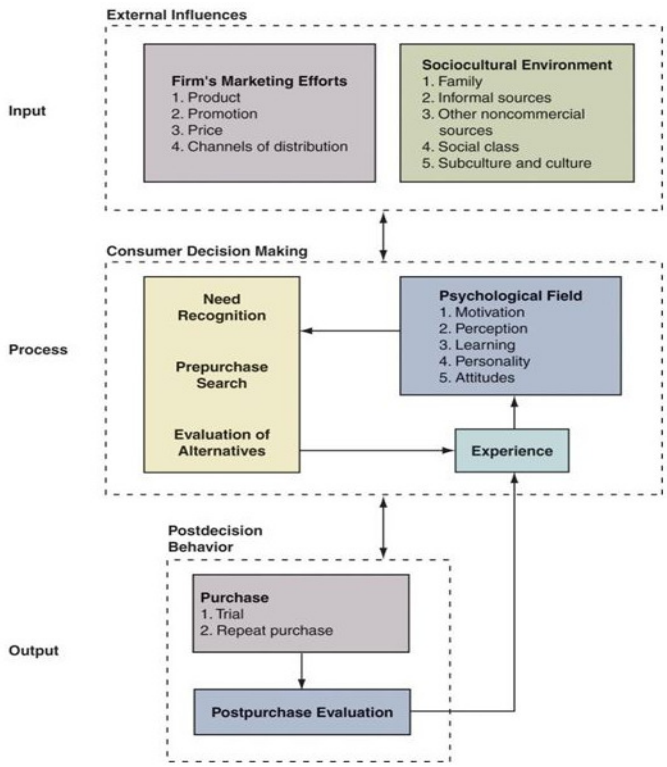

**Figure 1: Consumer decision-making model**

The model of consumer behaviour is designed to connect important and complex elements of the consumer decision-making process and present a holistic image of this process. The model reflects the cognitive, and to a lesser degree, the emotional influence on the steps taken in order to make purchasing decisions. There are three main elements in the model: input, process and output (Schiffman et al., 2010). This study is grounded in the psychological field in the process part of the consumer decision-making model. The psychological field consists of motivations, attitudes, perceptions, learning, personality and attributes.

Motivational theory is largely based on the approach-avoidance standpoint. Simply put in human behavioural terms, individuals are faced with the decision either to approach/pursue pleasure or to avoid pain (Elliot & Covington, 2001). This theory has been around since the time of the Greek philosophers Aristippus (435–356 B.C.) and Democritus (460–370 B.C.). Ultimately, the pursuit of pleasure can also be categorised as hedonism that is not limited to bodily sensations but also incorporates aesthetic and achievement- or accomplishment-based pleasures (Kahneman, Diener, Schwarz, 1999; Rozin, 1999).

For this hedonism or approach standpoint, it is important to understand individuals' overall needs and what are the motivational factors that influence their decisions to reach or attain these needs.

Several studies have been done to better understand the motivational factors or needs that must to be fulfilled for making any decision (Piron, 1991; Rook, 1987; Thompson, Locander & Pollio, 1990). When looking at Maslow's (1943) hierarchy of needs, decisions are driven/motivated by the unmet satisfaction of a current need or want. This unmet need can only be satisfied after the prior satisfaction of a proponent need. In the hierarchy there are five layers of needs: physiological, safety, love/belonging, esteem and self-actualisation.

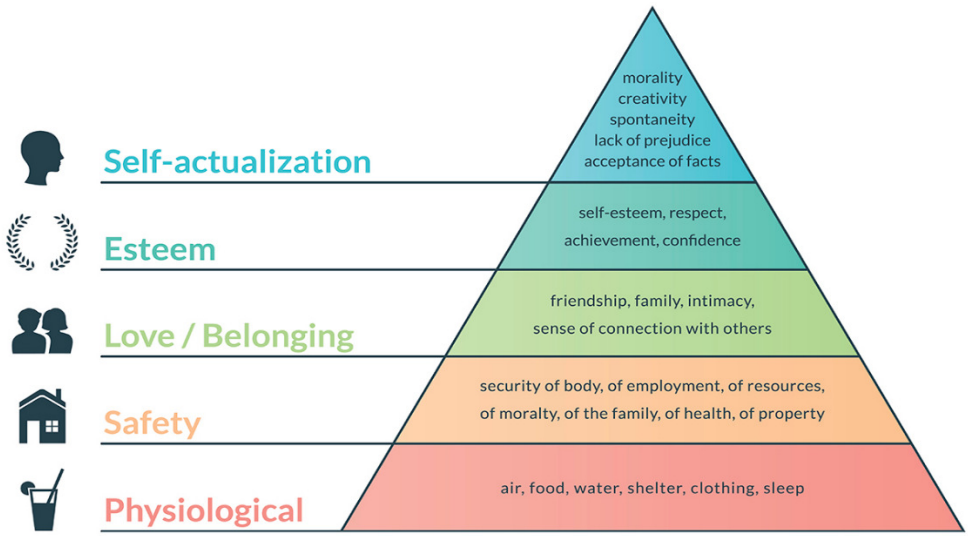


**Figure 2: Maslow's hierarchy of needs**

When looking at the consumer decision-making model and Maslow's hierarchy of needs, it can be concluded that the main motivational factor for the decision-making process is need based. The levels of the hierarchy – physiological, safety, love/belonging, esteem, self-actualisation – are all based on a specific need, even though the type of product or service an individual wants to purchase will differ.

The bottom layer is described as the physiological needs, which pertains to the basic needs of individuals to survive (food, sleep and air to breathe). Once the first layer's needs have been fulfilled, the needs will evolve and the second layer's needs will come to the fore. The second layer subscribes to the needs of individuals for security and protection. The third layer is known as the love and belonging layer, which subscribes to the motion that individuals need a sense of relationships to fit within a community. The fourth layer talks to self-esteem, self-confidence and a need for mutual respect from other individuals. The top layer of the hierarchy is called self-actualisation, whereby an individual wants to reach his or her potential (Alderfer, 1969; Maslow, 1943; Oleson, 2004; Thielke et al., 2012).

A second school of thought concerning the needs-based motivation theory can be found in the organisational psychologist Clayton Alderfer's ERG Theory (Alderfer, 1969). This theory is a summarised version of Maslow's hierarchy and stands for Existence, Relatedness and Growth. Existence consists of the bottom two layers of the hierarchy, relatedness corresponds to social needs and growth encapsulates the esteem and self-actualisation needs. The frustration-regression principle is noted within this theory where, if an individual is not satisfied and gets frustrated, he or she will regress to an accomplishable need on a lower level (Alderfer, 1969).

A third needs-based theory is the two-factor theory of motivation, which is a much contested theory by Herzberg, Mausner and Snyderman (1959). This theory asks the question of what satisfies and dissatisfies individuals, where the argument is that the main motivational factors are intrinsic and will always be. External factors that are

absent will dissatisfy the individual, even though they are taken for granted and do not affect motivation when they are present (for example an air-conditioner not working in summer). The criticism of this theory was that some factors can be seen as both external and internal and that the researchers did not distinguish properly (Cummings & Elsalmi, 1968).

One of the need-based theories that has received the most support is that of Douglas McClelland (McClelland & Boyatzis, 1982). By looking at a study by Murray (1938) together with other research (Maslow 1943), he suggests that all needs can be divided into three main categories: the need for achievement, need for power and need for affiliation (Trevis & Certo, 2005).

For this study, it can be argued that the motivational factors to make a donation decision fall under the two top layers of the Maslow hierarchy, that is, esteem and self-actualisation. This is due to the fact that decisions of this kind will only be taken after the basic needs of the individual have been fulfilled (Maslow, 1943).

The different motivation theories need to be unpacked further in order to understand the complex processes of donating decisions and how motivational factors can influence a donor's decision to donate towards a specific cause/organisation.

Two basic elements are used to distinguish and classify how an individual would engage in a particular activity/decision, namely intrinsic and extrinsic motivation. Intrinsic motivation can be labelled as an action or behaviour undertaken by an individual purely on the basis of enjoyment, in other words the motivation arises from within an individual (Kakinaka & Kotani, 2011; Murayama, Kitagami, Tanaka, Raw, 2016). Extrinsic motivation can be classified as behaviour influenced by external factors or rewards (for example money, prizes, etc.). An individual will change behaviour or actions based on motivational factors arising outside of the self. In the different motivation theories, intrinsic motivation is used as the overall indicator most of the time.

There are two main schools of thought regarding motivation theories, namely the affective (emotional) and the cerebral (cognitive processes) approach. However, there is no one theory that stands alone and encapsulates all the factors influencing motivation (Steel & Koning, 2006). Some of the theories are discussed and explored here to understand the best way forward.

One of the theories supporting organisational motivation is known as the achievement theory (McClelland, Atkinson, Clark & Lowell, 1953). According to McCLelland et al. (1953), motivation is based in the cognitive realm. Individuals set goals in order to achieve a purpose, which is the driving force behind decisions. They argue that motivation is a cognitive process connected to intention, purpose and planning rather than an attempt to fulfil an underlying emotionally charged desire (Thrash & Elliot, 2001).

There is a longstanding theory in motivational studies called the expectancy-value theory (Vroom, 1964). Here individuals are motivated to perform certain tasks and

processes but only with the certain knowledge that they are equipped and will excel in this task (Wigfield & Eccles, 2000). Individuals know what the outcome will be as they gauge their own knowledge. For example, individuals who want to earn more money, which according to Maslow fills the physiological, safety, security and even self-actualisation needs, will work harder and put in more hours to get this extra money, as they know what they are capable of and what end result (money incentive) awaits them (Ugah & Arua, 2011).

Many similar theories can be grouped together with the expectancy-value theory such as the prospect theory (Kahneman & Tversky, 1979) and the self-efficacy theory (Bandura & Locke, 2003). The main differentiator is the fact that time plays a role in the similar theories.

In other studies it was shown that decisions were motivated only if the product or service were cognitively activated or central to the self (Verplanken & Holland; 2002). In the psychology field based in the process part of the decision-making process, it was also found that risk and value assessments are integral to motivational factors and a decision will first be evaluated using risk and value calculations (Han, Lerner & Keltner, 2007). Also, the more knowledge an individual has about a specific product or service, the more positively it influences their decision-making process (Han et al., 2007; Verplanken & Holland, 2002).

## 2.3 Global empirical studies on charitable donations

Several empirical studies have been done in the charitable donation sphere (Bertracchini et al., 2011). These studies can be subdivided into three main categories: The first group represents studies where tests were done in experimental or laboratory settings (Deb, Gazzale & Kotchen, 2014). In these experimental studies, specific intrinsic or extrinsic aspects of motivation were studied and not the entire motivational rationale (Tonin & Vlassopoulos, 2014). There has also been all-encompassing studies about motivational factors in Asian countries that focused on one geographical area only (Hur, 2006), similar to the direction of this study.

In the second group, researchers analysed previous or current data sets of charitable giving to assess the factors that influence individuals to give or donate to a charitable organisation (Buraschi & Cornelli, 2002). In a study by Croson and Shang (2011), a test was conducted to determine whether a radio listener would donate more if he or she knew what the previous donations were. It was found that if the previous donor was in some way perceived to be similar to the listener willing to donate, it would affect the donation size and would most probably result in a larger amount. In similar studies, external social influences played a role in the motivation to donate. For example, a study by Haidt (2000, 2003) in which the term moral elevation plays a big role, a direct correlation has been found between the individual's positive donation/compassion behaviour after being exposed to another person's exemplary behaviour. This study

looked at the individual and the internal reasoning when deciding to donate and not the external influences on the decision.

Lastly, the third group consists of surveys that appraised the attitudinal and motivational factors regarding charitable giving (Hur 2006; Thompson et al., 2002). This group addresses the individual and the motivational factors that influence their decisions. For this study, the third group is the most appropriate.

Most of the studies that have been done in the developed/Western countries incorporate one or two of the categories named above (Henke & Fontenot, 2009; Ye et al., 2015).

## 2.4 Reported psychological and socio-economic factors driving donation behaviour

Motivational factors can be defined in a number of ways. In this review, the major points of motivational factors recognised in similar studies are discussed and categorised under the intrinsic and, in some aspects, extrinsic needs of individuals. In previous studies (Aknin et al., 2013; Hibbert, & Horne, 1996; Hur, 2006; Otto & Bolle, 2011; Schnall et al., 2010), two main factors have been highlighted, namely altruism and guilt donations. Below each factor is discussed in detail:

**Altruism**

Altruism has been proven as one of the main motivational factors when it comes to donation (Ferguson et al., 2012). Pure altruism can be defined as the willingness of individuals to engage in activities to benefit others even to the extent that they end up disadvantaging themselves (Friedrichs, 1960).

There are different types of altruism: Pure altruism, warm-glow giving (impure altruism), prestige altruism and reciprocal altruism.

**Pure altruism**

Pure altruism can be described as an individual driven to help others without any personal gain. This model is based on the individual heeding the call of the need (people, catastrophe, etc.) and not expecting any internal or external reward from this activity. It is needs based and the individual is driven to help purely on this need to assist (Mohd Arshad, 2016).

Andreoni (1988, 1989) and Bergstrom, Blume and Varian (1986) developed a pure altruism equation given below. $G$ represents the output of charities where $G = \sum gj\ n\ j = 1$ in a community of $n$ individuals = $i$.

$$ui = u(xi\ ,\ G)$$

In pure altruism, the $i$ (individuals/donors) derives utility from *G* (consumption of others/charity needs). In other words, the more the individual donation ($i$) the more the efficacy of the charities (G).

As an individual's income also plays a role on how much they are willing to donate, the model below represents the individual's donation. The allocation of his income is represented by ($m$) into the two items used for consumption $xi$ and $gi$, so, in turn, his utility can be maximised, where $p$ is the vector of the process of the goods consumption $xi$. It can be presented as below:

$$\max ui = u(xi\ ,\ G) \text{ where } G = \sum gj\ n\ j=1$$

$$\text{st} pxi + gi \leq m$$

As mentioned above, altruism can be broken up into two main differentiators – pure and impure altruism. Pure altruism means that the individual receives utility by helping others without receiving any rewards in return, whereas impure altruism means that an individual also assists but for reasons other than the purely selfless act to help (Andreoni, 1988; 1989). Impure altruism is further discussed as warm-glow, prestige and reciprocal altruism below (Kolm, 2000).

**Warm glow**

The second altruism theory is warm-glow giving. It can be described as an egalitarian motive, whereby an individual is moved to donate but also enjoys a positive emotional gain from the donation act. This is called the "warm glow" of donation. In the warm glow altruism, the individual is not concerned with the wellbeing of the recipient and purely donates due to the positive emotional gain experienced through the act of donating (Aknin et al., 2013; Andreoni 1988, 1989; Harbaugh, 1998; Mohd Arshad, 2016; Schnall et al., 2010).

When looking at the theoretical representation of Andreoni's (1989) warm glow, the following becomes apparent. In pure altruism, the individual *(i)* receives utility from the $G$. However, in impure altruism, the individual receives utility from the donation process itself. Hence it is signified separately in impure altruism (warm glow, prestige, reciprocity) by *g* in the following equation:

$$ui = u(xi\ ,\ G,\ gi)$$

Impure altruism is the combination of pure altruism and warm-glow giving, whereby an individual donates for the warm-glow effect but ultimately also cares about the end result.

**Prestige altruism**

In prestige altruism, the individual does not only get utility (warm glow) from the donation but is also driven by the donation being a way to display wealth. It is believed

that the donation amount will increase if there is public recognition of the donations (for example a publication of the gift categories).

Previous studies have shown that there is a direct relationship between congratulating and thanking donors in public and the amount they donated. The bigger the recognition the more individuals were willing to donate (Aknin, et al., 2013; Harbaugh, 1998; Otto et al., 2011; Schnall et al., 2010).

The following equation demonstrate the prestige altruism theory from the donor angle (Harbaugh, 1998):

$$U = U(x, p, d)$$

$U$ is the utility to the donor, x is the private good donated, p signifies prestige and d is the symbol for warm glow.

**Reciprocal altruism**

The final aspect of altruism is called reciprocal altruism (Fong, 2007; Kolm, 2000). Fong (2007) and Kolm (2000) use the terms conditional and unconditional altruism. Unconditional altruism refers to pure altruism while conditional altruism refers to warm glow, prestige and reciprocity, where the individual receives something in return (emotional or physical). Reciprocal altruism falls into the impure/conditional altruism category. Strong reciprocity can be defined as a notion of an individual to share and assist other individuals in a similar disposition and punish those at a personal cost who do not adhere to these mutually beneficial, cooperative, underlying agreements (Fong, Bowles & Gintis, 2006).

Within the charity realm, reciprocity can be defined as an individual giving a donation towards a charity and expecting a reward in return, which can be a yearly gift, tax certificate or a newsletter (Kolm, 2000).

Adapted from the pure altruism model, the reciprocal model shows amounts of giving and receiving. The main difference between pure altruism and reciprocity is the existence of gij and gji, signifying fairmindedness and appreciation. The following equation depicts an individual receiving at the exact same moment of giving:

$$ui = u(Xi - gij + gji, Xj + gij - gji, gij, gji)$$

$gij$ is the giving from individual *i* to *j, gji* the giving from individual *j* to *i.* In this model, due to the giving and receiving, the individual will receive utility from donating, gij, as well as receiving, gji.

**Self-esteem**

Other studies have shown that donating or helping others has a positive effect on an individual's self-esteem. This can be classified as an intrinsic factor as individuals do it

for personal gain and greater self-confidence (Andaleeb & Basu, 1995; Brown, 2014). This can also be traced back to warm-glow donations.

**Guilt**

Guilt appeals have played a role in charity advertisements for quite some time. Guilt is an emotional reaction that occurs when an individual failed to act/react in a situation in which they were expected/obliged to by social norm. These situations include legal regulation, moral or ethical principle or particular social conventions (Hibbert, Smith, Davies & Ireland, 2007; LaBarge & Godek, 2006).

In a study by Freeman, Aquino and McFerran (2009), there is a discussion about Social Dominance Orientation, whereby a complex society can be broken down into hierarchical groups, especially into “inferior” and “superior” groups. The superior or oppressor groups may feel guilt, which can be a motivator to assist the previously oppressed groups by way of a donation. This is extremely relevant to this study, as South Africa is a much marginalised society and the beneficiaries of the MSF donation are predominantly oppressed groups (Medecins sans Frontieres SA, 2016). This theory might also have contributed to the motivational factors that were researched in this study, as this might be one of the underlying reasons why individuals give without proper previous consultation. However, this is simply speculative from the researcher.

Adding to the social dominance theory, an explanation can also be found in predispositional guilt. Predispositional guilt is observed in individuals with a natural tendency to easily feel guilty. This can be attributed to societal and cultural factors where people are raised to demonstrate empathy and act altruistically towards others. They are expected to assist without any reciprocity. This is good news for charities looking for donations (Basil, Ridgway & Basil, 2008; Krebs, 1970).

In the literature three types of guilt has been brought to the forefront: existential, anticipatory and reactive guilt (Lwin & Phau, 2014).

**Existential guilt**

Existential guilt, also referred to as social responsibility guilt (Burnett & Lunsford, 1994), is evoked by comparison; comparison between the wellbeing of oneself and that of others. If there is a glaring disparity, the need will be much stronger to bring the two together (Izard, 1977). In other words, if individuals are aware of the gap between their own welfare and that of others, existential guilt will be experienced (Ruth & Faber, 1988). Once the guilt feeling is aroused and it is beyond a tolerable threshold, reaction in the form of a donation can take place to reduce the guilt (Cialdini & Kenrick, 1976; Ghingold, 1980). The following is an example of existential guilt being used in an advertisement:

An emaciated child sits alone in the desert. The child is helpless but could have had a bright future if somebody fed and cared for the child. In the distance a vulture comes closer. The existential guilt becomes apparent when a solution is proposed – a small donation can have a lifesaving effect on these children facing famine (Cotte et al., 2005).

**Anticipatory guilt**

Anticipatory guilt is the potential (or future) violation of an individual's standards; it precedes an action (Huhmann & Brotherton, 1997; Rawlings, 1970). Previous studies with advertisements have proven that individuals respond better to anticipatory guilt than reactive guilt. This is due to the fact that behaviour can still be changed in anticipatory guilt. In reactive guilt, the violation has already happened and consequently points out an individual's inefficacy, contributing overall to a negative effect (Giner-Sorolla, 2001; LaBarge & Godek, 2006).

The main industries using anticipatory guilt in their advertisements include healthcare, non-durable product advertisers and charities (Cotte et al., 2005). The following is an advertisement example:

The advert opens with gruesome visuals of remnants of a city due to tsunami damage with the title "Boxing Day 2011". Rescuers are seen handing out food parcels. A thank you message appears on the screen thanking the donors of World Vision. The advertisement then poses a question: "What would happen to the victims if food rations were not available? Knowing you could have easily helped, as a donor?" (Lwin & Phau, 2014).

**Reactive guilt**

Reactive guilt can be classified as a past violation of an individual's standards (Rawlings, 1970). Thus, it can be seen as guilt experienced in the past. This is mostly used in manufacturing, healthcare products and services and the charity sphere (Huhmann & Brotherton, 1997). An example of reactive guilt is given below:

An advertisement shows an individual's family member suffering from famine after a catastrophe. It then flashes back to a couple of months ago, showing the individual

refusing to make a donation to World Vision when asked by their fundraisers. The advertisement ends with: “Can you afford not to donate?” (Lwin & Phau, 2014).

In a study by Godek and LaBarge (2006), the relationship between reactive guilt and purchase intentions was studied. From the findings along with those of similar studies (Lwin & Phau, 2011, 2014) it was concluded that there is no relationship between these two constructs. Hence, reactive guilt was not measured in this study, as purchase decisions are the same as donations.

In conclusion, reactive and anticipatory guilt can be used to measure an emotional impact in an experimental setting where a person is shown an advertisement and then asked what emotions are evoked. As reactive guilt has already been explored in previous studies, the researcher only measured existential and anticipatory guilt. As an addition to the questionnaire, the researcher included an MSF advertisement and asked questions similar to those in previous studies (Bessarabova, Turner, Fink & Blustein, 2015; Ceder, 2017).

**Some socio-economic factors driving donation behaviour**

Although the above factors provided a strong foundation to start from, important motivational factors such as family traditions, religious beliefs and tax deductions need to be discussed next.

Firstly, family traditions can be described as an external factor when investigating motivations as these are influenced externally (Strigas & Jackson, 2003). Similar methods to distinguish family traditions as a motivational factor were used in a study by Alinon et al. (2013).

Secondly, religious beliefs represent a belief system of an individual trusting in supernatural forces that have predetermined control over their life events. The religious individual has a positive social aspect between institutions and a religious belief system (Chen & Bond, 2012). Religious belief can also be classified as an external influence of the individual’s decision-making process and motivational factors (Schiffman et al., 2010).

Thirdly, another motivational factor for individual donations may be the tax benefit (Kitchen, 2001). Once an individual makes a donation towards an NPO, they will receive a tax certificate enabling them to claim back a percentage or all the money they donated, depending on local law. In this study, tax returns or tax certificates were categorised as reciprocal altruism and thus were investigated within a different research frame.

Lastly, one more factor that can be mentioned is impulse giving. Impulse giving is defined by Lee and Chang (2007) as donating towards an organisation/charity on a whim. No prior thought or strategic deduction went into this decision. It can be seen as an emotional rather than logical response when faced with donations.

Although these factors can all have an influence, factors like tax certificates can also be grouped under reciprocal altruism. Family traditions and religious beliefs can have an influence on the emotional makeup of an individual, which will, in turn, affect their pure altruistic nature. However, for this study, the researcher wanted to focus on the different altruistic behaviours and guilt.

Hence, the motivational factors researched in this study were pure and impure altruism (Aknin et al., 2013; Otto & Bolle, 2011; Schnall et al., 2010) and existential and anticipatory guilt (Izard, 1977; Lwin & Phau, 2011, 2014; Rawlings, 1970).

## 2.5 Studies on donation behaviour in BRICS countries

In the South African and other similar contexts (emerging markets), it has been found that there is lack of research pertaining to motivational factors associated with private monetary charitable giving. However, interestingly enough, there was a number of studies on the subject of attitudes and motivations about the donation of non-monetary items such as human organs and blood.

A study by Saleem et al. (2009) focused on the attitudes and motivational needs of a group of adults regarding organ donation in Pakistan. In other developing (or emerging) markets, there are numerous research studies on motivations for blood donation (Lownik, Riley, Konstenius, Riley & McCullough, 2012).

In South-Africa, the motivational factors of corporate giving have been researched (Hamman, 2004; Matten & Crane, 2005). This level of donation is purely for business purposes as corporates get tax deductions and other Black Economic Empowerment (BEE) points when donating to specific organisations (Hamman, 2004; Matten & Crane, 2005). As it is a point system that needs to be adhered to, there are no internal motivations when making these decisions at corporate level, as opposed to individual private donors. Other emerging markets also focus more on the corporate sector than private individual donors (Jamali & Mirshak, 2007). As this trend has been noticed in the corporate sector, it would be interesting to see whether this would be the case on an individual basis.

In a study done by Ravishankar et al. (2009), in-kind donations were discussed in the Asian context. However, these in-kind donations are more reactive and will only be donated after an emergency such as an earthquake or flooding. The donations will also be in the form of items to survive, that is, on the first level of Maslow's hierarchy, for example lifesaving medicine donated by companies like Merck (Reich, 2000).

In Brazil, cash and in-kind donations such as food and blankets are more prevalent than in the Asian context (Vives, 2006). In-kind pharmaceutical donations (Reich, 2000) to ameliorate the inequality and better food programmes (Rocha, 2008) also play a role.

In South Africa, individuals and corporates often make in-kind and monetary donations around special occasions during the year, for example on Nelson Mandela Day and other

religious days (Nussbaum, 2003). In-kind donations will mostly take place in a community or family structure before donations are made towards other entities (Schnatz, 2007).

## 2.6 Conceptual model

Figure 3 displays the conceptual model using the two main motivational factor categories described in the literature review. The motivational factors consist of different constructs: guilt, which is made up of existential guilt and anticipatory guilt, and altruism, which is broken up into pure altruism and impure altruism (reciprocity, warm glow and prestige). These are investigated separately to better understand their prevalence and the influence they have on the individual's decision-making regarding donations.

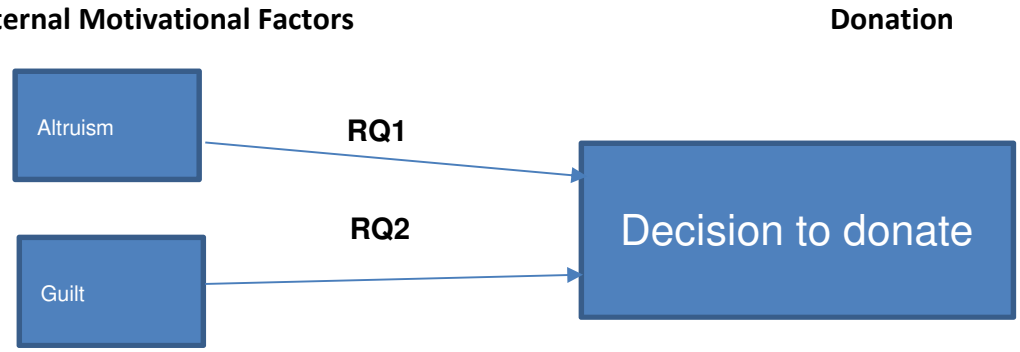


**Figure 3: Conceptual Model**

## 2.7 Definition of topic

The topic of the research is the following: An analysis of the prevalence of two main motivational factors towards donation. The study takes place in an emerging market utilising a population of MSF/Doctors without Borders private donors in South Africa.

The problem statement is as follows: Analyse motivational factors (altruism and guilt) and their presence in the decision-making process of MSF SA donors towards charitable donations in an emerging market.

This is a quantitative study. A quantitative questionnaire was disseminated to MSF SA private regular donors. Regular donors were chosen as they are already committed to the organisation, participate in charitable giving, and also understand the process of donating. Hence, it would be easier to find out whether the mentioned motivational factors influenced them towards giving/donating.

### *2.7.1 Research Question 1*

Is the factor Altruism (pure and impure) prevalent in the research findings and is it the main influencer in the decision to donate?

### *2.7.2 Research Question 2*

Is the factor Guilt prevalent in the research findings and is it the main influencer in the decision to donate?

The primary research questions were investigated with the use of an Exploratory Factor Analysis to gauge whether these two factors were present. The secondary research questions will be discussed in chapter 3.

## 2.8 Conclusion of literature review

The literature review revealed that the motivational factors for monetary donations in the private donor sector towards charitable giving in emerging markets need to be further investigated. This is needed to assist with the lack of academic knowledge and business developments within the BRICS contexts.

When scrutinising the decision-making model by Schiffman et al. (2010), it is noted that personal needs influencing the decision-making process are interrelated with aspects in the psychological field, including motivational factors.

The connection is then explained by the needs-based theories on motivation. Hence, intrinsic and extrinsic motivational factors can be categorised within an individual's needs that influence any decision. Motivation is the catalyst for needs-based decision-making.

From here we can deduce that, categorically, all human needs fit into the Maslow hierarchy of needs (Maslow, 1943). However, to simplify further, needs can be divided into three main categories based on the acquired needs theory by McClelland (McClelland & Boyatzis, 1982), namely the need for achievement, need for power and need for affiliation (Trevis & Certo, 2005). Although needs can easily be categorised, it is clear from the literature that there is a plethora of motivational factors that influences donation behaviour.

In conclusion, to understand the South African market, the study focused on motivational factors based on both intrinsic needs (pure altruism, warm glow, guilt) and extrinsic needs (impure altruism; reciprocity and prestige altruism). These factors were chosen due to the richness and prevalence observed in studies on donation behaviour.

Hence, the popularity of the motivational factors – unconditional (pure) and conditional altruism namely, warm glow (impure), prestige and reciprocal altruism, and existential and anticipatory guilt – needed to be investigated to understand an emerging market in comparison with the motivational factors observed in studies done in Western and European countries. This would answer the question whether these constructs have an effect on donation behaviour/decision-making within the local market. Perhaps the results can be divulged and implemented within other BRICS countries to gain a better understanding of new markets.

# CHAPTER 3: RESEARCH DESIGN & METHODOLOGY

## 3.1 Research methodology

This chapter identifies and describes the methodology of the study or procedures in order to carry out the research (Wagner, Kawulich, Garner; 2012). According to Neuman (2014), methodology is the understanding of the entire research process and the possible impact the newly acquired knowledge may have on an organisational, philosophical and ethical level. This chapter covers the three main objectives of research methodology, the research strategy (section 2), the design (section 3), and methods and procedures used (section 4-8). The reliability and validity of the study are discussed as well as possible perceived limitations (section 9, 10) of the research procedure and methods.

## 3.2 Research strategy

A research strategy is chosen based on the theoretical framework and to enable the researcher to answer the research questions (Wagner et al., 2012). From the questions and framework, the different research strategies (quantitative, qualitative and mixed methods) were considered and the research strategy that would yield the best possible answers to the research questions was implemented. Quantitative and qualitative research can be taken from two different clusters from the social research orientation (Bryman, 2012). The strategy for designing and conducting a study will vary depending on whether it is primarily a quantitative or qualitative study, although both can be implemented to provide a mixed method study (Neuman, 2014). A quantitative study focuses on the numerical representations of observations in order to describe and investigate a phenomenon (Babbie, 2013). A qualitative study, on the other hand, is a non-numerical study with the emphasis on words rather than quantification to discover underlying meanings and relationship patterns (Babbie, 2013; Bryman, 2012).

A quantitative research strategy was utilised in this study. This means that cause and effect or establishing relationships between variables need to be measured. Also, one must be able to generalise findings and replicate the study (Bryman, 2012; Wagner et al. 2012). Furthermore, a quantitative research strategy is deductivistic, together with an overarching influence of positivism, an orientation stating that knowledge is objective and can either be confirmed or contradicted (Guba & Lincoln, 1994). A study that adopted this strategy is discussed next.

Hur (2006) conducted a mixed method study in Seoul, Korea on motivational factors for charitable giving. The main factors were the following: mass psychology, a good deed, desire for the common good, social responsibility, altruism and expecting something in return. These factors were used in a quantitative survey distributed to a number of individuals in four different regions of Seoul. A similar approach was used in the current

study, albeit purely quantitative, donation motivations were researched from the available literature to identify the most applicable.

Overall, the advantages of quantitative research are that it is quantifiable and easily transferrable and it provides answers in an objective way.

## 3.3 Research design

The research design can be defined as the framework for the collection and analysis of the research data (Bryman, 2012). Overall the research design can be seen as the blueprint of how to conduct your research; how to understand and choose a topic to be studied in a specific population where the information will be extracted using a specific research method to answer a specific research question (Babbie; 2013, Wagner et al. 2012). According to Hair (2007), there are three types of research design: Causal research; exploratory research and descriptive research.

Causal research is employed to understand the effect of different variables or events on others. Exploratory research is used to reveal relationships and patterns that can be studied further. This type of research is implemented when there is a lack of information regarding the specific topic. Lastly, descriptive research is used to correlate the descriptive characteristics of the research topic. Descriptive research can be further broken down into comparative, case study, quasi-experimental, longitudinal and cross-sectional research.

This study used two of the designs named above: firstly, an exploratory factor analysis was done to answer the research questions stated in the literature review and secondly, a descriptive study was done to answer the propositions stated below. In order to test the propositions, a cross-sectional research design was used. A cross-sectional study can be described as research that examines information from many cases (sample or cross section) of a specific population at one point in time (Babbie, 2013; Neuman, 2014). Examples of other cross-sectional studies are that of Jurkiewicz, Massey and Brown (1998), Hur (2006) and Hsee and Zhang (2004).

Next, the propositions that were to be tested are discussed. First, the components from the factor analysis, made up of the constructs discussed in the literature review, are looked at. Then the new factors identified are investigated and gender, age and population groups are compared.

### *3.3.1 Research Question 3*

**Research question 3: Do donation motivational factors differ between males and females?**

P1: There is no difference in existential guilt's influence on donation behaviour between males and females.

P2: There is no difference in extrinsic motivated impure altruism's influence on donation behaviour between males and females.

P3: There is no difference in pure altruism's influence on donation behaviour between males and females.

P4: There is no difference in warm glow's influence on donation behaviour between males and females.

P5: There is no difference in anticipatory guilt's influence on donation behaviour between males and females.

P6: There is no difference in recognition's influence on donation behaviour between males and females.

**Research question 4: Do donation motivational factors differ between younger and older generations?**

P7: There is no difference in existential guilt's influence on donation behaviour between the different age groups.

P8: There is no difference in extrinsic motivated impure altruism's influence on donation behaviour between the different age groups.

P9: There is no difference in pure altruism's influence on donation behaviour between the different age groups.

P10: There is no difference in warm glow's influence on donation behaviour between the different age groups.

P11: There is no difference in anticipatory guilt's influence on donation behaviour between the different age groups.

P12: There is no difference in recognition's influence on donation behaviour between the different age groups.

**Research question 5: Do donation motivational factors differ between different population groups?**

P13: There is no difference in existential guilt's influence on donation behaviour between the different population groups

P14: There is no difference in extrinsic motivated impure altruism's influence on donation behaviour between the different population groups

P15: There is no difference in pure altruism's influence on donation behaviour between the different population groups

P16: There is no difference in warm glow's influence on donation behaviour between the different population groups

P17: There is no difference in anticipatory guilt's influence on donation behaviour between the different population groups

P18: There is no difference in recognition's influence on donation behaviour between the different population groups

## 3.4 Target population and sampling

### *3.4.1 Target population*

The target population can be defined as the universe of units from which the sample group is chosen (Bryman, 2012). When deciding on a target population, the choice of population should be determined by the research questions and whether this population will be able to provide appropriate data for the research focus (Symon & Cassell, 2012). The target population should be a large group from which the researcher can strategically draw samples in order to get the proper data but also to be able to generalise findings (Neuman, 2014).

The target population for this study consisted of MSF regular donors in South Africa, as shown in Table 1 below.

**Table 1: Target population**

| Context | Number of donors |
|---|---|
| MSF Southern Africa | 36 748 |

In the Bennett (2012) study mentioned earlier, the target population was strategically chosen in order to get the data needed to answer the study aim. This study also looked at a specific donor segment (regular donors) and the donor market was tied to a specific organisation (MSF SA), similar to the Bennett (2012) study. Furthermore, in order to qualify for answering the survey questions, the participants had to have donated towards MSF SA before.

### *3.4.2 Sampling size*

A sample is a subset of the population that is selected for research. Different sampling methods may be used in a specific research topic. The two main methods are probability and non-probability sampling principles (Bryman, 2012). Different strategies are chosen for different research methods. For quantitative research, a sample is usually chosen such that the results can be generalised to an entire population. In qualitative research, the focus is on certain aspects of insights that can be implemented to a wider sphere, larger than the population group (Neuman, 2014).

According to Symon and Cassell (2012), three specific questions need to be asked before choosing the sample: (1) Will the sample provide appropriate access to respondents and collect the appropriate data? (2) Which methods need to be implemented to provide appropriate data that meet the research aim and to choose participants who meet the research aim? (3) What sample number will provide sufficient data?

In this study, an online questionnaire was distributed to the MSF SA database consisting of 36 748 individuals. After it was sent out, there was a waiting period of one week and then a reminder email was sent out to the unopened addresses. In the end there was 883 valid completed questionnaires.

**Table 2: Profile of participants**

| Participants | Sample number |
|---|---|
| MSF SA donors | 883 completed questionnaires |

### *3.4.2 Sampling method*

Purposive sampling was chosen, whereby specific participants (donors) were strategically chosen to provide relevant answers to the research question (Bryman, 2012). Purposive sampling is a type of non-probability sampling where subjects are chosen by the researcher based on the insight that they are most representative of the research topic (Babbie, 2013).

With purposive sampling the sample chosen has the characteristics needed in a respondent to meet the research aims. Purposive sampling also provides expert opinion about a certain variable being investigated. For these reasons purposive sampling was used in this study.

Due to the large target population of this study (see sample number above), the simple random sample provided an easy, cost-effective way to receive completed surveys. It also ensured a pure sample, providing a group that is representative of the larger population being studied (Teter, McCabe, Cranford, Boyd & Guthrie, 2005; Wiley, 2009).

## 3.5 Data collection instrument

The data collection instrument can be either quantitative or qualitative. According to Bryman (2012), quantitative research can be collected by using a questionnaire or a structured interview schedule that collect data in the form of numbers (Neuman, 2014). Qualitative research can be collected by using mainly unstructured or semi-structured interviews (Bryman, 2012) to collect words or pictures (Neuman, 2014). Overall the data collection instrument should be specifically designed in order to elicit information that will be useful for analysis (Babbie, 2013). In qualitative research, two types of data collection are mentioned: the observation schedule and interview schedule.

In this research a questionnaire was sent to the MSF SA donors via Dotmailer (Ridley-Siegert, 2016). The academic basis of this questionnaire can be found in Appendix B and the online questionnaire can be found in Appendix C.

The data collection instrument can be unstructured, semi-structured (both qualitative) or fully structured (quantitative). The structure of the data collection instrument assists the researcher in looking for a specific pattern in any social constraint in order to better understand the research topic (Babbie, 2013). According to Bryman (2012), quantitative research is characteristically highly structured. This makes it easier for the researcher to investigate the precise concepts and issues to correlate with the research topic.

In a quantitative study done by Beerli and Martin (2004) based in the tourism marketing domain, the main focus was the perceptions of tourists' destination image formation and the relationship of the tourists' motivations and previous travel experience. The study was done on a representative sample of 616 tourists arriving at the airport of the island of Lanzorate. The reason for choosing a quantitative research design was to be able to give a standardised questionnaire to tourists of different nations where all results would be utilised to overall measure a larger population by generalising a smaller sample.

Likewise, this study measured MSF SA donors by using a standardised quantitative tool to apply the findings to a larger emerging market population (Bryman, 2012; Wagner 2012).

### *3.5.2 Research instrument and source*

The research instrument consisted of three sections – a screening, demographic and donor motivation section. The first section consisted of one screening question, section 2 consisted of nine demographic questions and the last section consisted of 31 Likert scale questions measuring the six donor motivational constructs identified from the literature review. The completion duration was about 10 to 15 minutes. All data received were ordinal data using an interval scale (Jamieson, 2004) (see Appendix D for the structure of the online questionnaire).

Section 1: Screening question

One screening question was asked to qualify the respondents to the survey:

- **Donation:** Have you ever donated towards MSF SA?

After potential participants answered the qualifying question positively, they were allowed to continue with the rest of the questionnaire. If they answered negatively, a pop-up window appeared thanking them for their time, but they could not continue with the questionnaire. This qualifying question was necessary to obtain the insights from a specific sample of individuals, namely donors.

Section 2: Donor demographics

Once qualified, the respondents could continue to the next section. In this section, the demographics of the donor (Q3, Q4, Q7-Q10), donor behaviour (Q2, Q6) and areas of initial contact (Q5) were required. It is important to measure the different aspects of the respondents' demographics as this data were used in the t-test in the analysis.

Section 3: Donor Motivation

In section three, the donor motivational constructs were measured for the factor analysis. Six subsections were identified, as discussed below:

**Altruism:** The items were used in a previous study by Ferguson et al. (2012). The internal consistency of the items in their study was above 0.7. In the current study, the Cronbach Alpha was 0.76 (after question 11 was reverse coded). The researcher adapted and measured altruism in question 11–16 (6 items).

**Warm glow:** The questions on impure altruism or warm glow were based on a scale used in studies by Hsee and Zhang (2004) and Nunes and Scokkaert (2003). In their studies 24 measurement items were used, while 5 items (Q17–21) were adapted to answer the research question in this study. The internal reliability measured 0.8 in both the earlier studies and this study

**Prestige:** The prestige altruism measurement consisted of 6 Likert scale items (Q22–26). The basis of the questions was sourced from Harbaugh, 1998; Glazer and Konrad; 1996;

and Hur, 2006. This measurement falls in the impure altruism classification. The Cronbach Alpha measured 0.7 for this study.

**Reciprocity:** The reciprocity measurement consisted of 3 item scales (Q28–30). The questions were sourced mainly from a study by Chompff (2009) but also from a study by Sargeant, Ford and Wes (2005). In this study, a 28-item questionnaire was used to enable an exploratory factor analysis. The Cronbach Alpha measured 0.6.

**Existential Guilt**: Guilt can be measured in three main emotions: feeling guilty, bad or sorry (Basil et al., 2008; Cotte et al., 2005). In this study there were five items measuring existential guilt (Q31–35) and the Cronbach Alpha was 0.83.

**Anticipatory guilt:** Similar to existential guilt, anticipatory guilt can also be measured by the three emotions mentioned above. However, the two main differences between anticipatory and existential guilt are that anticipatory guilt is usually measured in a focus group setting with stimuli of advertisements, and anticipatory guilt is also measured by a *possible* violation of a personal standard of acceptable behaviour; hence questions need to be phrased in the future tense (Cotte et al., 2005, Lwin & Phau, 2014). In this questionnaire an MSF print advertisement was provided for respondents to look at, followed by the 6 items (Q36–41) pertaining to anticipatory guilt. The Cronbach Alpha in this study was 0.8.

## 3.6 Procedure for data collection

According to Wagner et al. (2012), data collection is simply the gathering of information to assist the researcher to answer the research questions. There are two different ways of collecting data, either through the quantitative method or qualitative method. Quantitative data collection can be done by conducting a survey where some of the data will be inherently numerical (Babbie, 2013). With qualitative data collection the collecting, analysing and interpreting may happen simultaneously. It is a more fluid process than quantitative data collection (Bryman, 2012). The overall modes include focus groups, participant observation, interviews (telephonic, face-to-face, via online platform) and documents.

This study used a quantitative online or web survey. According to Symon and Cassell (2012), when using a questionnaire as data collection instrument, most of the conceptualising should already be finalised before the data collection begins. Questionnaires should have rigid guidelines for asking the questions to extract the correct information from the respondents (Babbie, 2013). In quantitative research, the same questions are asked in a standardised order and the questionnaire is completed in the same way. If an interviewer is present, the same prompts must be given and the interviewer must try to keep the data collection as objective as possible (Bryman, 2012),

In a structured survey, all respondents are asked the same questions in the same way with the aid of a formal schedule (Bryman, 2012). The structured survey can also look at the macro environment as it usually covers the background, attitudes and beliefs of a

wide variety of people (Neuman, 2014), which was useful in this study with the large population.

For the quantitative aspect, a study by Misje, Bosnes, Gasdal and Heier (2005) is discussed. The aim of the study was to determine which socio-demographic and motivational factors are integral to building and maintaining relationships of non-remunerated, voluntary blood donors. The data were collected through a self-administered questionnaire. The questionnaire was used to test a number of different variables based on a larger population and sample size than would have been possible in a qualitative study. The self-administered questionnaire also provided objective numerical data easily transferred to a statistical programme to be used for analysis.

The benefit of using a questionnaire in this study with its large population was that the quantitative data received were more objective and the overall data could be interpreted more efficiently. Other studies where this approach was taken include studies by Teter et al. (2005), Ferguson et al. (2012), Harbaugh, (1998), Glazer and Conrad (1996) and Hsee and Zhang (2004).

Other benefits of using a questionnaire are that a wide variety of variables can be measured simultaneously and it is a standardised tool that can be used in different contexts. Furthermore, there are extra benefits associated with an online or web survey compared to a paper survey: (1) Cleaner data – the data are automatically uploaded to the analysis software, ensuring less time spent manually coding and ultimately eliminating possible transcribing errors (Bryman, 2012; Neuman, 2014); (2) It is more cost-effective than paper questionnaires as there are no printing and other administrative costs (Wagner et al., 2012); (3) Online is more flexible when it comes to design (visuals and layout), which can include different components as used in this study with the advertisement (Neuman, 2014); and (4) Looking at all the points mentioned above, a web survey is more time efficient (Neuman, 2014).

### *3.6.1 Description of respondents*

Respondents are individuals who provide data by completing a questionnaire or participating in an interview set up by a researcher. This data are then used for analysis in order to answer the research questions (Babbie, 2013).

The researcher needed permission from the Head of Fundraising before the survey could be sent out. The Head of Fundraising was briefed at mid-year 2017 and a final meeting was held end of October 2017 to go over the finalised content of the survey.

The population to be studied consisted of the donor pool in the MSF SA context; 36 748 donors. The only prerequisite was that the donors should have already donated towards MSF SA. There was no minimum donation and the donors could come through any of the fundraising channels.

The respondents were briefed via an email sent out simultaneously with the questionnaire. In this communication, the reasons for the study were given and factors concerning the ethics were discussed. The information was taken from the standardised form that can be seen in Appendix B.

### *3.6.2 Pilot study*

A small pilot study was conducted with the fundraising employees at MSF SA. The group of participants matched the sample specifications for the study (Blanche, Blanche, Durrheim & Painter, 2006). This was done before the instrument was disseminated to the population to review the content and test the validity and reliability.

### *3.6.3 Questionnaire distribution and collection method*

The online questionnaire or web survey (Wagner, 2012) was sent out during 7–19 November 2017. The questionnaire was sent out using Dotmailer, an online email marketing tool, to the MSF SA database of 36 748 donors. It was sent systematically over the first five days and after the 12th of November, a reminder email was sent to the respondents who have not opened their emails. After this last communication a grace period of one week was given before the final date for submission on the 19th of November 2017. The online/web survey version of the questionnaire can be found in Appendix D.

## 3.7 Ethical considerations when collecting data

"Discussion about ethical principles in social research, and perhaps more specifically transgressions of them, tend to revolve around certain issues that recur in different guises, but they have been usefully broken down by Diener and Crandall (1978) into four main areas – (1) whether there is harm to the participants (2) whether there is a lack of informed consent (3) whether there is an invasion of privacy (4) whether deception is involved" (Bryman, 2012, p.135).

Ethics prescribes what is moral in society and also in the research sphere. Ethical issues force the researcher to balance two different values simultaneously – the rights of the participants being researched and whether the correct scientific data will be extracted from this group (Neuman, 2014). Research ethics needs to be planned and enforced in every step of the research process, from the design to the collection of the data (Wagner et al., 2012), which has been the case in this study.

The letter giving ethical clearance in order to ensure that the research respondents would not be deceived, harmed, stressed or driven to the point of losing self-esteem can be seen in Appendix B.

## 3.8 Data processing and analysis

Data processing happens after the information has been collected, when it should be turned into workable data (Bryman, 2012). Raw information is typically in the form of completed questionnaires. Data processing involves the classification or coding of this information and transferring it to a computer (Babbie, 2013). Once the data have been entered into the computer, it can be reorganised in different charts and graphs, and ultimately interpreted to give theoretical meaning (Neuman, 2014).

In quantitative research the following needs to be implemented: data coding, data entry and data cleaning (Bryman, 2012).

### *3.8.1. Data coding*

Data coding involves transforming the raw data received from a questionnaire into a meaningful numerical format (Blanche et al., 2006). Coding can be described as the search to find key themes and concepts in the data (Bryman, 2012). Once the data have been categorised and compared in different main themes, the overall data analysis is easier (Symon & Cassell, 2012, Wagner et al., 2012). In this study the web survey was automatically coded in the Dotmailer tool.

### *3.8.2 Data entry*

Data entry refers to the entering of data from the data collection tool into a statistical programme on a computer in order to analyse the data (Babbie, 2013; Wagner et al., 2012). There are currently four ways in which raw quantitative data can be entered into a computer, namely a barcode optical scan, code sheet, direct entry method and computer-assisted telephone interviewing (CATI) (Neuman, 2014).

In this study, the data entry occurred automatically as respondents were entering their answers in real time into the Dotmailer storing database. This information was downloaded as a CSV file and opened in Excel to ease the data cleaning process.

### *3.8.3 Data cleaning*

Data cleaning is the process of detecting incorrect data in a record set, table or database and rectifying the data by either fixing or removing the data. Incorrect data can be categorised in the following way: data that cause contradictions, missing data or duplicated data. By eliminating the incorrect data sets, the data analysis will be more efficient and effective (Bryman, 2012; Neuman, 2014; Symon & Cassell, 2012).

There are two types of data cleaning to verify coding after the data entry on the computer, namely code cleaning and contingency cleaning (Neuman, 2014). Code

cleaning looks at the specific codes used for all the different items (Likert scale, multiple choice) to pinpoint any incorrect coding used, and contingency cleaning refers to cross-checking different variables to see if there are any answers that could be logically impossible (Neuman, 2014). By using the Excel file, the researcher was able to filter and check for code cleaning and contingency cleaning.

The responses from Dotmailer amounted to 976 but 8.31% of these respondents answered "No" to the qualifying question; hence they were removed, leaving 894 respondents. Unfortunately, this number contained 11 questionnaires that were partially completed and had to be removed. In the end the sample consisted of 883 completed and qualified online questionnaires.

### *3.8.4 Research data analysis*

Research analysis means determining the meaning of gathered material in relation to the study purpose (Babbie, 2013). Data analysis allows the researcher to expand theory, improve understanding and advance knowledge (Neuman, 2014). Data analysis can be broken up into two main frames, namely quantitative and qualitative analysis.

Quantitative data analysis is used to compress the amount of data collected in order to test for variable relationships and develop ways to present the results. In this step in quantitative analysis, computer software is used to manipulate the numerical data to present the overall research findings (Bryman, 2012; Neuman, 2014).

Overall the main themes for research data analysis can be implemented using a number of methods, namely regression analysis, cluster analysis and content analysis in qualitative research.

In this study, factor analysis was utilised. Factor analysis takes all the data received from the research and breaks it down to a smaller data set. It is a statistical method used to describe different aspects among correlated, observed factors in order to find hidden relationships, patterns and similar characteristics (Babbie, 2013; Bryman, 2012; Preacher & Hayes, 2004; Wagner et al., 2012).

The benefit of factor analysis for this study was that it was quite a large population that had to be tested on a number of motivational factors and this analysis would provide possible patterns and characteristics. These could then be compared to identify the main trends. In previous studies, factor analysis was also used to pinpoint the different underlying factors, how they are interrelated and which ones are most prevalent (Abrahams, Homer, Sharpe & Zhou, 2015; Hur, 2006).

In this study the clean data from Excel were uploaded into SPSS and with the help of the Associate Professor in Decision Science and Research Methodology at Wits Business School some statistical analysis took place.

Firstly, the results could be looked at in Excel instead of simply using ordinal data on an interval scale where it has been proven that intervals between values cannot be assumed and measured as equal (Allen & Seaman, 2007; Jamieson, 2004; Stacey, 2005); hence an algorithmic distribution fitting approach was utilised in the analysis.

Secondly, an exploratory factor analysis could be run through the different variables to analyse underlying relationships and discuss the most prevalent constructs and whether they influence donor behaviour.

Lastly, using the component breakdown of the factor analysis, a more in-depth analysis can be executed. After testing for parametric and non-parametric distribution, the applicable tests can be run. In this study, Mann-Whitney U and Kruskal-Wallis tests were run to analyse whether there were behavioural differences in the group of respondents by using demographic categories (age, gender and population group).

The success of a research study relies exclusively on the data analysis process, as it provides meaning by facilitating data analysis and interpretation without which the research would be rendered worthless (Neuman, 2014). It is important that the variables and analysis are taken into account during every step of the research strategy (Bryman, 2012). The steps given below were followed:

1) Coding and cleaning of data into Excel
2) Distribution analysis
3) Importing of data into SPSS
4) Descriptive statistics
5) Factor analysis
6) Mann-Whitney U and Kruskal-Wallis tests

The findings are discussed in Chapter 4.

## 3.9 Research limitations

The limitations of a study can be seen as specific characteristics from the chosen methodology or design that can have an impact on the interpretation of the findings (Price & Murnan, 2004). The following limitations might apply to this research study:

Firstly, the external validity might be affected as it is an organisational study and the findings might not be applicable to other NGOs outside the MSF organisation. External validity might also be affected due to the population breakdown of the donor base in comparison with the population breakdown of South Africa.

Secondly, the web survey was only sent via email; hence it would only avail itself to respondents with an internet connection. As the data gathering process was only through one channel, it might have an impact on the findings.

Lastly, there is also the likely threat of responses being subject to bias due to respondents who wish to be portrayed to reflect desired characteristics relating to donation behaviour instead of their genuine characteristics.

## 3.10 Research reliability and validity measures

According to Bryman (2012), the most important criteria for establishing quality in a research project are reliability and validity. They help to establish the credibility and believability of the findings (Neuman, 2014) and are required in qualitative and quantitative research (Babbie, 2013).

### *3.10.1 Reliability*

With quantitative data, there are three prominent factors involved to test the internal reliability: (1) stability of the instrument over time; (2) consistency of the indicators that make up the scale or index; and (3) inter-observer consistency, especially where subjectivity plays a large role in the research (Bryman, 2012).

In summary, reliability means consistency and dependability so that subsequent studies building on the research will most likely yield similar research findings (Neuman, 2014; Wagner et al., 2012). The internal reliability of a research instrument is measured by the Cronbach Alpha (α), which should be higher than 0.7 to be a successful internal reliability test (Bryman, 2012, Wagner et al., 2012).

In this study, all the scales used were taken from previous research and adapted to meet the requirements of this research study. See point 3.5.2 for a discussion of α values obtained in previous studies. Table 3 is a summary of the constructs measured.

**Table 3: Construct breakdown**

| Construct | N | α | Mean | # of Items |
|---|---|---|---|---|
| Anticipatory Guilt | 883 | 0.8 | 6.633 | 6 |
| Existential Guilt | 883 | 0.89 | 7.575 | 5 |
| Reciprocity | 883 | 0.6 | 3.071 | 3 |
| Prestige | 883 | 0.7 | 3.872 | 6 |
| Warm Glow | 883 | 0.8 | 5.96 | 5 |
| Altruism | 883 | 0.77 | 7.154 | 7 |

N=Number of respondents; M= Mean score

### *3.10.2 Validity*

Research validity is needed to gauge whether a specific instrument actually measures the reality of the social sciences using the developed tool or design (Neuman, 2014; Wagner et al., 2012). In quantitative research, it refers to whether the indicator really measures the concepts. In qualitative research, research validity refers to whether the researcher is observing, identifying and measuring the constructs it is said to investigate (Bryman, 2012).

In quantitative research, the main types of validity are internal validity, external validity, measurement and ecological validity. In qualitative research, credibility, dependability, transferability and conformability need to be implemented. The validation types are discussed below.

**Internal validity**

Internal validity can be described as using the correct measurement tool without any internal errors to strengthen the logical rigour of causal explanation and conclusions drawn from an experiment (Babbie, 2013; Neuman, 2014; Wagner et al., 2012). In a quantitative study, the internal validity must prove that the conclusion between two or more variables can be trusted.

In the previous studies the internal validity or face validity was usable (Ferguson et al., 2012; Glazer & Conrad, 1996; Harbaugh, 1998; Hur, 2006). The only questionnaire items that had to be adapted were from the reciprocity scale (Chompff, 2009; Sargeant et al., 2005) and the anticipatory guilt scale (Cotte et al., 2005; Lwin & Phau, 2014). The results of the factor analysis in the communalities table (Appendix E, Table 2) show that the different items did measure the different constructs. If the variance is higher than 0.5, the item should be kept in the study. Only 4 items measured below 0.4 (Q11, Q16, Q21, Q30); hence it can be debated that the internal validity was reasonable (Costello & Osborne, 2005).

**External validity**

External validity in quantitative research questions whether the results of a study can be generalised and replicated. External validity is concerned with the overall generalisability of findings from one social group or sample to a larger population (Neuman, 2014; Silverman, 2011; Wagner et al., 2012).

The large number of respondents (883) ensured a higher rate of generalisability within a population (Bryman, 2012). Also, what assists in the external validity in this case is the fact that the respondents were from different geographical areas within South Africa, and therefore it is safe to say that this study can be classified as externally valid.

**Measurement or construct validity**

Measurement validity consists of two subtypes, namely convergent validity and discriminant validity (Cable & De Rue, 2002; Watson et al., 1995).

Convergent validity tests whether the measurement of a construct is a true reflection of the concept (Bryman, 2012). Measurement validity signifies how well an empirical indicator and the conceptual definition of the construct tap into the theoretical basis in order to appropriately tie together the findings (Neuman, 2014; Wagner et al., 2012).

Discriminant validity tests whether the constructs that theoretically should not be related to one another are in fact not related. One should be able to discriminate between dissimilar constructs (Cable & DeRue, 2002; Neuman, 2014; Watson et al., 1995).

In this study it was found that the construct validity was sound in most factors. Six factors were identified from the literature review and six components were identified in the research.

However, there were some factors that overlapped and the discriminant validity was not very clear in those cases. This can be attributed to the fact that the constructs being measured were all based on specific behaviour towards donation. Hence it will be normal that some factors might overlap as some behaviour can be classified in the same overarching factor (impure altruism).

**Ecological validity**

Ecological validity speaks to whether the research findings will be applicable to people's informal, ordinary social activities on a day-to-day basis (Bryman, 2012). It can also be described as the degree to which the research findings can be generalised to different geographical and socio-economic groups (Wagner et al., 2012) and whether the research findings are true to the specific sample being studied (Neuman, 2014).

The very specific topic of this study may not fall into everyday life (Bryman, 2012). However, theoretically the information gathered in this study could be used by

marketers/fundraisers in the NGO realm, as there is little research on emerging markets like South Africa (Kvint, 2010).

There is also a possibility that the relationship between the variables and the research findings could be useful in the academia for future studies.

As dependability, transferability and generalisability are equivalent to the abovementioned factors, they have automatically been dealt with. Conformability was effected as the researcher asked the same questions in the interview in the same way to all the respondents. The questionnaires were tested beforehand and sent to the population; hence there was very little interaction between the researcher and the donor population.

# CHAPTER 4: PRESENTATION OF RESULTS

## 4.1 Introduction

In this chapter the results are presented. First the profile of the respondents is discussed using the demographic and donor behaviour feedback, followed by the breakdown of the different constructs and the answers obtained. The factor analysis that was used is discussed and finally the propositions are looked at. All the results presented in this chapter are obtained from the 883 qualified completed questionnaires.

## 4.2. Demographic profile of respondents

A descriptive analysis of the demographic variables of the respondents are presented. The main factors in this section are age, gender, how long they have been a donor, employment status, education obtained and what type of donor they are.

### *4.2.1 Active donor period*

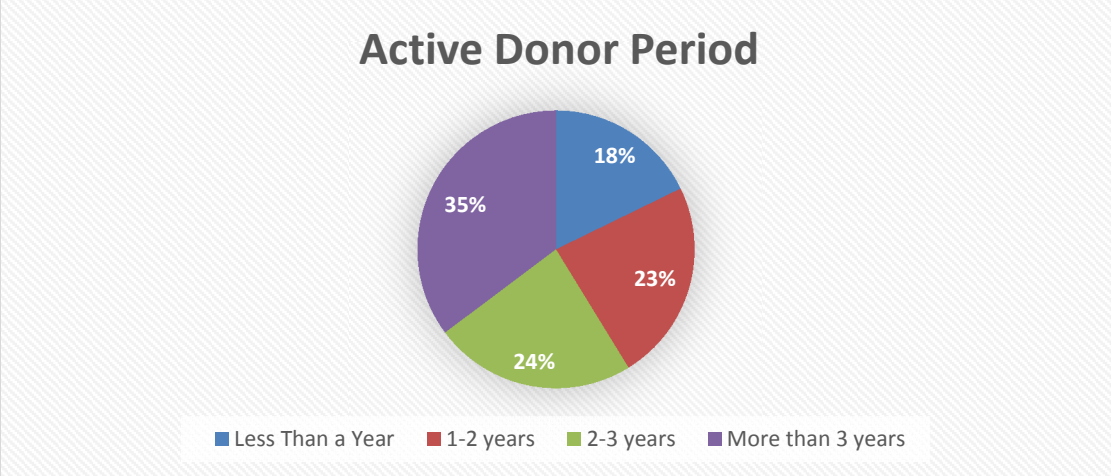


**Figure 4: Respondent donation period**

Question 2 asked how long the respondent has been donating. In this graph it is interesting to note that 35% (311 respondents) have been donating for more than three years. This is an indication that the donors may have an affinity towards the NPO as they have been donating for so long (Beldad, Snip & Van Hoof, 2014). Overall the majority, 82% have been donating for more than a year while only 18% (157 respondents) have been donating for less than a year.

### *4.2.2 Gender*

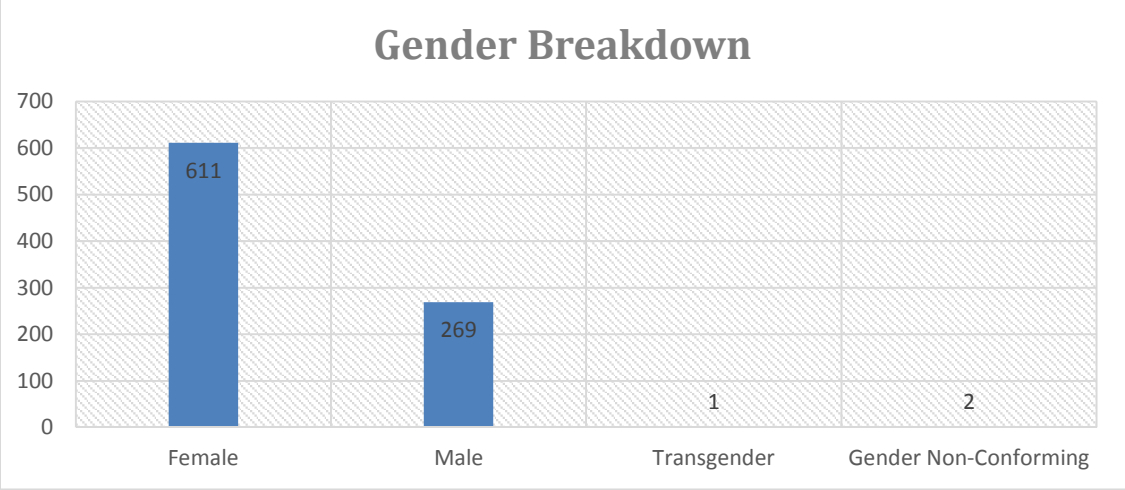


**Figure 5: Respondent gender**

There was a larger female response rate (69.2%) than the 30.5% male response rate. There were also two respondents who identified with gender non-conforming and one respondent who identified with transgender. This indicates that there are more females who donate towards MSF SA.

### *4.2.3 Age*

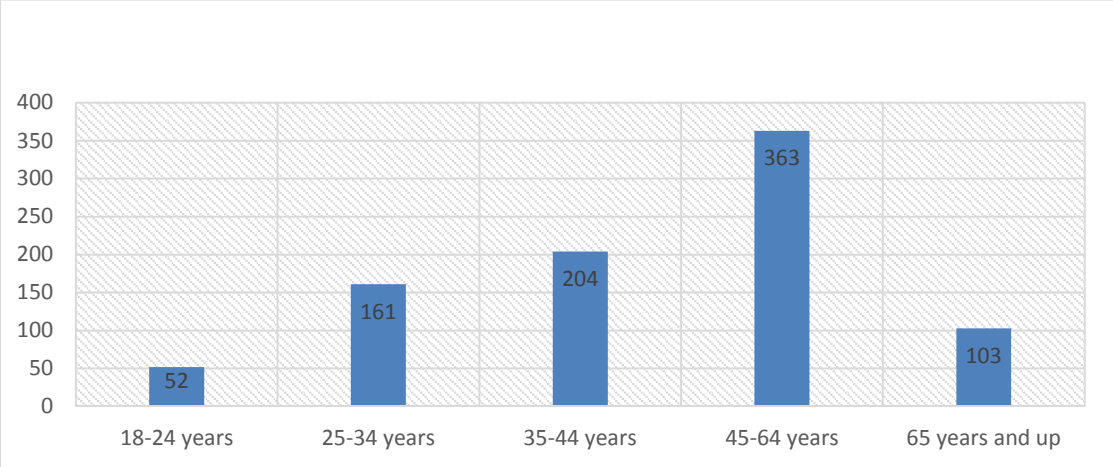


**Figure 6: Respondent age**

Looking at the age distribution, the majority of donors (41%) fall into the 45–64 years age group, 23 % in the 35–44 group, followed by the 25–34 years group at 18%. The retired age group is at 12% and the younger group/millennials is the smallest at 6% of the respondents. This concurs with previous research stating that organisations are struggling with acquiring millennial donors (Baranyi, 2011).

### *4.2.4 Initial channel of contact*

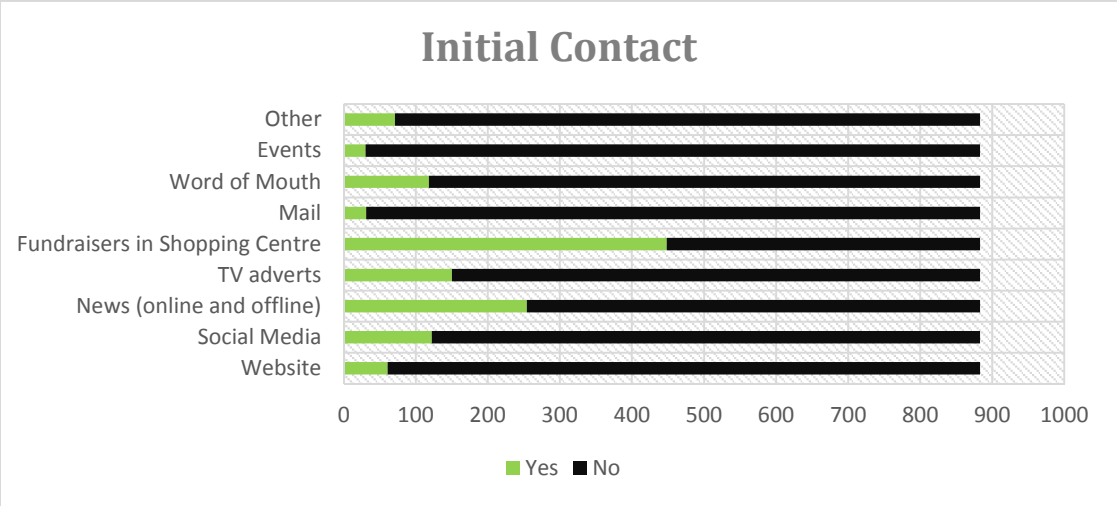


**Figure 7: Initial contact channel**

It is interesting to note that the main channel is face-to-face fundraisers in shopping centres with 448 respondents saying that this is how they first heard about MSF. The second largest initial contact channel is news (both online and offline) with 254 respondents answering yes, and the third largest is TV advertisements with 150 responses. Tied in last place are events (30 respondents) and mail (31 respondents).

### *4.2.5 Donation channel preference*

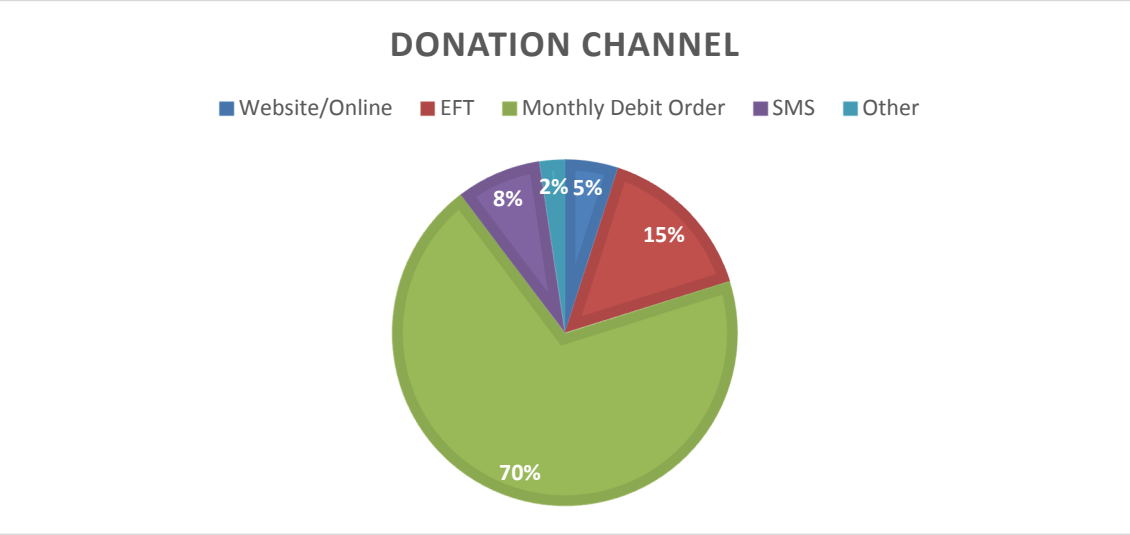


**Figure 8: Respondent donation channel**

Unsurprisingly, 70% (614 respondents) of the donors are currently regular monthly debit order donors. This is due to the strategy of MSF SA to recruit mostly monthly donors through fundraisers in shopping centres (Medecins sans Frontieres SA, 2016). The second largest channel is electronic funds transfers (EFT), in other words 15% of the donors (134 respondents) debit directly into the MSF SA bank account. The website or online is the channel with the smallest number of respondents at 44.

### *4.2.6 Marital status*

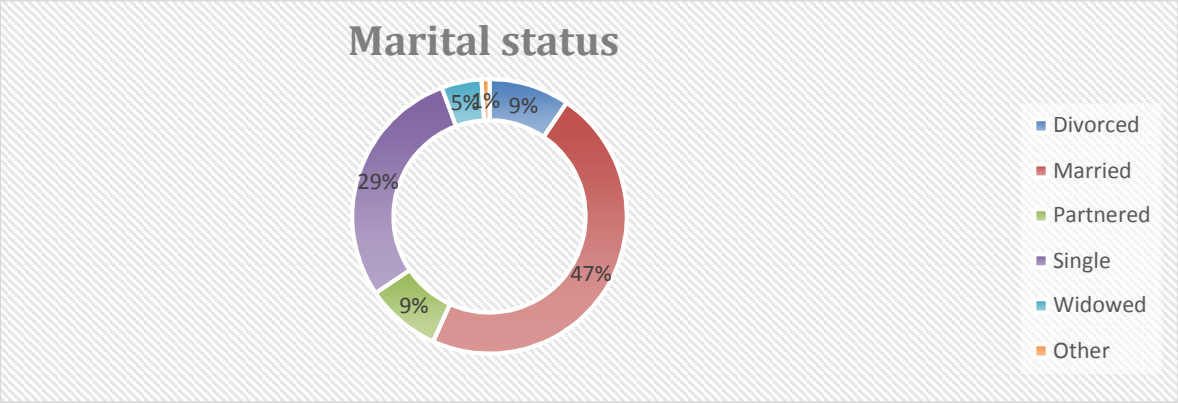


**Figure 9: Respondents' marital status**

Most of the respondents are married (417 respondents), 29% are single (254), and then there is a tie in third place between partnered (78) and divorced (84) respondents. In fourth place is widowed at 42 respondents and lastly, 8 respondents indicated "Other".

### *4.2.7 Highest academic qualification*

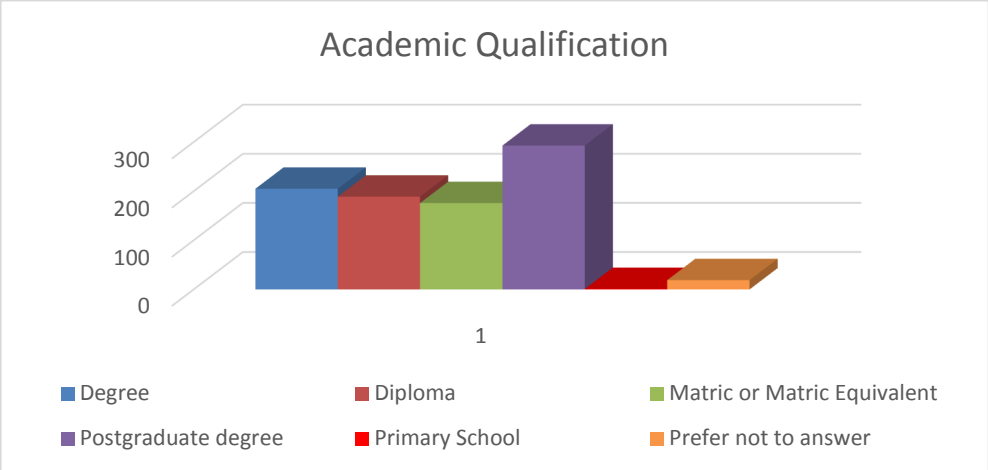


**Figure 10: Respondent qualification**

It is not surprising to see that 98% of the respondents have more than a matric or matric equivalent, as quality education has been shown to correlate to income received and ultimately excess disposable income providing opportunity for donations (Jones & Posnett, 1991). A third or 33% (293 respondents) have postgraduate degrees and 44% have a degree or diploma. The highest academic qualification of the remaining 20% (179 respondents) is then a matric or matric equivalent.

### *4.2.8 Employment*

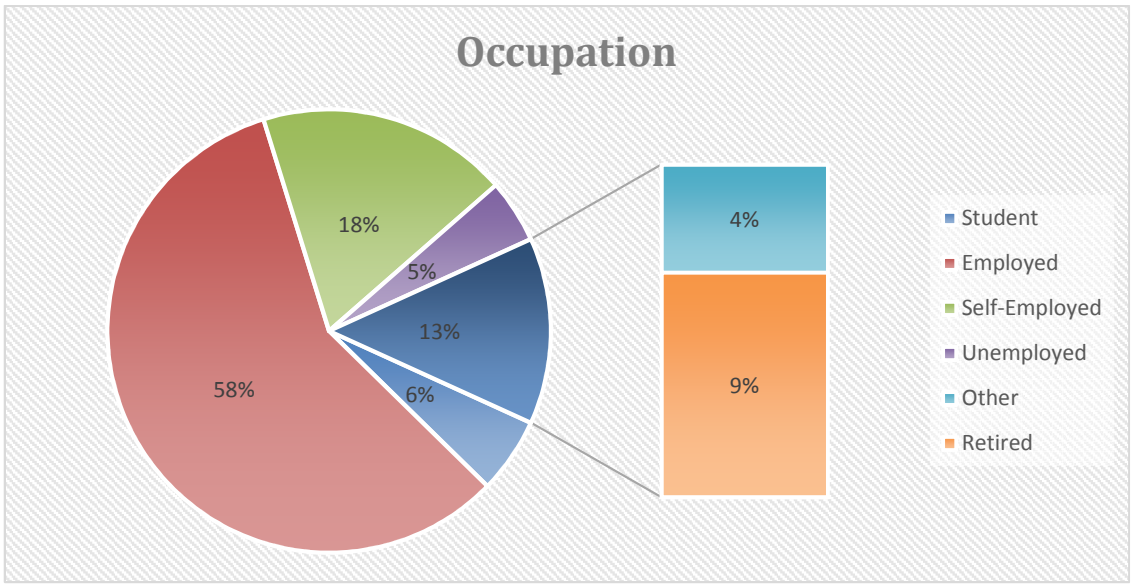


**Figure 11: Respondent occupation**

Most (76%) of the respondents are employed of whom 511 are employed by an external company and 162 work for themselves. The 41 unemployed respondents make up 5% of the sample.

The diagram above shows a 13% slice (120 respondents) that is broken up further into 4% (39 respondents) and 9% (81 respondents). The original 13% represented respondents who chose the “Other” option. However, upon further investigation by the researcher into the open-ended question, it was apparent that a large number of individuals indicated retired as an answer to this specific question; hence it was included in the results.

### *4.2.9 Population group*

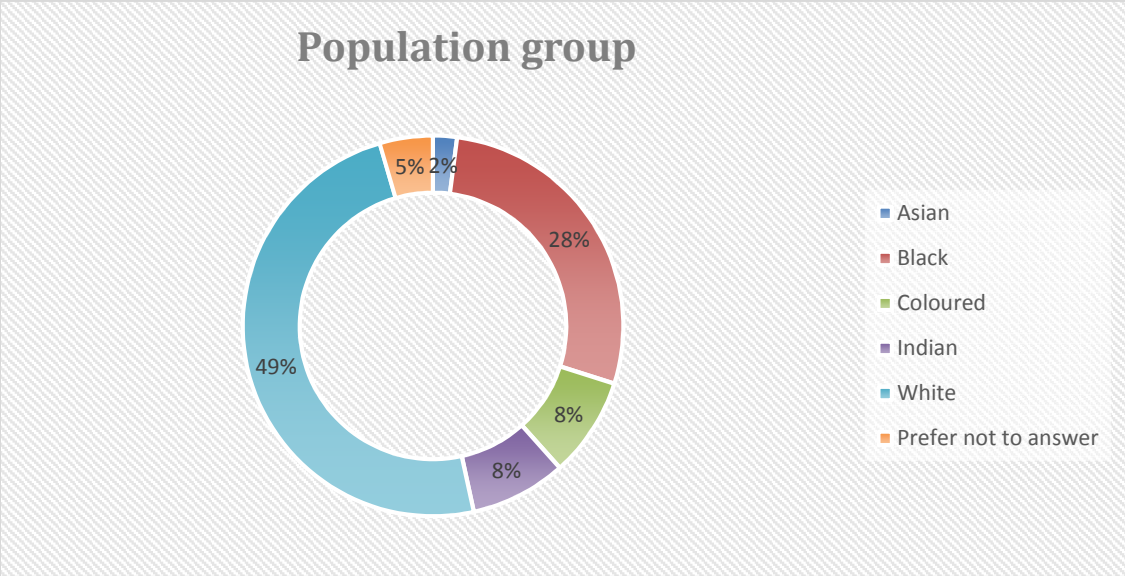


**Figure 12: Respondent's population group**

In this sample, 49% (432 respondents) identified themselves as white, 28% (284 respondents) chose black, while Indian (72 respondents) and Coloured (75 respondents) were tied at 8%. Eighteen respondents (2%) identified themselves as Asian and 40 respondents (5%) preferred not to answer.

This breakdown in race distribution is clearly not representative of the South African demographic market as the white sample (49%) represented in this study far outweighs 8% representation in the South African population. Furthermore, the African population represents 80% in South Africa but is only represented by 28% in this sample (Statistics South Africa, 2016).

However, the number of Coloured and Asian respondents in this sample correlates directly with the numbers represented in the South African population.

## 4.3. Donation constructs

Six main constructs were identified that could have an influence on donor behaviour: Pure altruism, impure altruism (reciprocity, prestige and warm glow) and guilt (anticipatory guilt and existential guilt). These six factors were represented by 31 items on a 7-point Likert scale, initially numbered from Strongly Disagree as 1 to Strongly Agree as 7 (see Appendix B & D). As these questions were Likert scale questions, the researcher applied a rescaling of the data using a distribution fitting approach in order to provide superior validity and accuracy to the results (Stacey, 2005) and so that the ordinal data of the answered Likert scale could be changed to interval. This would give a better indication of respondents' intent.

Using factor analysis, the most important factors or constructs were identified to answer the research questions mentioned in Chapter 2. Next, the factors and variables used for measuring these constructs are discussed. The first step in this process was to test the validity and reliability of the instrument using SPSS 24.

Firstly the reliability of the 31 items was tested utilising Cronbach Alpha as a measurement tool, resulting in $\alpha = 0.84$ (see Table 4 below). This result is higher than the 0.7 considered acceptable; hence the instrument was considered reliable.

Secondly the validity had to be tested, using the Kaiser-Meyer-Olkin (KMO) test. The KMO is a statistic that indicates the variance in the different variables that might indicate underlying factors that could be identified (Crane, Busby & Larson, 1991). A KMO result below 0.7 indicates that the data received are not very useful, whereas the closer the number is to 1, the more useful the data. As per Table 4 below, the result obtained was 0.88 and therefore the instrument was valid for a factor analysis.

Another test for validity is Bartlett's Test of Sphericity that tests the propositions to see whether the correlation matrix is also an identity matrix (Williams, Brown & Onsman, 2010). Significance values below 0.05 indicate that a factor analysis will be useful with the data. In Table 4 the test shows a significance level of 0.00; hence the instrument could be used for further investigation.

**Table 4: Validity tests**

| | | |
|---|---|---|
| Cronbach Alpha (α) | | 0.84 |
| KMO Measure of Sampling Adequacy | | 0.888 |
| Bartlett's Test Of Sphericity | Approx Chi-Square | 14954.44 |
| | df | 465 |
| | Significance | 0.00 |

Since there was a large number of donation motivation variables considered to be interrelated, factor analysis was done to extract the factors most relevant. As per KMO, only factors with an eigenvalue higher than 1 need to be retained. In Appendix E, Table 3, it can be seen that six factors had eigenvalues higher than 1 and needed to be retained. Together these eigenvalues account for almost 64% of the variability of the original variables. The method of extraction used was the Principal Component Analysis and Varimax with Kaiser Normalisation as the rotation.

A visual representation of the components identified by their eigenvalues can be seen in Figure 7. The higher the eigenvalue, the more important the component. Also, the components before the flat line are of use. In Figure 7 it can be seen that the six components feature in order of importance before the flat line.

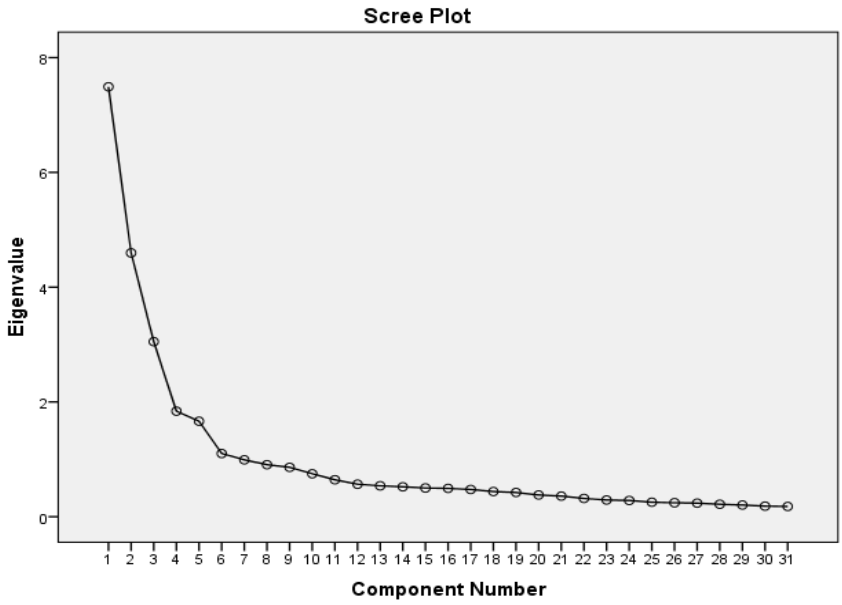


**Figure 13: Scree plot**

The factors and their loadings can be seen in Appendix E, Table 5. It is very interesting to note that some of the variables loaded on two different components (10, 12, 13 & 31), even though the researcher thought it would measure only one variable. This can be due to the fact that these variables are very closely interrelated, as they are all factors associated with donation behaviour.

The factors and their relevant loadings (<0.3) have been referred to as the different donation components in Table 5. In the end all factors had a value smaller than 0.3. There was one question that measured two components: "I donate because I want to be recognized" measured in factor two (0.596) and factor six (0.512).

### Table 5: Principle component factor analysis

| Factor | | Factor item | Factor Loading | Factor Name |
|---|---|---|---|---|
| 1 | 1 | I would feel guilty if I did not make a donation. | 0.803 | Existential Guilt |
| | 2 | I would feel sorry if I did not make a donation. | 0.816 | |
| | 3 | I would feel regretful if I did not make a donation. | 0.847 | |
| | 4 | I would feel ashamed if I did not make a donation. | 0.836 | |
| | 5 | It would be irresponsible of me not to donate. | 0.773 | |
| | 6 | I would feel guilty if I could've helped but didn't. | 0.711 | |
| | 7 | I would feel bad if I didn't help other people who needed my help. | 0.667 | |
| | 8 | I would feel sorry if I could've made a donation in the past but didn't. | 0.596 | |
| 2 | 9 | I donate because I want to be recognized. | 0.596 | Extrinsic-motivated impure altruism |
| | 10 | I donate because I want to receive praise. | 0.683 | |

| | | | | |
|---|---|---|---|---|
| | 11 | I donate to flash to others that I am helping out. | 0.738 | |
| | 12 | I only donate because I get recognition. | 0.838 | |
| | 13 | I only donate because I want to let other people know I have the financial capacity to donate. | 0.834 | |
| | 14 | I only donate because I receive some benefit in return, i.e. tax certificate, gratuity messaging. | 0.779 | |
| | 15 | I donate in order to receive publications, i.e. newsletter, annual reports. | 0.733 | |
| | 16 | I donate because I may benefit one day from the charity's work. | 0.565 | |
| 3 | 17 | I try working not towards my own well-being but rather towards the well-being of others. | -0.462 | Pure Altruism |
| | 18 | I try to work towards the well-being of society. | 0.75 | |
| | 19 | I am interested in helping others. | 0.81 | |
| | 20 | It is important for me to help others. | 0.831 | |
| | 21 | I think it is important to help populations in need. | 0.736 | |
| | 22 | My donation could help save someone's life. | 0.532 | |
| 4 | 23 | I feel good about myself after donating. | 0.812 | Warm Glow |
| | 24 | I feel generous after donating. | 0.803 | |
| | 25 | I feel happy after donating. | 0.772 | |
| | 26 | I feel that I do something meaningful when I donate. | 0.629 | |
| | 27 | I feel selfless after donating. | 0.6 | |
| 5 | 28 | I would feel bad if I could've avoided mistakes I have made in the past. | 0.817 | Anticipatory Guilt |
| | 29 | I would feel regret if I could've planned better in the past but didn't. | 0.886 | |
| | 30 | I would regret making mistakes that are avoidable. | 0.799 | |
| 6 | 31 | I donate because I want to be recognized. | 0.512 | Recognition (Impure Altruism) |
| | 32 | I prefer my donation to remain anonymous. | -0.79 | |

Below the renaming of the factors are discussed as they have changed slightly from the constructs described in Chapter 2.

**Factor 1: Existential guilt**

Factor one consists of the items used to measure existential guilt (Appendix B, Q31–35); however three items from anticipatory guilt (Appendix B, Q36, Q37 & Q41) loaded onto this factor. This is not a surprise as these items measure the same basic element (guilt), the only difference being that anticipatory guilt speaks to future happenings. Due to this result and the majority of the items measuring existential guilt, the component remained existential guilt with an eigenvalue of 6.049.

**Factor 2: Extrinsic-motivated impure altruism**

After the analysis, factor two consisted of most of the items of prestige altruism and reciprocal altruism, except one item, "I prefer my donation to remain anonymous", which loaded in factor six (Appendix B, Q25).

This is not surprising as both factors measured impure altruism. The main difference between factor two and other forms of impure altruism such as warm glow is that factor two's motivational factors are not necessarily considered intrinsic. Both prestige and reciprocal altruism are based on the idea that there is an external reward, either getting something physical (newsletter) or emotional praise and recognition (Aknin et al., 2013; Hibbert & Horne, 1996; Otto & Bolle, 2011; Schnall et al., 2010). The rest of the factors, namely guilt (existential and anticipatory), pure altruism and other forms of impure altruism (warm glow), are all at the core individually motivated for enjoyment (altruism, warm glow) or avoidance (guilt) (Kakinaka & Kotani, 2011; Murayama et al., 2016).

Hence, this factor was renamed and classified as "extrinsic-motivated impure altruism", as it now combined both extrinsically motivated prestige and reciprocity. Factor two's eigenvalue measured 5.766, as per Table 5 above.

**Factor 3: Pure altruism**

After the factor analysis, all the items in factor three used to measure pure altruism (Appendix B, Q36–41) remained in this factor and therefore factor three retained the pure altruism label. Factor 3 had an eigenvalue of 4.064, as shown in Table 5.

**Factor 4: Warm glow**

Similar to factor three, factor four's items used to measure the construct of warm glow (Appendix B, Q17–21) appeared in the factor after the analysis. Hence, the name did not change and remained warm glow with an eigenvalue of 3.616, as shown in Table 5.

**Factor 5: Anticipatory guilt**

Some of the items moved to existential guilt but the component with the remaining items (Appendix B, Q38–40) was still called anticipatory guilt with an eigenvalue of 2.968, as shown in Table 5.

**Factor 6: Recognition (impure altruism)**

In the final factor, two items loaded, both from the prestige altruism factor (Appendix B, Q22 & Q25). One of the main characteristics of prestige or impure altruism is getting external recognition, as with impure altruism in factor two. In factor six, this is still a subset of prestige. Due to the change in factor two where the externally motivated impure altruism was combined, it did not make sense to have another factor measuring prestige. As a subset of impure altruism with only one focus, factor six was therefore renamed Recognition (impure altruism) and had an eigenvalue of 1.73.

## 4.4 Result of the factor analysis

Table 6 shows the eigenvalues and mean scores of the main components after the factor analysis.

**Table 6: Factor eigenvalues**

| | Factors | Eigenvalues<br><br>Λ | Mean scores |
|---|---|---|---|
| 1 | Existential guilt | 6.049 | 1.68 |
| 2 | Extrinsic-motivated impure altruism | 5.766 | 1.207 |
| 3 | Pure altruism | 4.526 | 0.8209 |
| 4 | Warm glow | 3.616 | 0.4906 |
| 5 | Anticipatory guilt | 2.986 | 0.384 |
| 6 | Recognition (impure altruism) | 1.731 | -0.78 |

A factor is only kept if it has an eigenvalue of more than 1. The higher the eigenvalue score, the more of the loading was detected in the research. Table 6 shows that existential guilt had the highest factor score, followed by extrinsic-motivated impure altruism and so forth. Hence, when looking at the proposition in Chapter 2, all the factors the study aimed to measure are present and thus have an impact on donation behaviour.

In summary of the research questions in Chapter 2, all the motivational factors present in the decision-making process towards donation are accounted for (even though they have been regrouped) and their importance can be seen in the descending format in Table 6.

## 4.5 Mann-Whitney U and Kruskal-Wallis tests

In the following section, the results of the Kruskal-Wallis and Mann-Whitney U tests on some of the demographic information are described. The Kruskal-Wallis test was implemented to look at age and population group and the Mann-Whitney U test was applied to look at the gender breakdown. The non-parametric tests were utilised as the Shapiro-Wilk test proved significant (Appendix F, Table 2), resulting in a non-normal distribution. Although these tests are usually constructed to test hypotheses, they can also shed some light on the research propositions (Flyvbjerg, 2006).

## Gender

The Mann-Whitney U test was done to compare the non-parametric data (non-normal distribution) of the two gender groups (independent variable) with one dependent variable (factors identified). The transgender and non-conforming groups were removed before the test was run, as their percentages were too small.

A Mann-Whitney U hypotheses test was run to determine whether there is a difference in the influence of the motivational factors (named in the factors analysis) between males and females. The significance level (p value) is at 0.05. If the significance is lower than 0.05, the null hypothesis/proposition would be rejected, proving that there is a difference between the groups. However, a p-value above 0.05 means that there is no statistically significant difference between the two groups and the null hypothesis/proposition would be accepted (Ruxton & Beauchamp, 2008).

Table 7 displays a summarised version of the results (see Appendix G).

**Table 7: Mann-Whitney U test results - Gender**

| Propositions | Factor | p value | Outcomes |
|---|---|---|---|
| 1 | Existential guilt | 0.017 | Reject proposition |
| 2 | Extrinsic-motivated impure altruism | 0.247 | Accept proposition |
| 3 | Pure altruism | 0.113 | Accept proposition |
| 4 | Warm glow | 0.432 | Accept proposition |
| 5 | Anticipatory guilt | 0.532 | Accept proposition |
| 6 | Recognition | 0.122 | Accept proposition |

# Males = 246; females = 61

### *4.5.1 Proposition 1: There is no difference in existential guilt's influence on donation behaviour between males and females*

A Mann-Whitney U test was conducted to determine whether a statistically significant difference existed between the mean scores of the influence of existential guilt on donation behaviour between males and females. It was found that females (M = 454.07) are more influenced by existential guilt than males (M = 409.68). The p value (0.017) was also significant, hence the proposition was rejected.

### *4.5.2. Proposition 2: There is no difference in extrinsic motivated impure altruism's influence on donation behaviour between males and females*

A Mann-Whitney U test was conducted to determine whether a statistically significant difference existed between the mean scores of the influence of extrinsic motivation on donation behaviour between males and females. It was found that there was no statistically significant difference between females (M = 433.92) and males (M = 433.92). Hence the proposition was accepted.

### *4.5.3 Proposition 3: There is no difference between in pure altruism's influence on donation behaviour between males and females*

A Mann-Whitney U test was conducted to determine whether a statistically significant difference existed between the mean scores of the influence of pure altruism on donation behaviour between males and females. It was found that there was no statistically significant difference between females (M = 420.02) and males (M = 449.54). Hence the proposition was accepted.

### *4.5.4 Proposition 4: There is no difference in warm glow's influence on donation behaviour between males and females*

A Mann-Whitney U test was conducted to determine whether a statistically significant difference existed between the mean scores of the influence of warm glow on donation behaviour between males and females. It was found that there was no statistically significant difference between females (M = 436.03) and males (M = 450.65). Hence the proposition was accepted.

### *4.5.5 Proposition 5: There is no difference in anticipatory guilt's influence on donation behaviour between males and females*

A Mann-Whitney U test was conducted to determine whether a difference existed between the mean scores of the influence of anticipatory guilt on donation behaviour between males and females. It was found that there was no statistically significant difference between males (M = 432.42) and females (M = 436.03). Hence the proposition was accepted.

### *4.5.6 Proposition 6: There is no difference in recognition's influence on donation behaviour between males and females*

A Mann-Whitney U test was conducted to determine whether a difference existed between the mean scores of the influence of recognition on donation behaviour between males and females. It was found that there was no statistically significant difference between males (M = 420.55) and females (M = 449.28). Hence the proposition was accepted.

## Age

Kruskal-Wallis tests were done when more than two independent groups needed to be compared to an ordinal dependant variable in a non-parametric distribution. The Kruskal-Wallis test indicates when there are more than two groups that differ. In the case of a difference, a post hoc test was done to better understand the difference between these groups.

Table 8 shows a summarised version of the results (see Appendix G).

**Table 8: Kruskal-Wallis - Age**

| Proposition | Factor | p value | Outcomes |
|---|---|---|---|
| 7 | Existential guilt | 0.346 | Accept proposition |
| 8 | Extrinsic-motivated impure altruism | 0.155 | Accept proposition |
| 9 | Pure altruism | 0.528 | Accept proposition |
| 10 | Warm glow | 0.000 | Reject proposition |
| 11 | Anticipatory guilt | 0.254 | Accept proposition |
| 12 | Recognition | 0.184 | Accept proposition |

# 18–24 years old = 52; 25–34 years = 161; 35–44 years = 204; 45–64 years = 363; 65 years and up = 103

### *4.5.7 Proposition 7: There is no difference in existential guilt's influence on donation behaviour between the different age groups*

A Kruskal-Wallis test showed that there was no statistically significant difference in the influence of existential guilt among the different age groups. To demonstrate, the mean rank scores of the age groups were as follows: 18–24 years = 474; 25–34 years = 413.67; 35–44 years = 442.94; 45–64 years = 445.21; 65 and up = 421.49. Hence the proposition was accepted.

### *4.5.8 Proposition 8: There is no difference in extrinsic motivated impure altruism's influence on donation behaviour between the different age groups*

A Kruskal-Wallis test showed that there was no statistically significant difference in the influence of extrinsic-motivated impure altruism among the different age groups. To demonstrate, the mean rank scores of the age groups were as follows: 18–24 years = 496.23; 25–34 years = 428.97; 35–44 years = 412.32; 45–64 years = 456.17; 65 and up = 443.83. Hence the proposition was accepted.

### *4.5.9 Proposition 9: There is no difference in pure altruism's influence on donation behaviour between the different age groups*

A Kruskal-Wallis test showed that there was no statistically significant difference in the influence of pure altruism among the different age groups. To demonstrate, the mean rank scores of the age groups were as follows: 18–24 years = 496.67; 25–34 years = 445.07; 35–44 years = 436.58; 45–64 years = 441.72; 65 and up = 421.32. Hence the proposition was accepted.

### *4.5.10 Proposition 10: There is no difference in warm glow's influence on donation behaviour between the different age groups.*

A Kruskal-Wallis test showed that there was a statistically significant difference in the influence of warm glow among the different age groups. The p value was at 0.00. To demonstrate, the mean rank scores of the different age groups were as follows: 18–24 years = 493.02; 25–34 years = 493.94; 35–44 years = 446.50; 45–64 years = 439.39; 65 and up = 335.34. Hence the proposition was rejected.

After the post hoc test, it was noted that the main differences would occur between the age group of 65 and above and the rest of the age groups. Hence it can be deduced that older generations enjoy the act of donating more in comparison with younger generations (Appendix H, Table 2).

### *4.5.11 Proposition 11: There is no difference in anticipatory guilt's influence on donation behaviour between the different age groups*

A Kruskal-Wallis test showed that there was no statistically significant difference in the influence of anticipatory guilt among the different age groups. To demonstrate, the mean rank scores of the age groups were as follows: 18–24 years = 450.81; 25–34 years

= 478.80; 35–44 years = 418.88; 45–64 years = 440.93; 65 and up = 429.61. Hence the proposition was accepted.

#### *4.5.12 Proposition 12: There is no difference in recognition's influence on donation behaviour between the different age groups*

A Kruskal-Wallis test showed that there was no statistically significant difference in the influence of recognition among the different age groups. To demonstrate, the mean rank scores of the age groups were as follows: 18–24 years = 434.49; 25–34 years = 425.29; 35–44 years = 438.45; 45–64 years = 436.13; 65 and up = 499.54. Hence the proposition was accepted.

### Population groups

Below possible differences in the population groups are discussed. The number of individuals are supplied at the bottom of the table. The number of respondents who chose the option of "prefer not to say" to which population group they belong was removed.

Table 9 gives a summarised version of the results (see Appendix G).

**Table 9: Kruskal-Wallis - Population groups**

| Proposition | Factor | p value | Outcomes |
|---|---|---|---|
| 13 | Existential guilt | 0.00 | Reject proposition |
| 14 | Extrinsic-motivated impure altruism | 0.118 | Accept proposition |
| 15 | Pure altruism | 0.001 | Reject proposition |
| 16 | Warm glow | 0.000 | Reject proposition |
| 17 | Anticipatory guilt | 0.479 | Accept proposition |
| 18 | Recognition | 0.001 | Reject proposition |

# Black = 246; Coloured = 75; Indian = 72; White = 432; Asian = 18; Prefer not to say = 40 (removed)

#### *4.5.13 Proposition 13: There is no difference in existential guilt's influence on donation behaviour between the different population groups*

A Kruskal-Wallis test showed that there was a statistically significant difference in the influence of existential guilt among the different population groups. To demonstrate, the mean rank scores of the donation channels were as follows: Asian = 433.56; black = 469.17; Coloured = 467.96; Indian = 461.10 and white = 380.16. Hence the proposition was rejected.

In the post hoc results (Appendix H, Figure 1), the main differences in existential guilt occurred among the white population in comparison with the black and Coloured populations.

#### *4.5.14 Proposition 14: There is no difference in extrinsic motivated impure altruism's influence on donation behaviour between the different population groups*

A Kruskal-Wallis Test showed that there was no statistically significant difference of the influence of extrinsic motivation amongst the different population groups. To demonstrate the mean rank score of the donation channels are as follows: Asian=342.06; Black= 397.85; Coloured=404.67; Indian= 430.63 and White= 440.66. Hence the null hypotheses is accepted.

#### *4.5.15 Proposition 15: There is no difference in pure altruism's influence on donation behaviour between the different population groups*

A Kruskal-Wallis test showed that there was a statistically significant difference in the influence of pure altruism among the different population groups. To demonstrate, the mean rank scores of the donation channels were as follows: Asian = 529.22; black = 462.11; Coloured = 419.89; Indian = 459.97 and white = 388.73. Hence the proposition was rejected.

In the post hoc tests it was found that the main difference between the population groups can be noted between the black and white respondents (Appendix H, Figure 3).

#### *4.5.16 Proposition 16: There is no difference in warm glow's influence on donation behaviour between the different population groups*

A Kruskal-Wallis test showed that there was a statistically significant difference in the influence of warm glow among the different population groups. To demonstrate, the mean rank scores of the donation channels were as follows: Asian = 447.39; black = 508.19; Coloured = 451.67; Indian = 448.72 and white = 362.26. Hence the proposition was rejected.

In the post hoc test (Appendix H, Figure 5), it can be seen that the main differences were among the white, black and Coloured population groups.

### *4.5.17 Proposition 17: There is no difference in anticipatory guilt's influence on donation behaviour between the different population groups*

A Kruskal-Wallis test showed that there was no statistically significant difference in the influence of anticipatory guilt among the different population groups. To demonstrate, the mean rank scores of the donation channels were as follows: Asian = 519; black = 423.14; Coloured = 409.07; Indian = 403.54 and white = 422.63. Hence the proposition was accepted.

### *4.5.18 Proposition 18: There is no difference in recognition's influence on donation behaviour between the different population groups*

A Kruskal-Wallis test showed that there was a statistically significant difference in the influence of recognition among the different population groups. To demonstrate, the mean rank scores of the donation channels were as follows: Asian = 362.39; black = 414.74; Coloured = 388.67; Indian = 337.58 and white = 448.47. Hence the proposition was rejected.

The post hoc test showed that the main difference in the recognition motivational factor was between the white and the Indian communities (Appendix H).

## 4.6 Summary of the results

In Chapter 4, the results of the SPSS results were discussed. This factor analysis was carried out to indicate which motivational factors were more prominent within the MSF SA donor population. From here the differences in demographic factors, namely age, population group and gender were investigated. Propositions 1, 10, 13, 15, 16 and 18 proved significant, which indicated that there were differences between the groups. The results of the study are discussed in the following chapter.

# CHAPTER 5: DISCUSSION OF THE RESULTS

## 5.1 Introduction

The results and findings of the research on the motivational reasons to donate are discussed in this chapter. It consists of the five main research questions and the supporting testable propositions. In the first section (5.2), the first two research questions utilising the findings of the exploratory factor analysis are discussed.

In the following section (5.3), using the new factors identified, the remaining research propositions are discussed. The research questions are answered along with a discussion of the different motivational influences among the groups identified within the demographic breakdown, that is, gender, age and population groups.

The results and findings were compiled by analysing information gathered by the online survey. The results were analysed firstly using exploratory factor analysis and then the Kruskal-Wallis and Mann U Whitney tests were done using the new factor breakdown to identify the differences within the gender, age and population groups. Lastly, a post hoc test was used to identify which factors in which specific groups are statistically different.

The evaluated data stemmed from the 883 surveys completed by respondents who are active donors of MSF SA. In the gender category, the transgender and non-conforming group were omitted as the number was too small for proper analysis. Also, in the population breakdown the individuals who opted not to answer were omitted as the information would not provide any further insight for this study (n=40). The discussion takes into account findings of previous studies.

## 5.2 Research Question 1 and 2

An exploratory factor analysis was used to indicate whether the two factors, guilt and altruism were noted and which one was the most prevalent.

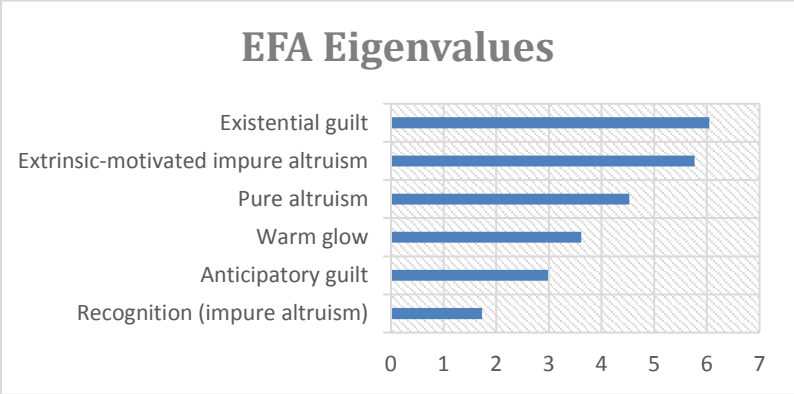


**Figure 14: EFA eigenvalues summarised**

### 5.2.1 *Research Question 1:* Is the factor altruism (pure and impure) prevalent in the research findings and the main influencer in the decision to donate?

Altruism consists of impure (warm glow, prestige and reciprocity) and pure altruism. After the factor analysis, some impure constructs, namely prestige and reciprocity, loaded onto the same factor; hence a new construct was created (extrinsic-motivated impure altruism). In Figure 14 above, it can be noted that extrinsic-motivated impure altruism lists second highest on the factor analysis at 5.76. Pure altruism is in third place at 4.5 and warm glow lists at 3.6. From this the proposition can be answered: altruism is present but is not the main influencing factor.

**Extrinsic-motivated impure altruism**

Figure 14 shows that the eigenvalue of extrinsic-motivated impure altruism is the second highest. This factor is motivated by external reward, either getting something physical or emotional praise and recognition. The final factor, recognition, falls in the same category and is discussed under this factor (Aknin et al., 2013; Hibbert et al., 1996; Otto & Bolle, 2011; Schnall et al., 2010).

In a study by Lacetera and Macis (2010), this phenomenon was investigated to determine whether the blood donation behaviour of the entire population of an Italian town would improve. They tested this against behaviour after a symbolic reward system (medals for every level) was put in place and the best donors (most frequent for example) were announced publicly. This model awarded prosocial behaviour and there was a huge improvement in the blood donations trends.

Prosocial behaviour speaks to making donations to charities, volunteering and acting for the betterment of local communities such as cleaning public areas and donating blood (Lacetera & Macis, 2010). The basis of the extrinsic-motivated impure altruism factor is to encourage prosocial behaviour.

This behaviour was prevalent in a number of studies. A study conducted in a corporate setting showed that a company is more effective if it publicly awards those employees who are concerned and act to improve their prosocial behaviour (Frey & Neckerman, 2008). Another experimental study by Ariely, Bracha and Meier (2009) confirmed that individuals would engage better in frivolous activities (typing, cycling a stationary bike) if these activities were associated with prosocial behaviour (donating to charities) and publicised publicly.

This is also very closely tied to self-image. If an individual is perceived to be now more prosocial, his self-esteem will improve (Andreoni & Petrie; 2004, Benabou, & Tirole; 2006).

In summary, this factor is multifaceted as it improves prosocial activities on an individual basis through external reward (physical reward or acknowledgement). This is a win-win situation for the public good (charities, etc.) as they get more help and the individual

walks away with a positive self-image (Andreoni & Petrie, 2004; Ariely et al., 2009; Benabou & Tirole, 2006; Neckerman & Frey, 2008).

The final factor, recognition is also classified as impure altruism and falls under this specific segment.

**Pure altruism**

Pure altruism is listed third in this study with an eigenvalue of 4.5. This factor is closely related to the second and fourth factor, indicating that respondents are altruistic. However, it needs to be further broken up into pure and impure altruism. The third factor falls within the pure altruism category whereby the individual receives utility by helping others despite not receiving rewards in return (Andreoni, 1988, 1989; Kolm, 2000).

The prevalence of pure altruism has been researched in numerous studies pertaining to prosocial behaviour (Bergstrom et al., 1986; McFadden, 2006; Mohd Arshad, 2016). There is also research suggesting that pure altruism is becoming a rare characteristic in the corporate sector and individual donors alike, as prosocial behaviour (including the donation process) becomes more of a business transaction (Moir & Taffler, 2004). This provides an insight in this ever-changing landscape and could be a point to consider when looking at the results of this study.

Although pure altruism is not the first factor listed, it can be argued that it is still very relevant, especially within the context of this market. To illustrate this point, a comparison is made between altruism and the moral quality or belief system of Ubuntu.

From a Southern African perspective, it is important to take local belief systems into consideration. Ubuntu is a belief held by individuals specifically from the Southern African region (Gade, 2012). Lötter (1997) explains: “Ubuntu means that a person becomes a person through other persons”. Thus, just as pure altruism, Ubuntu is based on individuals helping other individuals (via donation, volunteering, etc.), providing them with assistance (in a dignified way) in order for them to work towards self-actualisation (Maslow, 1943; Mohd Arshad, 2016). Ubuntu and pure altruism have been used interchangeably in a number of local studies, cementing the fact that pure altruism, even though it is labelled differently and not the highest scoring factor is still vital in the South African market (Dageid, Akintola & Sæberg, 2016; Letseka, 2012; Lutz, 2009).

**Warm glow**

The fourth factor relating to altruism is warm glow. As previously mentioned, it falls within the impure altruism sector. The main difference between warm glow and the first factor can be identified as the feeling/reward received as intrinsic in warm glow, but external in factor one.

Many studies have been done on warm glow and the fact that it positively influences individual’s donation behaviour, as people are drawn to the warm emotional reaction

they experience when donating (Aknin et al., 2013; Andreoni 1988, 1989; Harbaugh, 1998; Mohd Arshad, 2016; Schnall et al., 2010).

It is important to note that warm glow is not always easy to identify. Although there are scales developed to test for warm glow, there are underlying factors making it more complicated to distinctly pinpoint where the divide lies between pure altruism and warm glow (Fergusan et al., 2012). The reason for this is that the psychological factors influencing the decision-making process can be quite complicated (Schiffman et al., 2010). To preserve their self-image, individuals want to put their best foot forward and do not want to admit that they are receiving reward for their actions, even though it is a very personal, intrinsic emotional award when donating (Crumpler & Grossman, 2008). Due to this internal struggle, the results reflect that the loading of pure altruism and warm glow are very close, similar to previous findings.

This is discussed in more detail later in this chapter.

### 5.2.2 *Research Question 2:* Is the factor guilt prevalent in the research findings and the main influencer in the decision to donate?

#### Existential and anticipatory guilt

Guilt in this study consists of two factors, existential and anticipatory guilt. As shown in Figure 14, guilt is present among the respondents and it is also the main influencing factor with the highest eigenvalue of 6.04 within the donation decision-making process.

This does not come as a surprise, as guilt has been used as an influencing factor in the NPO advertising sphere for quite some time (Boudewyns, Turner & Paguin, 2013; Chang, 2011; Guttman & Salmon, 2004). Whether it is reactive, anticipatory or existential, guilt in essence measures the same thing. The only difference between anticipatory and existential guilt is the time frame: anticipatory guilt is the potential (or future) violation of an individual's standards; it precedes an action (Huhmann, & Brotherton, 1997; Rawlings, 1970).

Existential guilt is evoked when one compares one's own wellbeing with that of others. If there is disparity between the two, there is a need to close that gap and bring the two together by means of an action, for example a donation (Burnett & Lunsford, 1994; Izard, 1977; Ruth & Faber, 1988).

When looking at the eigenvalues of existential guilt at 6.9 and anticipatory guilt at 2.9, it can be deduced that the respondents were influenced by guilt; however the added time frame of stopping a possible future violation (future dated) was not high on the priority list of this group of respondents. This can be attributed to two things: firstly, the initial contact that the respondents have with MSF SA happens in real time, talking about current issues. The F2F fundraising channel is a direct marketing approach and the local or international news communicates about what is happening currently within the

organisation and the communities it serves (Medecins sans Frontieres SA, 2016). Secondly, it may be ascribed to the fact that South Africans already understand the importance of social responsibility. A study by Mittelman and Rojas-Méndez (2013) mentioned that individuals who find themselves living in a developing country or has travelled regularly to areas facing similar problems, already understand the impact of social responsibility, hence putting a time frame (future violations) will not have an impact.

Alternatively, it can also be attributed to the South African society with its recent history of Apartheid and the now allegedly reconciled post-Apartheid society. Similar to the Germans after the holocaust, some of the population groups, for example white South Africans (49%) have a feeling of "collective guilt" about the horrific events of the past and also towards the groups that were oppressed (Doosje, Branscombe, Spears & Manstead, 1998; Klandermans, Werner & Van Doom 2008). The white population being the largest population group among the respondents most probably had an influence on the results.

Other factors that could have influenced the reason that guilt was the most prevalent are discussed in the research propositions below when looking at gender, age and population groups.

## 5.3 Research Questions 3–5

**Table 10: Summarised research propositions for Research Questions 3–5**

| # | Propositions | p value | N |
|---|---|---|---|
| RQ 3 | Gender | | |
| 1 | There is no difference in the influence of existential guilt on donation behaviour between males and females. | 0.017 | Rejects proposition |
| 2 | There is no difference in the influence of extrinsic-motivated impure altruism on donation behaviour between males and females. | 0.247 | Accepts proposition |
| 3 | There is no difference in the influence of pure altruism on donation behaviour between males and females. | 0.113 | Accept proposition |
| 4 | There is no difference in the influence of warm glow on donation behaviour between males and females. | 0.432 | Accept proposition |
| 5 | There is no difference in the influence of anticipatory guilt on donation behaviour between males and females. | 0.532 | Accept proposition |
| 6 | There is no difference in the influence of recognition on donation behaviour between males and females. | 0.122 | Accept proposition |
| RQ4 | Age | | |
| 7 | There is no difference in the influence of the influence of existential guilt on donation behaviour between the different age groups. | 0.346 | Accept proposition |
| 8 | There is no difference in the influence of extrinsic-motivated impure altruism on donation behaviour between the different age groups. | 0.155 | Accept proposition |
| 9 | There is no difference in the influence of pure altruism on donation behaviour between the different age groups. | 0.528 | Accept proposition |
| 10 | There is no difference in the influence of warm glow on donation behaviour between the different age groups. | 0.000 | Reject proposition |
| 11 | There is no difference in the influence of anticipatory guilt on donation behaviour between the different age groups. | 0.254 | Accept proposition |

| | | | |
|---|---|---|---|
| 12 | There is no difference in the influence of recognition on donation behaviour between the different age groups. | 0.184 | Accept proposition. |
| RQ5 | Population Groups | | |
| 13 | There is no difference in the influence of extrinsic guilt on donation behaviour between the different population groups | 0.00 | Reject proposition |
| 14 | There is no difference in the influence of extrinsic-motivated impure altruism on donation behaviour between the different population groups | 0.118 | Accept proposition |
| 15 | There is no difference in the influence of pure altruism on donation behaviour between the different population groups | 0.001 | Reject proposition |
| 16 | There is no difference in the influence of warm glow on donation behaviour between the different population groups | 0.000 | Reject proposition |
| 17 | There is no difference in the influence of anticipatory guilt on donation behaviour between the different population groups | 0.479 | Accept proposition |
| 18 | There is no difference in the influence of recognition on donation behaviour between the different population groups | 0.001 | Reject proposition |

### 5.3.1 *Research Question 3:* Do donation motivational factors differ between men and women?

Table 10 is a summarised version of the research propositions for Research Questions 3–5. Research Question 3 was investigated by propositions 1–6. Support for the third research question was found in proposition 1.

Section 5.3.1.1 is a discussion of how existential guilt differs between gender groups and previous findings supporting this. In 5.3.1.2, the rest of the findings are discussed.

#### 5.3.1.1 Supported: There is a difference in the influence of existential guilt in donation behaviour between men and women.

**Table 11: SPSS output – existential guilt**

| Q3: Please indicate your gender | N | Mean Rank | Sum of Ranks |
|---|---|---|---|
| Male | 269 | **409.68** | 110204.00 |
| Female | 611 | 454.07 | 277436.00 |
| Total | 880 | | |

As can be seen in Table 11, the mean rank differs quite substantially between males and females, which is an indication that females feel more existential guilt than males.

This can be confirmed by a multitude of studies. The first example is a psychological study done by Argyle (1994) where equity theory is discussed. Equity theory focuses on the integrity in all interpersonal relationships (Chebat & Slusarczyk, 2005). A breakdown or a threat of inequity in a relationship causes distress until it is restored. Distress also includes feelings of guilt and anger. In the study it was noted that more women were affected.

Females feel more existential guilt than males because the most prevalent fundraising response channels (448 respondents) is face-to-face fundraising, which is a direct sales approach building new interpersonal relationships. It is apparent that this relationship building tactic is influenced by equity theory as well as relationship management theory in order to influence the donor to follow through with their promise of a donation (Waters, 2008, 2011; Chang, 2014).

In a study by Chang and Lee (2011), there was a need to better understand the messaging used by charities to get donations, comparing males and females. They found that different messaging influenced each gender group in a different way; males were more convinced by altruistic messaging and females more convinced by an egoistic appeal. An egoistic appeal utilises triggers to invoke, among others, guilt, hence influencing the women's decision to donate (Basil et al., 2008; Chang, 2014; Chang & Lee, 2011).

#### 5.3.1.2 Not Supported: There is no difference in the influence of different factors on donation behaviour between males and females.

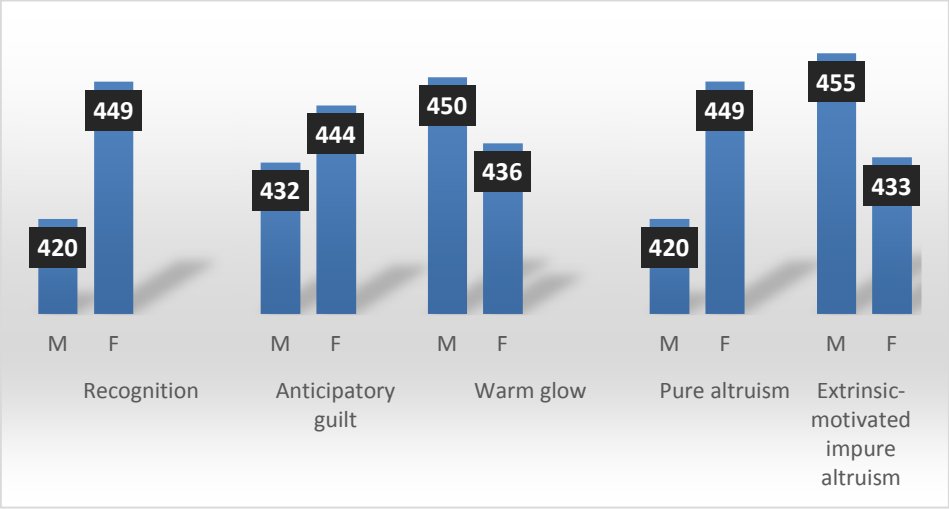


**Figure 15: Mean scores of the Mann-Whitney U test**

Figure 15 gives the results of the Mann-Whitney U test, looking at proposition 2 to 6. Although small differences can be seen in the mean scores, not one of these propositions were significant and needed to be mentioned going forward in this specific study.

It is interesting to note that there is no significant difference between male and female behaviour when it comes to donation motivational influence of extrinsically motivated impure altruism, pure altruism, warm glow, anticipatory guilt and recognition.

This can be explained by looking at the decision-making model discussed in Chapter 1. When making a decision, input, process and output play a role. Each of these three steps are specific to the individual, as making a decision is based on deeper personalised psychological motivations, attitudes and personality. Gender roles also have an influence in the socio-economical and psychological makeup of an individual. However studies have shown that, although women score higher on the propensity to help, motivational factors and ultimately giving behaviours are not that different between the sexes (Einolf, 2011; Wiepking & Bekkers, 2012). Hence we can conclude that the role that gender fulfils does not have a noticeable impact in this case (Kahneman et al., 1999; Rozin, 1999; Schiffman et. al., 2010).

### *5.3.2 Research Question 4: Do donation motivational factors differ between younger and older generations?*

In Table 10, the summarised version of the research propositions are illustrated for Research Question 4 with propositions 7–12 investigating this question.

Support for the fourth research question was found in proposition 10. In section 5.3.2.1, the influence on different age groups are discussed as well as previous findings supporting this result. In section 5.3.2.2, the rest of the findings are reviewed.

#### 5.3.2.1 Supported: There is a difference in the influence of warm glow on donation behaviour among the different age groups.

In Figure 16 below shows the results of the post hoc test. The age group 65 and above differs from all the other age groups (Appendix H, Figure 2). The scores reveals very little difference in the age groups 18–64 years but the age group 65 and above shows that warm glow is less of a donation motivation than for the other age groups. This phenomenon is discussed in the following segment.

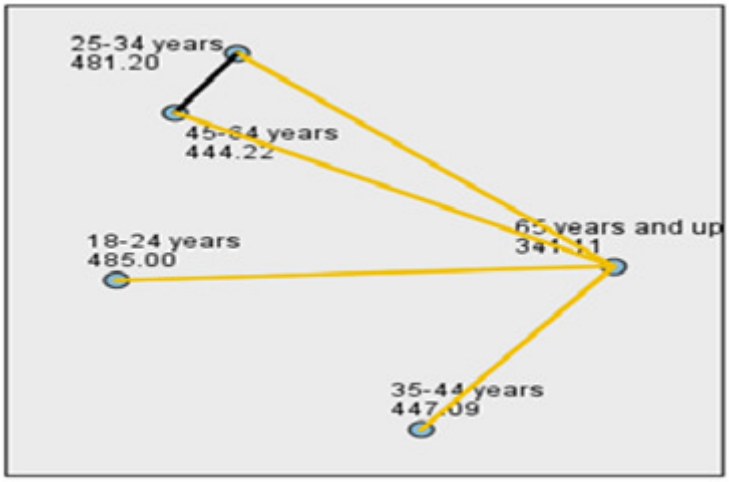


**Figure 16: Kruskal-Wallis post hoc test: Age groups**

The different generations can be described as follows: Matures (1900–1942), Baby Boomers (1943–1960), Generation X (1961–1981), Generation Y/Millennials (1982–1991) and the Generation Z/iGeneration (1991–today) (Johnston, 2013). The generation in question (65+ years) falls into the Baby Boomer generation.

Previous studies on generational donation behaviour established that Baby Boomers are influenced by very realistic, pragmatic factors, namely providing assistance for the less fortunate and addressing the needs of the community. Baby Boomers will also look at the financial implications of a donation, specifically why and how the money is being raised, and whether a government shortfall is the reason why funds need to be collected from the public. Younger generations (X and Y) are more idealistic, donating because they want to make the world a better place and not paying particular attention to the financial side as much as the older groups (Hartnet & Matan, 2014).

Before making a donation, Baby Boomers and older generations make a calculated decision about which specific charities to support, backed up by their belief system and researched vigorously (Hartnett & Matan, 2014; Indiana University, 2008; Patrons, 2013). Generations X and Y are more relaxed and the decision to donate is influenced by external factors such as their peers and impulse giving (Fromm, & Garton, 2013; Patrons, 2013).

From this we can deduce that Baby Boomers make rational, well-thought-out decisions prescribing to their values when it comes to the donation science. Warm glow does not play a role in a Baby Boomer's donating behaviour, as the act of donation is a calculated rational decision for Baby Boomers and is seen differently compared to the younger, more relaxed, impulsive generations (Hartnet & Matan, 2014; Johnston, 2013).

5.3.2.2 No Support: There is no difference in the influence of motivational factors on donation behaviour between the different age groups.

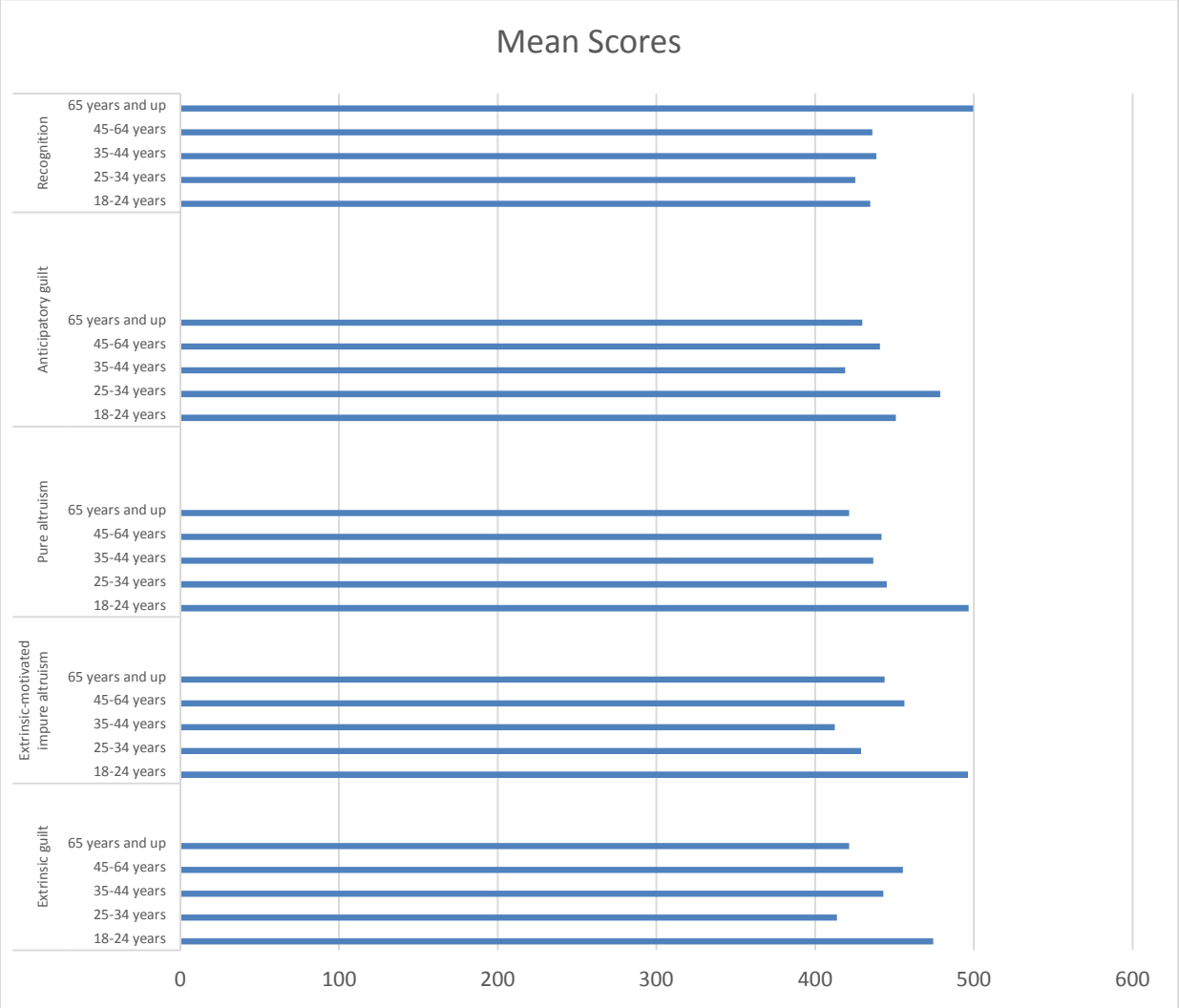


**Figure 17: Mean scores of the Kruskal-Wallis post hoc test – Age group**

In Figure 17 it is interesting to note that even though there were some differences in the mean scores of the different age groups, none of them was statistically significant. Hence it can be deduced that there is no difference in the motivational factors, namely extrinsic and anticipatory guilt, extrinsic-motivated impure altruism, recognition and pure altruism, between the different age groups.

Numerous studies in various disciplines such as psychological and managerial sciences and studies into prosocial behaviour have investigated the differences between generations. These studies identified the characteristics and behavioural attributes of each generation. However, due to the social science aspect, one cannot assume that an individual belonging to a specific generation will have all the attributes and characteristics ascribed to that generation. Generational influence is fluid and one individual can have characteristics from different generations, which explains the phenomena in this study (Gibson, Greenwood & Murphy, 2009; Hartnett & Matan, 2014; Indiana University, 2008; Lyons & Kuron, 2014).

### *5.3.3 Research Question 5: Do donation motivational factors differ between population groups?*

In Table 10, the summarised version of the research propositions are illustrated for Research Question 5, with propositions 13–18 investigating this question.

Support for Research Question 5 was found in propositions 13, 15, 16 and 18. In the following sections, 5.3.3.1–5.3.3.4, the various influences on the different population groups and previous findings supporting this are discussed. Section 5.3.3.5 deals with the findings that are not supporting Research Question 5.

5.3.3.1 Supported: There is a difference in the influence of extrinsic guilt on donation behaviour between the different population groups.

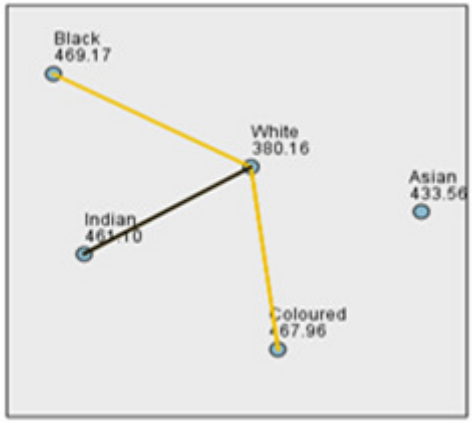


**Figure 18: Kruskal-Wallis post hoc test: Population groups and existential guilt**

Figure 18 above shows the results of the post hoc test (Appendix H, Table1), where it can be noted that the biggest differences occur between three groups – the white population differs from the black population and the Coloured population. In the Indian, Asian, Coloured and black population groups, the guilt factor is very closely related, with the white population as the outlier in this regard. Below follows a discussion of the white population group's relationship with the other groups and how this connects with the guilt factor.

This phenomenon can be explained by looking at a number of studies on guilt behaviour in different groups. The study by Freeman et al (2009) mentioned earlier refers to the Social Dominance theory, whereby groups who have been in power (oppressors) feel guilty and consequently take an action to assist the previously powerless (oppressed) groups by way of a donation or other prosocial activities to stop the cognitive dissonance. This makes sense seeing that the groups helped by MSF SA are marginalised individuals the world over, including in South Africa where the white population group was the oppressor during the Apartheid era (Bond, 2014; MSF SA, 2016).

Another factor as mentioned above is collective guilt, which is also a phenomenon that applies to this specific population group within the historical context of South Africa (Doosje et al., 1998; Werner & Van Doom, 2008).

As race is such a dividing and classifying factor in South Africa, studies have also been done specifically on "White Guilt". This happens when the white population group realises their privileged position in society and how other groups are disadvantaged (previously or still) (Arminio, 2001; Iyer, Leach, & Crosby, 2003).

All these theories speaks to why the white population is the absolute outlier in these results.

#### 5.3.3.2 Supported: There is a difference in the influence of pure altruism on donation behaviour between the different population groups.

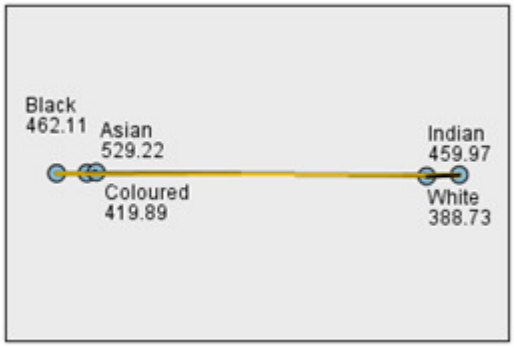


**Figure 19: Kruskal-Wallis post hoc test: Population groups and pure altruism**

In Figure 19 (also in Appendix H, Table 3), it can be seen that the major difference is between the white and the black population groups when it comes to the influence of pure altruism. Once again the white population is the outlier. The different population groups and how they relate to pure altruism are discussed below.

When looking at altruism within the different population groups, one needs to keep in mind that altruism or prosocial behaviour originates from a complex framework where social obligations and clear biological interests are at play. The social obligations speak to the cultural, religious and economic factors that shape an individual's upbringing (Carpenter & Knowles-Meyers, 2013; Madsen et al., 2007; Soosai-Nathan, Negri, & Delle Fave, 2013).

Some social obligations can have an adverse effect on altruistic behaviour. As an example two cultural orientations are discussed: individualism, which focuses on the individual and own gain; and collectivism, which focuses on sociability and group orientation (Greif, 1994; Mesquita, 2001).

A South African study by Eaton and Louw (2000) investigated university students and the cultures they subscribe to. It was found that the majority of the students with African origin subscribed to the learnings of collectivism, whereas students with European descent subscribed to individualism. It has been proven that individuals who subscribe to collectivism as a culture or orientation exhibit more altruistic behaviours than their individualistic counterparts (Thye & Lawler, 2009; Yablo & Field, 2007). The current study mimics the results of the previous studies.

It should be kept in mind that the researcher used a blanket approach (race) to identify the different population or cultural groups. Within these groups there are numerous religious and cultural groupings who differ in belief systems and cultural practices; hence their altruistic behaviours will differ as well. However, the study's results are interpreted using the current data (Eaton & Louw, 2000; Thye & Lawler, 2009).

#### 5.3.3.3 Supported: There is a difference in the influence of warm glow on donation behaviour between the different population groups.

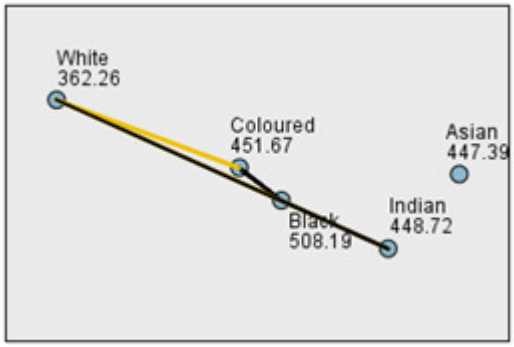


**Figure 20: SPSS results from Kruskal-Wallis post hoc test: Population groups and warm glow**

Figure 20 shows that the differences in population groups regarding the influence of warm glow on donation behaviour occur between white and black, and white and Coloured. The findings are discussed below.

As mentioned earlier in the chapter, warm glow (impure) and pure altruism are in fact difficult to differentiate as they are so closely connected. Altruism is seen as the reason to donate (mentally) and warm glow is seen as finding enjoyment in the act of donating (physically) (Andreoni, 1989; Andreoni & Payne, 2011). However, the act of donating means different things to different cultural groups.

As discussed in 5.3.3.2, the differences in collectivistic and individualistic orientations apply to altruistic tendencies and therefore also to the meaning of the act of donating. In a collectivist society, helping your community or people in need comes more naturally and is almost ingrained. In stark contrast, in an individualistic culture, your own interests

are most important and helping your community is not a priority (Madsen et al., 2007; Soosai-Nathan et al., 2013).

Hence, from the differences in population groups identified in 5.3.3.2, it can be concluded that not only does altruistic behaviour differ between groups but also the act of donating is perceived differently and so the accompanying rewards (warm glow) (Thye & Lawler, 2009; Yablo & Field, 2007).

5.3.3.4 Supported: There is a difference in the influence of recognition on donation behaviour between the different population groups.

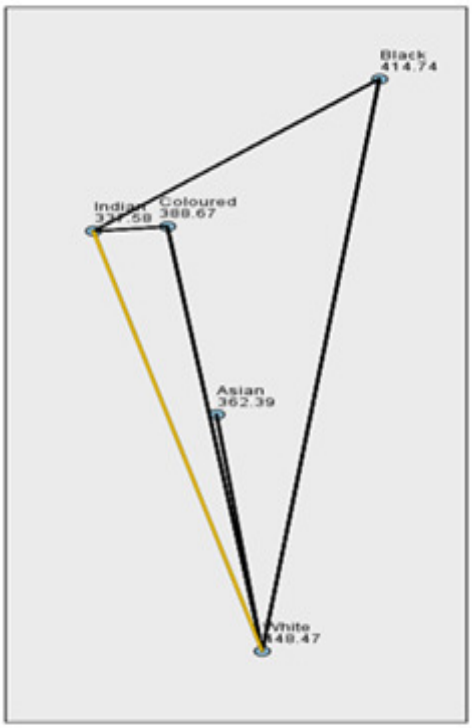


**Figure 21: Kruskal-Wallis post hoc test: Population groups and recognition**

As can be seen in Figure 21, the main difference is between two groups, white (449.47) and Indian (337). The recognition factor was originally a subset of prestige altruism, falling into the same category of extrinsic-motivated impure altruism. Even though there are differences among the other groups, the difference between these two groups (white and Indian) are the only significant difference.

When looking at the values, it can be seen that the biggest difference occurs between the white population group and the Indian (337) and Asian (362) groups. These two groups (Indian and Asian) can be categorised as shame cultures in comparison with the white group who usually subscribes to a guilt-culture (Creighton, 1990).

Since Ruth Benedict's anthropological study on shame cultures and guilt cultures, comparing America and Japan in the 1940s, this topic is still being researched today

(Benedict, 1947; Creighton, 1990; Furukawa, Tangney & Higashibara, 2012; Ghorbani & Liao, 2014).

A guilt culture refers to an internal conscience, where repentance and forgiveness play an integral part. Religions and groups that adhere to this dogma are mostly Christian and include country groups like Western Europe and the United States of America. A shame or shame-honour culture can be seen as more external, outward based, where individuals are concerned about other's negative evaluations of them, instead of an internal emotion. This includes religions like Islam and mostly countries from the East, for example India, China and Japan but also some in Africa. In the shame culture it is important to save face and also get external recognition for their actions (Benedict, 1947; Furukawa et al., 2012; Ghorbani & Liao, 2014). There is also evidence that collectivism can be associated with shame and individualism with guilt (Abrahams, Homer, Sharpe & Zhou, 2015; Benedict, 1947; El-Jamil, 2003; Hofstede, 1980).

In many of these studies it was concluded that there are differences in the donation process between a guilt culture and a shame culture, as each culture responds differently to the same stimuli (Sato & Shimomura, 2013; Wang, Tang & Wang, 2015).

According to Waters (2008), donor recognition or showing appreciation for their donation is the start of a donor relationship and is best practice worldwide. Hence, it will make sense that a shame culture needing external validation to restore honour will differ from a guilt culture, similar to the findings of this study.

5.3.3.5 Not Supported: There is no difference in these influences on donation behaviour between the different population groups.

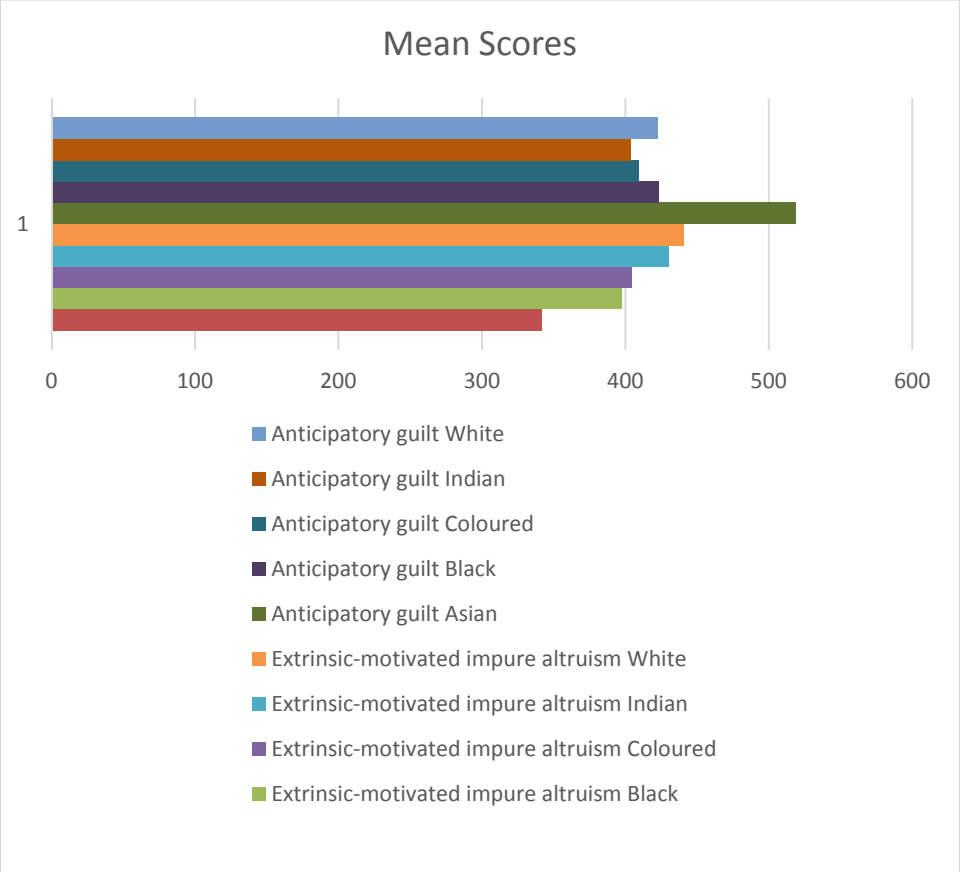


**Figure 22: Mean scores of the population groups – Kruskal-Wallis test**

In Figure 22, it can be noted that factor two, extrinsic-motivated impure altruism and factor five, anticipatory guilt do not have a significant effect on donation behaviour among the different population groups.

It is unsurprising that factor two does not show a significant difference. Previous studies established that people are motivated by external rewards, being one of the most prominent reasons why individuals donate. Consequently, population group, age or gender will not necessarily make a difference (Ferguson et al 2012; Fisher, 2004; Harbaugh 1998; Menges, Schroeder & Traub, 2005).

Looking at the fifth factor, anticipatory guilt, and revisiting the previous discussion of individuals not really being affected by it because of the proximity to similar problems, the results merely echo this point. Even though there are differences within the population groups as discussed in 5.3.3.1–5.3.3.4, the specific topic of anticipatory guilt would not be that different in the South African population (Mittelman & Rojas-Méndez, 2013).

## 5.4 Conclusion

In summary, it can be concluded that altruism (pure and impure) and guilt have an effect on the donation decision-making process. This was first established in the exploratory factor analysis, with all factors deemed relevant.

However, regarding the most prevalent factor, the first research question was disproved as altruism (pure and impure) was not the most prevalent. Existential guilt was in fact the most prevalent with the highest eigenvalue, which supported research question two.

Regarding the influence of the factors on gender, age and population, three research questions answered this question. Firstly, research question three had the support of only proposition 1 and it was proven that existential guilt does have a different effect on males and females. The remainder of the factors did not yield a significant difference between the sexes.

Secondly, research question four only had the support of proposition ten, showing that only warm glow had an effect on the older Baby Boomer generation.

Lastly, research question five gathered the most support from propositions 13, 15, 16, 18, showcasing that there is a difference in the influence of the factors on the different population groups. What was apparent is that the white population group was the outlier every time. The following chapter concludes the research report.

# CHAPTER 6: CONCLUSIONS & RECOMMENDATIONS

## 6.1 Introduction

This chapter presents the conclusions of the study. The summarised findings and conclusions are discussed in Section 6.2, followed by the recommendations and managerial and theoretical implications in Section 6.3. Lastly, to conclude the chapter, the research limitations and areas for future research are discussed in Section 6.4.

## 6.2 Conclusions of the study

The aim of this study was to understand which motivational factors influence an individual's decision to donate. As there is a distinct lack of research pertaining to developing countries, the South African donor base of MSF SA was utilised to investigate. There were five research questions of which the first two looked at altruism (pure and impure) and guilt and the prevalence of these factors among the South African MSF SA donors. To better understand donor behaviour, three more research questions investigated the differences between the demographic factors of gender, age and population groups. First, the following motivational factors were identified from previous research and applied in this study: pure altruism and impure altruistic factors comprising warm glow, prestige altruism and reciprocal altruism; and guilt consisting of two factors, namely existential and anticipatory guilt.

An exploratory factor analysis was done on all of these factors and the results proved to be quite interesting. Some of the factors loaded together to create new factors because they were so closely connected while others remained as the same loading. Finally, the factors identified were: existential guilt, a new factor loading as extrinsic-motivated impure altruism (a combination of reciprocal and prestige altruism with external validation as the golden thread), pure altruism, warm glow, anticipatory guilt and recognition (previously part of prestige altruism). After the exploratory factor analysis, the first two research questions could be answered, namely that both altruism (impure and pure) and guilt are prevalent as motivational factors in a donor's decision-making process. However, it must be noted that guilt had the highest eigenvalue, which means that it was the most prevalent factor, followed closely by extrinsic-motivated impure altruism.

This can be explained by going back to basic human interactions – the avoidance or attraction standpoint. In the guilt factor, people are trying to avoid or destroy their guilt and the only way to do this is by taking an action (donate, volunteer). This will result in a person feeling better about themselves (free of guilt) for their altruistic behaviour, even though the main motivator was grounded in something different (Elliot & Covington, 2001; Kahneman et al., 1999; Rozin, 1999).

In the case of altruism (either pure or impure), there is more of an attraction, as the act of helping has been proven to improve self-esteem. Also, specifically with regard to impure altruism, there is external reward (emotional or physical) that will make the respondent feel good about their donation and they are getting an extra reward out of it (Andreoni & Petrie, 2004; Andreoni, Rao & Trachtman, 2017; Benabou & Tirole, 2006).

This proves that, even though the internal process depends on people, the end result (donation) remains the same. The largest population group in this study's sample has collective guilt, which explains the results. It leaves the discussion open as the results show that there was very little difference in the effect of extrinsic-motivated impure altruism on the different demographic groups. The researcher is of the opinion that, if it was not for the skewed population group breakdown, it may have been the main contributing factor (Doosje et al., 1998; Werner & Van Doom, 2008).

However, it was decided that the research results needed to be further investigated by testing the elements of the demographic breakdown.

Delving deeper into the demographics of this study, a further three research questions were asked about the different effects that the identified motivational factors might have on gender, age and population groups. In chapter four and five, 18 propositions were tested to answer these three research questions. In respect of research question 3, existential guilt was the only motivational factor that showed a difference between males and females. This is consistent with findings from previous studies, where different messaging has a different influence on female behaviour (Basil, 2008; Chang, 2014; Chang & Lee, 2011). Another explanation may be found in the equity theory that is based on the building of new interpersonal relationships. The main donation channels require face-to-face interaction and so build new interpersonal relationships, which may have an influence (Argyle, 1994; Chebat & Slusarczyk, 2005).

In research question 4, the different age groups were investigated to understand if there is a difference between the motivational influences among these groups. Only proposition 10 proved a difference in the influence of warm glow between Baby Boomers and younger generations (Johnston, 2013). This can be explained by the generational differences of donating: Baby Boomers and Matures are more calculated, pragmatic donors who are not influenced emotionally, compared to younger generations (Y, X, Z), where the donation process is more impulsive and influenced by peer pressure (Hartnett & Matan, 2014; Indiana University, 2008; Patrons 2013).

The final research question investigated the population groups. Here the differences between the motivational factors among the various population groups were investigated. Research question 5 had the most support and propositions 13, 15, 16 and 18 proved that existential guilt, pure altruism, warm glow and recognition were experienced differently by the different population groups.

It is interesting to note that the main outlier in all these were the white population. When looking at the mean scores, it is important to note that most of the other groups were not significantly different, except for the white population.

This can be explained by the cultural breakdown of the population groups. When looking at previous research, it is apparent that the white population subscribes to a more individualistic, guilt-orientated culture, with influencers of the West being present. This has an influence on their behaviour and is even apparent in their prosocial behaviour (Creighton, 1990; Thye & Lawler, 2009; Yablo & Field, 2007).

The other population groups in the study, namely black, Indian, Coloured and Asian, subscribe to a more collectivistic culture, and even sometimes a shame-honour culture (Indian and Asian) and these differences in orientation will have an effect on a person's behaviour (Benedict, 1947; Furukawa et al., 2012; Ghorbani & Liao, 2014). Thus, looking at the different population groups, the main differences can be attributed to cultural orientation.

The results of this study therefore concur with those found in previous studies. However, this study aimed to contribute to the understanding of donor behaviour within a South African or emerging market framework.

## 6.3 Recommendations

The research gap originated from the current lack of research in donor behaviour in emerging markets like South Africa. The theoretical and managerial implications from this research are discussed below.

### *6.3.1 Theoretical implications*

From a theoretical viewpoint, this study adds to the limited but existing research, literature and knowledge by identifying the motivational factors most prevalent in the donor decision making model in an emerging market. Of the factors researched – existential guilt, warm glow, prestige altruism, reciprocal altruism, anticipatory guilt and pure altruism – it is interesting to note that donors are affected by existential guilt and a combination of prestige and reciprocal altruism named extrinsic-motivated impure altruism for this study.

Previous studies in developed markets found that the influence of guilt on donor behaviour is very prevalent, which can be attributed to some social theories that stem from collective guilt and the social dominance theory. However, the developed markets, for example the USA and UK are removed from the social issues and realities faced in emerging markets such as South Africa.

In this study, existential guilt is the most prevalent factor identified among this group of donors. However, after delving deeper into the respondents' demographics, it must be noted that existential guilt has a greater influence on females than on males and similarly, on the white population group compared to all the other groups. Taking into

account the history of South Africa, this makes sense as some of the theories relevant in developed countries are also applicable in this situation.

The second factor investigated was altruism. Pure and impure altruism have been proven to have an influence on donation behaviour in developed and emerging markets. Pure altruism is becoming a rare quality (Mohd Arshad, 2016; Moir & Taffler, 2004), as was also found in this study with the second highest scoring factor named extrinsic-motivated impure altruism. This factor comprises elements of prestige and reciprocal altruism, with the underlying link of external rewards, both physical and emotional. This is consistent with other studies where the donation process is seen as a transaction where both parties benefit.

After investigating further, interesting behaviour was noted. The influence of warm glow was less prevalent in older generations (Baby Boomers) than in younger generations, consistent with other studies of generational giving.

Regarding the different population groups, it was found that pure altruism, warm glow, and recognition have different influences on the different population groups, with the white population group always being the outlier. These results also concur with those of previous studies that investigated collectivism and individualism and the influence of guilt and shame cultures. South Africa is such a diverse nation that intercultural studies usually looking at two distinct groups on opposite sides of the globe can be done in one country, which is rarely the case.

Therefore, this study contributes to the understanding of consumer behaviour of donors within a multicultural, emerging market sphere.

### *6.3.2 Managerial implications*

From a practical perspective, this study holds some implications for researchers in prosocial behaviour, especially monetary donations. It also provides some insights for marketing and donor retention activities within the NPO sphere. This in turn can assist in building better relationships with the donors, keeping them for longer with more financial gain for the NPO.

Looking at the overall results, it is obvious that NPOs cannot use a blanket approach when dealing with donors. Each relationship and interaction with a donor need individualisation, speaking to that specific donor's emotional and psychological makeup. Due to the nature of NPOs, they do not always have the resources to create individualised donor paths so that segmentation can take place.

The study found that females and the white population group are more motivated by existential guilt. This could be a strategy when segmenting to look at how the message is delivered, for example what is the tone of the advertising campaign and the marketing material accompanying it.

To create existential guilt, the gap between the donor and the beneficiary needs to be highlighted. It can be useful to invite donors to first-hand experience certain projects, visit the beneficiaries or to utilise the story of an individual beneficiary (one specific patient or beneficiary) to highlight the gap that the donor could close with an action (donation).

Extrinsic-motivated impure altruism loaded second highest with no difference identified among the demographic groups of age, gender and population. From this result it can be deduced that all people are in agreement.

In this instance the external reward needs to be highlighted. This needs to be a message the donor receives from the beginning to make it seem more like a win-win transaction. Further research needs to be done by the NGO regarding what type of reward and at what stage of the donor lifecycle will satisfy which segment of donor breakdown, as some require a physical reward (thank you pack and gifts) and others prefer emotional rewards. In previous research it has been noticed that high income donors prefer emotional praise and external recognition by the NGO of their high donations (Schervish, 2005).

Except for the white population group, the influence of most of the other altruism factors, namely warm glow, pure altruism and recognition, remained the same within the other population groups. Hence, when looking at the South African market and the population breakdown, it is important to note that a collectivistic approach and a combination of guilt and shame-honour cultures need to be taken into account when conceptualising marketing material and tone.

In a collectivistic culture, the direct community is most important. An NPO should therefore emphasise its work with national problems/beneficiaries to have an impact on a collectivistic culture. When expanding beyond the community, people lose interest (Wang, 2014). In the case of MSF SA, talking about local medical problems affecting South Africans such as sexual and gender-based violence (SGBV) and drug resistant tuberculosis (DR-TB) will have a greater impact on potential donors.

Furthermore, with reference to the shame-honour culture, external recognition (tying in with extrinsic-motivated impure altruism) from the NPO is required. The results confirmed a guilt culture, with the major existential guilt factor being attributed to the white population. As the guilt culture involves an individualistic and internal process, recognition does not have to be external but a reward is still expected (Basil et al., 2008). Internal and external rewards will take place in the donor retention period, for example a gift after the first donation and every year afterwards is recommended. Showing recognition can take the form of a public display of gratitude towards major donors within the monthly newsletter, a wall with donor names and donation amounts or co-branding with some corporate companies.

Lastly, due to the ever expanding global market and donor fatigue in developed markets, emerging markets are the new focus. This study can be used as a basis when considering

the different cultural orientations and identifying the major influencers. Thus the study will be useful for NGOs to understand their prospective new donors better.

The history of NPOs shows that powerless groups (colonised lands, oppressed groups) received their help/donations from powerful groups (colonisers, oppressors, the West and Europe). This led to social inequalities where powerless groups were never fully "conscientized", that is, having a say about their circumstances, being involved in the rebuilding of their nation or community and ultimately being the empowered agents of change (Freire, 1970). These decisions always remained with the external groups of power.

Recent studies found that in order to minimise the historical power dynamic, to break free from oppressive structures and create "conscientized" individuals, one needs to create a platform. This platform needs to be created in a non-threatening way to teach people about the issues at hand and provide them with a way to get involved to make the change. Platforms can include volunteering or gift giving. This empowers the groups, as they now have a say and become the agents of change in their own lives and communities to ultimately increase their cultural capital (Arrigo & Williams, 2004). Hence, it is not only for economic gain that the NPOs have to move into emerging markets but also to empower previously disadvantaged groups in emerging markets.

## 6.4 Limitations and suggestions for further research

According to Price and Murnan (2004), the limitations of a study have an impact on the interpretations of the research findings. Below the research limitations are discussed.

### *6.4.1 Limitations*

Firstly, although this study looked at the data of a large group of respondents (883), which increased the external validity, the method of purposive sampling may have had an impact as the results were very specific to the MSF SA donor market and not the population at large. This group of people were chosen because they are donors already. However, non-donors and their reasons for not donating would have added a more balanced view.

Secondly, the data instrument distributed was a web survey, which meant that the respondents belonged to the 52% of the population within South Africa who have access to the Internet (Shapshak, 2017) and did not enable everybody to participate. Furthermore, no geographical breakdown was presented for the respondents to choose from; hence behavioural differences cannot be investigated by province, leaving a gap for over-generalisation.

Thirdly, when looking at the population breakdown, it is not representative of the population breakdown of the South African market. The biggest differences presented

because of the high percentage of white respondents, skewing the results and necessitating deeper analysis. Also, a very elementary distinguishing factor purely based on race was utilised in the population breakdown. Within each population group, there are numerous cultures and religions, each with their own distinguishing factors. Deeper analysis is required to understand the different cultural and religious groups within South Africa.

Fourthly, as this is a study on donor behaviour focusing on prosocial behaviour, questions may have been answered in a biased way where individuals presented themselves in the best possible light to enhance their self-image (Ariely et al., 2009). This would clearly have an influence on the correctness of results.

Finally, there were a limited number of constructs researched: pure and impure (warm glow, prestige and reciprocal) altruism and existential and anticipatory guilt. These were the most prevalent constructs identified in the recent literature. More constructs should be tested, especially in a diverse emerging market like South Africa.

### *6.3.1 Further research*

In this section, suggestions for future research are made. These are areas noted by the researcher that could provide interesting topics to investigate further.

Firstly, the diverse population groups within the country provide an excellent opportunity for rich cross-cultural studies regarding donor behaviour. They can be grounded in the individualistic, collectivistic or shame and guilt culture perspectives, as all these orientations are present within South Africa, unlike other cross-cultural studies, where two nations need to be compared (Lehohla, 2017; Soosai-Nathan et al., 2013).

Secondly, to build upon the reason for this research, there is a need to understand donor behaviour in other emerging or BRICS markets. Hence, it is recommended that this study be replicated in countries such as Brazil, India, China and Russia (Kurecic & Bandov, 2010; Kvint, 2010).

Thirdly, a wider exploratory research study on donation behaviour should be done to include more constructs and also other psychological factors such as religion, as it has been shown to play a larger role than expected (Benedict, 1947; Furukawa et al., 2012; Ghorbani & Liao, 2014;).

Lastly, it would be interesting to take this research to a larger external group, outside of a particular NPO, and to determine which factors or constructs deter individuals from donating. This would provide insight into branding, donor relationship management and other factors that NPOs should prioritise.

In summary, further exploration of more constructs could have provided a better understanding of the donor behaviour, especially using a deeper cultural or religious breakdown. To help NPOs with new market growth, it is important to better understand

and grow the academic knowledge of emerging market donors and to understand what the influencing and deterring factors are.

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# APPENDIX A

**The MSF International organisational structure**

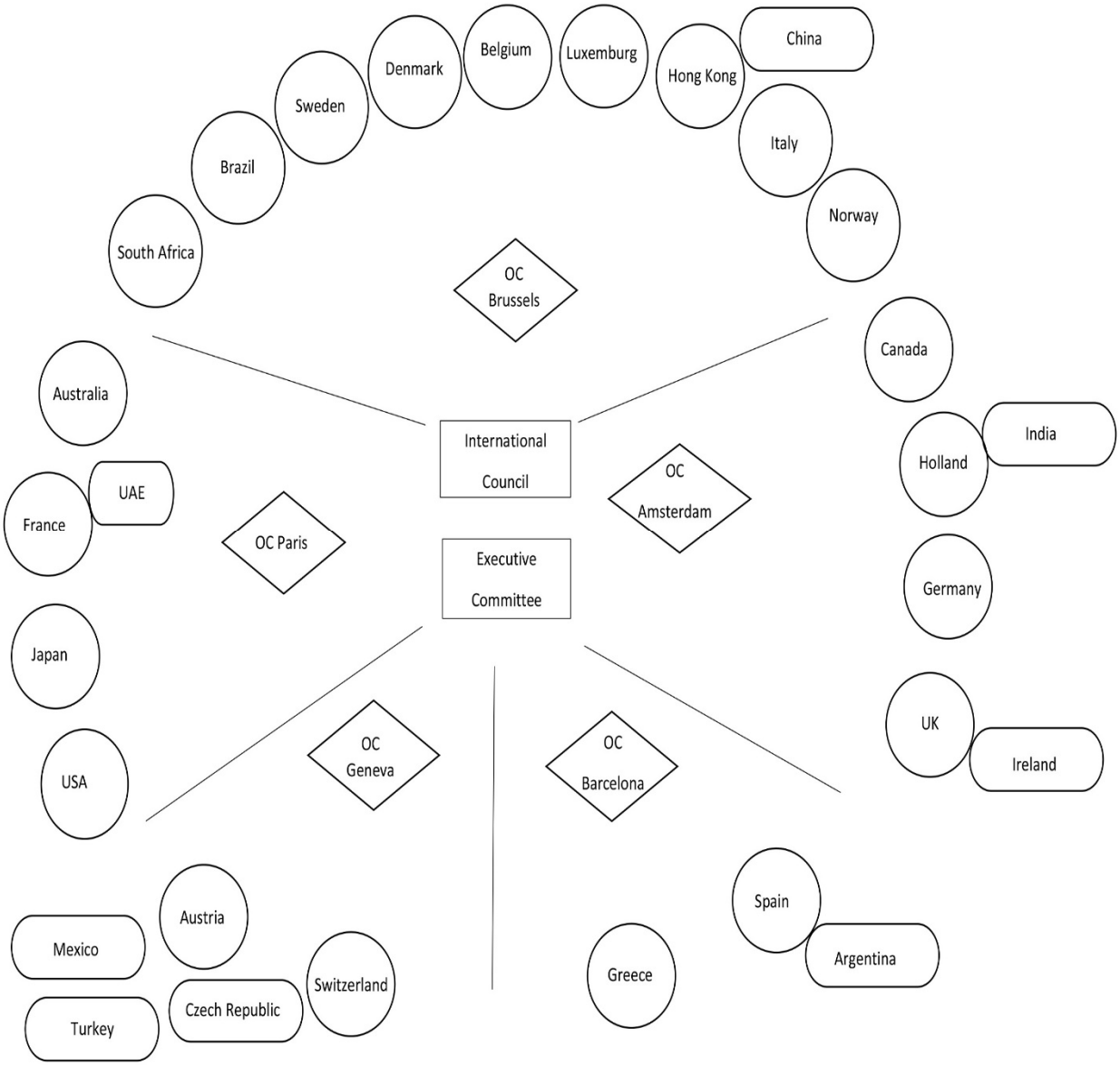



**Figure 1: MSF international organisational structure**

# APPENDIX B

## Questionnaire Developed

The University of Witwatersrand

Graduate School of Business Administration

Cell: 083 65 85 214

Email: carlisnyman@yahoo.com

Date: September 2017

Dear Sir/Madam

**RE: COMPLETION OF QUESTIONNAIRE**

I am a post graduate student at the University of Witwatersrand – Graduate School of Business Administration, undertaking a Master of Management in the field of Strategic Marketing. In order to fulfil the requirements for my degree, I have to undertake research. The topic for my research is "**Emerging Market Donors: Do altruism and guilt influence donation behaviour"**

In order to accomplish my research objectives, a questionnaire has been prepared to gather information regarding the following:

- The motivational factors deemed important by individuals when donating towards MSF/Doctors without Borders
- To understand which motivational factors are most prevalent amongst the donor community.

**Ethical considerations**

In this study the researcher aims to conduct the questionnaire in an ethical manner as prescribed by the literature. The questionnaire is set out to investigate the motivational factors towards monetary donation amongst MSF/Doctors Without Borders donor populations. In this questionnaire the ethical procedures will be followed are described below;

- Informed consent will be obtained from the respondents,
- The respondents will be protected and the data securely saved,
- The respondents, will not be deceived in any way,
- The respondents will not be harmed or stressed in any way (physically or developmentally) or cause them to lose self-esteem,

This is to kindly request you to complete the attached questionnaire. Your response will be of great value to the research.
Please be advised that your identity will remain anonymous and your feedback will be kept in utmost confidence.

Yours Sincerely

**Carli Snyman**
**carlisnyman@yahoo.com**

**Study Supervisor**
**Prof. Y. Saini**
**Yvonne.saini@wits.ac.za**

## MSF SA Donor Research Survey

Thank you for taking the time to participate in this research study. Your responses will not only ensure the successful completion of a Master's thesis but will also help MSF improve their donor engagements.

Please be advised that your identity will remain anonymous at all times and that your feedback will be treated with the utmost confidentiality and privacy.

### Screening Question

This survey comprises of 2 sections: General Information and Donor Motivations. This survey will take approximately 10 minutes to complete and there are no right or wrong answers, simply answer as truthfully as possible.

**A1 Have you donated towards Doctors without Borders (MSF SA)?**

| | | | |
|---|---|---|---|
| Yes | | No | |

## General Information

This survey comprises of 2 sections: General Information and Donor Motivation. This survey will take approximately 10 minutes to complete and there are no right or wrong answers, simply answer as truthfully as possible.

**A2 How long have you been a donor?**

| | |
|---|---|
| Less than a year | |
| 1-2 years | |
| 2-3 years | |
| More than 3 years | |

**A3 Please indicate your gender**

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Male | | Female | | Transgender | | Non-Conforming | |

**A4 Please indicate your age category**

| | |
|---|---|
| 18 – 24 years | |
| 25 – 34 years | |
| 35-44 years | |
| 45-64 years | |
| 65 years and up | |

**A5 Please indicate where you heard about Doctors without Borders (MSF)?**

| | |
|---|---|
| Website | |
| Social Media | |
| News (online and offline) | |
| TV adverts | |
| Fundraisers in shopping centres | |
| Mail (online and offline) | |
| Word of Mouth | |
| Events | |
| Other | |

**A6 Please indicate through which channel you donate?**

| | |
|---|---|
| Website/ Online | |

| | |
|---|---|
| EFT | |
| Monthly Debit order | |
| SMS | |
| Other | |

**A7 Please indicate your marital status**

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Single | | Partnered | | Married | | Divorced | | Widowed | | Other: | |

**A8 Please indicate your highest academic qualification obtained**

| | |
|---|---|
| Primary School | |
| Matric or Matric equivalent | |
| Diploma | |
| Degree | |
| Postgraduate degree | |
| Prefer not to answer | |

**A9 Please indicate your occupation**

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Student | | Employed | | Self employed | | Unemployed | | Other: | |

**A10 Please indicate which population group you identify as:**

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| Asian | | Black | | Coloured | | White | | Prefer not to answer: | |

**Donor Motivations**

In this section we will be investigating the different donor motivations.

**SECTION B: PURE ALTRUISM: (Ferguson et al., 2012)**

| **To what extent do you disagree or agree with each of the statements below:** | | **Strongly Disagree** | **Disagree** | **Slightly disagree** | **Neutral** | **Slightly agree** | **Agree** | **Strongly agree** |
|---|---|---|---|---|---|---|---|---|
| | | **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| B1 | I try working *towards my own well-being* rather than towards the well-being of others | | | | | | | |
| B2 | I try to work *towards the well-being of society* | | | | | | | |
| B3 | I am *interested* in helping others | | | | | | | |
| B4 | It is *important* for me to help others | | | | | | | |
| B5 | I think it is important to help *populations in need* | | | | | | | |
| B6 | My donation could help *save someone's life* | | | | | | | |

**SECTION C: WARM GLOW (Hsee & Zhang, 2004)**

| **To what extent do you disagree or agree with each of the statements below:** | | **Strongly Disagree** | **Disagree** | **Slightly disagree** | **Neutral** | **Slightly agree** | **Agree** | **Strongly agree** |
|---|---|---|---|---|---|---|---|---|
| | | **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| C1 | I feel *good* about myself after donating | | | | | | | |
| C2 | I feel *generous* after donating | | | | | | | |
| C3 | I feel *happy* after donating | | | | | | | |
| C4 | I feel that I *do something meaningful* when I donate | | | | | | | |
| C5 | I feel *selfless* after donating | | | | | | | |

**SECTION D: PRESTIGE ALTRUISM (Harbough, 1998; Glazer and Conrad; 1996; Hur, 2006)**

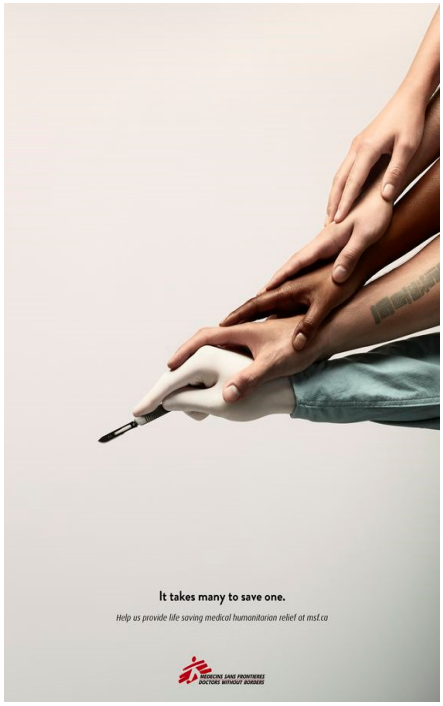
| To what extent do you disagree or agree with the following statements: | | Strongly disagree | Disagree | Slightly disagree | Neutral | Slightly agree | Agree | Strongly agree |
|---|---|---|---|---|---|---|---|---|
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| D1 | I donate because I want to be *recognized* | | | | | | | |
| D2 | I donate because I want to *receive praise* | | | | | | | |
| D3 | I prefer my donation to *remain anonymous* | | | | | | | |
| D4 | I donate to *flash* to others that I am helping out | | | | | | | |
| D5 | I only donate because I get *recognition* | | | | | | | |
| D6 | I only donate because I want to let *other people know I have the financial capacity* to donate | | | | | | | |

**SECTION E: RECIPROCITY (Sargeant, Ford, Wes, 2005; Chompff, 2009)**

| Please indicate to what extent you disagree or agree with each statement below. | | Strongly disagree | Disagree | Slightly disagree | Neutral | Slightly agree | Agree | Strongly agree |
|---|---|---|---|---|---|---|---|---|
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| E1 | I only donate, because I *receive some benefit in return* i.e. tax certificate, gratuity messaging | | | | | | | |
| E2 | I donate in order to *receive publications* i.e. newsletter, annual reports | | | | | | | |
| E3 | I donate because I may *benefit one day* from the charity's work | | | | | | | |

**Donor Motivation (continued)**

Please have a look at this advert done by our colleagues at MSF Canada, illustrating how important donors are to enable lifesaving work. Please answer the questions below.




**Based on the advert above,** to what extent do you disagree or agree with each of the statements below

**SECTION F: EXISTENTIAL GUILT (Basil, Ridgway, Basil; 2008)**

| **Please indicate to what extent you disagree or agree with each statement below.** | | **Strongly disagree** | **Disagree** | **Slightly disagree** | **Neutral** | **Slightly agree** | **Agree** | **Strongly agree** |
|---|---|---|---|---|---|---|---|---|
| | | **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| H1 | I would feel *guilty* if I did not make a donation | | | | | | | |
| H2 | I would feel *sorry* if I did not make a donation | | | | | | | |
| H3 | I would feel *regretful* if I did not make a donation | | | | | | | |
| H4 | I would feel *ashamed* if I did not make a donation | | | | | | | |
| H5 | It would be *irresponsible* of me not to donate. | | | | | | | |

**SECTION G: ANTICIPATORY GUILT (Bessarabova,Turner,Fink, & Blustein, 2015;Ceder, 2017)**

| **Please indicate to what extent you disagree or agree with each statement below.** | | **Strongly disagree** | **Disagree** | **Slightly disagree** | **Neutral** | **Slightly agree** | **Agree** | **Strongly agree** |
|---|---|---|---|---|---|---|---|---|
| | | **1** | **2** | **3** | **4** | **5** | **6** | **7** |
| H1 | I would feel *guilty if I could've helped but didn't*. | | | | | | | |
| H2 | I would feel *bad* if I didn't help other people who needed my help. | | | | | | | |
| H3 | I would feel bad if I could've avoided mistakes I have made in the past | | | | | | | |
| H4 | I would feel regret if I could've planned better in the past but didn't. | | | | | | | |
| H5 | I would regret making mistakes that are avoidable | | | | | | | |
| H6 | I would feel *sorry if I could've made a donation in the past but didn't*. | | | | | | | |

Thank you for taking the time to complete this questionnaire.

# Appendix C

## Consistency Matrix

**Research Problems:**

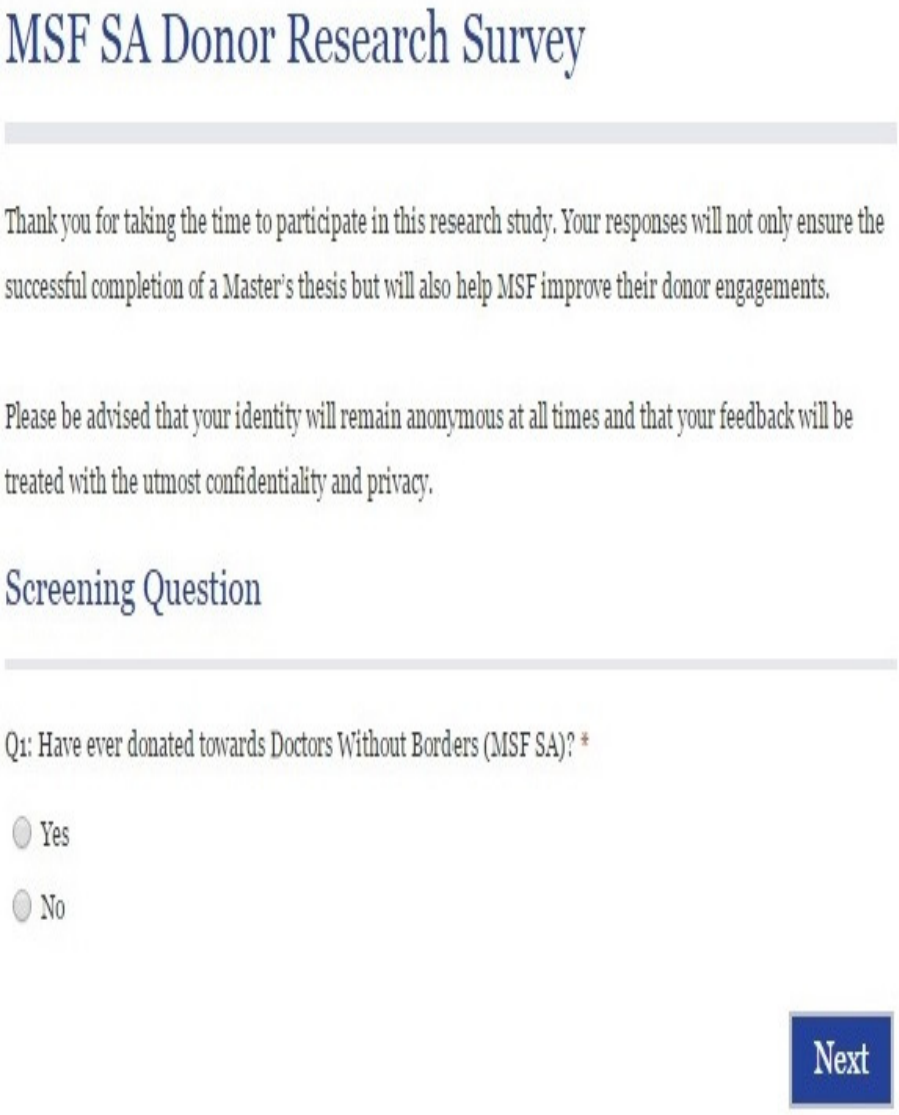
| Sub Problem | Literature Review |
|---|---|
| Does pure altruism influence the decision to donate. | (Otto & Bolle, 2011; Shnall, Roper, & Fessler, 2010; Aknin, Barrington-Leigh, Dunn, Helliwell, Burns, Biswas-Diener, Kemeza ,Nyende, Ashton-James, Norton, 2013; Ferguson et al. (2012) |
| Does warm glow influence the decision to donate. | (Otto & Bolle, 2011; Shnall, Roper, & Fessler, 2010; Aknin, Barrington-Leigh, Dunn, Helliwell, Burns, Biswas-Diener, Kemeza ,Nyende, Ashton-James, Norton, 2013) (Hsee & Zhang, 2004) |
| Does prestige altruism influence the decision to donate. | (Otto & Bolle,2011; Schnall, Roper, & Fessler, 2010; knin, Barrington-Leigh, Dunn, Helliwell, Burns, Biswas-Diener, Kemeza ,Nyende, Ashton-James, Norton, 2013 **Harbough, 1998; Glazer and Conrad; 1996; Hur, 2006)** |
| Does reciprocal altruism influence the decision to donate. | (Otto & Bolle, 2011; Schnall, Roper, & Fessler, 2010; Aknin, Barrington-Leigh, Dunn, Helliwell, Burns, Biswas-Diene(Sargeant, Ford, Wes, 2005; Chompff, 2009, Kemeza ,Nyende, Ashton-James, Norton, 2013) |
| Does existential guilt influence the decision to donate. | (Rawlings, 1970; Lwin & Phau, 2014; Izard, 1977, Basil, Ridgway, Basil, 2008) |
| Does Anticipatory Guilt influence the decision to donate. | (Bessarabova,Turner,Fink, & Blustein, 2015;Ceder, 2017) |

| Research Questions | Source of Data | Type of data | Analysis | Instrument |
|---|---|---|---|---|
| **There is a positive relationship between pure altruism and the decision to donate.** | Ferguson et al. (2012) | Interval | SPSS to analyse quantitative | Likert scale Questions in a quantitative |
| **There is a positive relationship between warm glow and the decision to donate** | (Hsee & Zhang, 2004) | Interval | SPSS to analyse quantitative data | Likert scale Questions in a quantitative questionnaire |
| **There is a positive relationship between prestige altruism and the decision to donate** | **(Harbough, 1998; Glazer and Conrad; 1996; Hur, 2006)** | Interval | SPSS to analyse quantitative | Likert scale Questions in a quantitative |
| **There is a positive relationship between reciprocal altruism and the decision to donate** | (Sargeant, Ford, Wes, 2005; Chompff, 2009) | Interval | SPSS to analyse quantitative | Likert scale Questions in a quantitative |
| **There is a positive relationship between existential guilt and the decision to donate** | (Basil, Ridgway, Basil; 2008) | Interval | SPSS to analyse quantitative data | Likert scale Questions in a quantitative questionnaire |
| **(There is a positive relationship between anticipatory guilt and the decision to donate** | (Bessarabova,Turner,Fink, & Blustein, 2015;Ceder, 2017) | Interval | SPSS to analyse quantitative | Likert scale Questions in a quantitative |

**Table 1: Consistency matrix**

# Appendix D

**Online Questionnaire Screenshots**



## General Information

This survey comprises of 4 sections: General Information, Donor Motivation, Donor Care, and Donor Interests. This survey will take approximately 10 minutes to complete and there are no right or wrong answers, simply answer as truthfully as possible.

In this section basic details will be captured.

Q2: How long have you been a donor? *

- Less than a year
- 1-2 years
- 2-3 years
- More than 3 years

Q3: Please indicate your gender *

- Male
- Female
- Transgender
- Non Conforming

Q4: Please indicate your age range *

- 18-24 years
- 25-34 years
- 35-44 years
- 45-64 years
- 65 years and up

Q5: Please indicate where you heard about Doctors Without Borders (MSF SA)? *

- [ ] Website
- [ ] Social Media
- [ ] News (online or offline)
- [ ] TV adverts
- [ ] Fundraisers in shopping centres
- [ ] Mail
- [ ] Word of mouth
- [ ] Events
- [ ] Other

Q6: Please indicate via which channel you would prefer to donate *

- ( ) Website/Online
- ( ) EFT
- ( ) Monthly debit order
- ( ) SMS
- ( ) Other

Q7: Please indicate your marital status *

- ( ) Single
- ( ) Partnered
- ( ) Married
- ( ) Divorced
- ( ) Widowed

## Donor Motivation

In this section we will be investigating the different donor motivations.

Q11: To what extent do you disagree or agree with each of the statements below *

| | Strongly Disagree | Disagree | Slightly Disagree | Neutral | Slightly Agree | Agree | Strongly Agree |
|---|---|---|---|---|---|---|---|
| I try working *towards my own well-being* rather than towards the well-being of others | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I try to work *towards the well-being of society* | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I am *interested* in helping others | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| It is *important* for me to help others | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I think it is important to help *populations in need* | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| My donation could help *save someone's life* | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I feel *good* about myself after donating | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I feel *generous* after donating | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I feel *happy* after donating | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I feel that I *do something meaningful* when I donate | ○ | ○ | ○ | ○ | ○ | ○ | ○ |

Back Next

## Donor Motivation

... continued

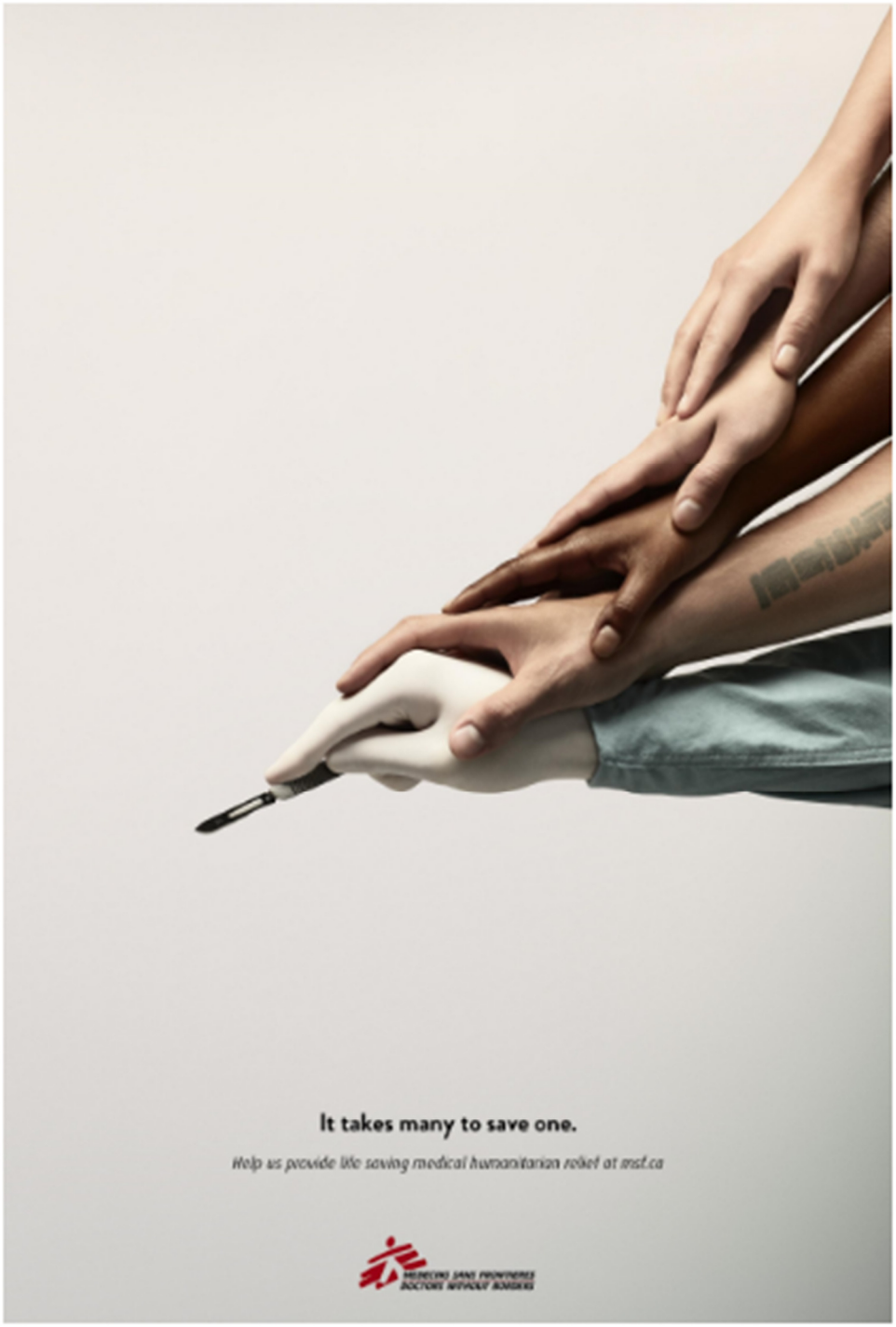
Q11: To what extent do you disagree or agree with each of the statements below *

| | Strongly Disagree | Disagree | Slightly Disagree | Neutral | Slightly Agree | Agree | Strongly Agree |
|---|---|---|---|---|---|---|---|
| I feel *selfless* after donating | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I donate because I want to be *recognized* | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I donate because I want to *receive praise* | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I prefer my donation to *remain anonymous* | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I donate to *flash* to others that I am helping out | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I only donate because I get *recognition* | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I only donate because I want to let *other people know I have the financial capacity* to donate | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I only donate, because I *receive some benefit in return* i.e. tax certificate, gratuity messaging | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I donate in order to *receive publications* i.e. newsletter, annual reports | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I donate because I may *benefit one day* from the charity's work | ○ | ○ | ○ | ○ | ○ | ○ | ○ |

Back Next

## Donor Motivation

Please have a look at this advert done by our colleagues at MSF Canada, illustrating how important donors are to enable lifesaving work. Please answer the questions below.




Q12: **Based on the advert above**, to what extent do you disagree or agree with each of the statements below *

| | Strongly Disagree | Disagree | Slightly Disagree | Neutral | Slightly Agree | Agree | Strongly Agree |
|---|---|---|---|---|---|---|---|
| I would feel *guilty* if I did not make a donation | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I would feel *sorry* if I did not make a donation | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I would feel *regretful* if I did not make a donation | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I would feel *ashamed* if I did not make a donation | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| It would be *irresponsible* of me not to donate | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I would feel *guilty if I could've helped but didn't.* | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I would feel *bad* if I didn't help other people who needed my help. | ○ | ○ | ○ | ○ | ○ | ○ | ○ |

Q13: Based on your previous, **personal experiences**, to what extent do you disagree or agree with each of the statements below *

| | Strongly Disagree | Disagree | Slightly Disagree | Neutral | Slightly Agree | Agree | Strongly Agree |
|---|---|---|---|---|---|---|---|
| I would feel bad if I could've avoided mistakes I have made in the past | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I would feel regret if I could've planned better in the past but didn't. | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I would regret making mistakes that are avoidable | ○ | ○ | ○ | ○ | ○ | ○ | ○ |
| I would feel *sorry if I could've made a donation in the past but didn't.* | ○ | ○ | ○ | ○ | ○ | ○ | ○ |

# Appendix E

## Results Factor Analysis

**Table 1: KMO and Bartlett's Test**

**KMO and Bartlett's Test**

| | | |
|---|---|---|
| Kaiser-Meyer-Olkin Measure of Sampling Adequacy. | | .888 |
| Bartlett's Test of Sphericity | Approx. Chi-Square | 14954.442 |
| | df | 465 |
| | Sig. | .000 |

**Table 2: Communalities**

**Communalities**

| | Initial | Extraction |
|---|---|---|
| I try working towards my own well-being rather than towards the well-being of others | 1.000 | .336 |
| I try to work towards the well-being of society | 1.000 | .580 |
| I am interested in helping others | 1.000 | .732 |

| | | |
|---|---|---|
| It is important for me to help others | 1.000 | .763 |
| I think it is important to help populations in need | 1.000 | .629 |
| My donation could help save someone's life | 1.000 | .480 |
| I feel good about myself after donating | 1.000 | .744 |
| I feel generous after donating | 1.000 | .710 |
| I feel happy after donating | 1.000 | .740 |
| I feel that I do something meaningful when I donate | 1.000 | .595 |
| I feel selfless after donating | 1.000 | .397 |
| I donate because I want to be recognized | 1.000 | .642 |
| I donate because I want to receive praise | 1.000 | .675 |
| I prefer my donation to remain anonymous | 1.000 | .638 |
| I donate to flash to others that I am helping out | 1.000 | .613 |

| | | |
|---|---|---|
| I only donate because I get recognition | 1.000 | .732 |
| I only donate because I want to let other people know I have the financial capacity to donate | 1.000 | .704 |
| I only donate, because I receive some benefit in return i.e. tax certificate, gratuity messaging | 1.000 | .637 |
| I donate in order to receive publications i.e. newsletter, annual reports | 1.000 | .556 |
| I donate because I may benefit one day from the charity's work | 1.000 | .402 |
| I would feel guilty if I did not make a donation | 1.000 | .679 |
| I would feel sorry if I did not make a donation | 1.000 | .687 |
| I would feel regretful if I did not make a donation | 1.000 | .738 |
| I would feel ashamed if I did not make a donation | 1.000 | .723 |
| It would be irresponsible of me not to donate | 1.000 | .620 |
| I would feel guilty if I could've helped but didn't. | 1.000 | .610 |

| | | |
|---|---|---|
| I would feel bad if I didn't help other people who needed my help. | 1.000 | .566 |
| I would feel bad if I could've avoided mistakes I have made in the past | 1.000 | .691 |
| I would feel regret if I could've planned better in the past but didn't. | 1.000 | .829 |
| I would regret making mistakes that are avoidable | 1.000 | .703 |
| I would feel sorry if I could've made a donation in the past but didn't. | 1.000 | .594 |

Extraction Method: Principal Component Analysis.

## Table 3: Total Variance

**Total Variance Explained**

| Component | Initial Eigenvalues | | | Extraction Sums of Squared Loadings | | | Rotation Sums of Squared Loadings | | |
|---|---|---|---|---|---|---|---|---|---|
| | Total | % of Variance | Cumulative % | Total | % of Variance | Cumulative % | Total | % of Variance | Cumulative % |
| 1 | 7.492 | 24.166 | 24.166 | 7.492 | 24.166 | 24.166 | 4.971 | 16.036 | 16.036 |
| 2 | 4.597 | 14.827 | 38.994 | 4.597 | 14.827 | 38.994 | 4.374 | 14.109 | 30.145 |
| 3 | 3.050 | 9.840 | 48.834 | 3.050 | 9.840 | 48.834 | 3.516 | 11.341 | 41.486 |
| 4 | 1.840 | 5.934 | 54.768 | 1.840 | 5.934 | 54.768 | 3.144 | 10.143 | 51.629 |
| 5 | 1.664 | 5.367 | 60.135 | 1.664 | 5.367 | 60.135 | 2.419 | 7.804 | 59.434 |
| 6 | 1.102 | 3.553 | 63.688 | 1.102 | 3.553 | 63.688 | 1.319 | 4.254 | 63.688 |
| 7 | .991 | 3.197 | 66.885 | | | | | | |
| 8 | .907 | 2.925 | 69.811 | | | | | | |
| 9 | .861 | 2.777 | 72.587 | | | | | | |
| 10 | .748 | 2.414 | 75.001 | | | | | | |
| 11 | .644 | 2.078 | 77.079 | | | | | | |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 12 | .566 | 1.825 | 78.905 | | | | | | |
| 13 | .539 | 1.739 | 80.644 | | | | | | |
| 14 | .521 | 1.681 | 82.325 | | | | | | |
| 15 | .500 | 1.614 | 83.939 | | | | | | |
| 16 | .494 | 1.593 | 85.531 | | | | | | |
| 17 | .475 | 1.532 | 87.063 | | | | | | |
| 18 | .438 | 1.414 | 88.477 | | | | | | |
| 19 | .423 | 1.364 | 89.841 | | | | | | |
| 20 | .379 | 1.222 | 91.063 | | | | | | |
| 21 | .359 | 1.159 | 92.222 | | | | | | |
| 22 | .319 | 1.029 | 93.251 | | | | | | |
| 23 | .291 | .940 | 94.191 | | | | | | |
| 24 | .283 | .914 | 95.105 | | | | | | |
| 25 | .253 | .815 | 95.920 | | | | | | |
| 26 | .243 | .784 | 96.704 | | | | | | |
| 27 | .237 | .764 | 97.469 | | | | | | |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 28 | .218 | .704 | 98.172 | | | | | | |
| 29 | .203 | .656 | 98.828 | | | | | | |
| 30 | .184 | .595 | 99.423 | | | | | | |
| 31 | .179 | .577 | 100.000 | | | | | | |

Extraction Method: Principal Component Analysis.

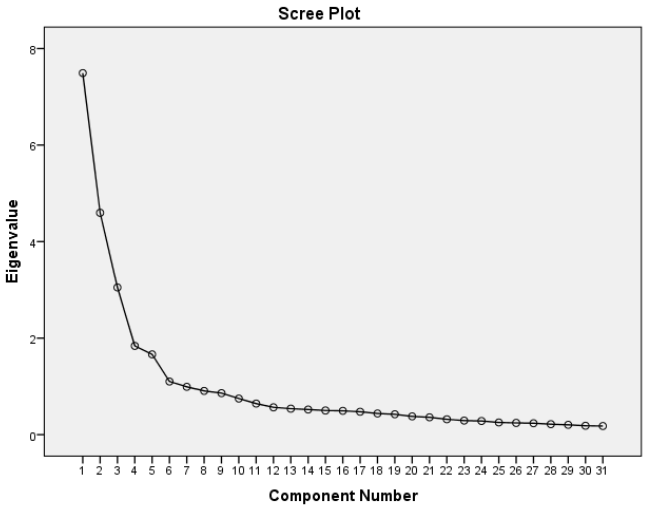



**Figure 1: Scree Plot**

## Table 4: Component Matrix

**Component Matrix[a]**

| Component Matrix | | | | | | |
|---|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4 | 5 | 6 |
| I try working towards my own well-being rather than towards the well-being of others | | | | | | |
| I try to work towards the well-being of society | 0.482 | | | | 0.459 | |
| I am interested in helping others | 0.602 | | 0.442 | | | |
| It is important for me to help others | 0.626 | | 0.424 | | 0.41 | |
| I think it is important to help populations in need | 0.589 | | 0.405 | | | |
| My donation could help save someone's life | 0.558 | | | | | |
| I feel good about myself after donating | 0.57 | | 0.464 | | -0.419 | |
| I feel generous after donating | 0.478 | | 0.484 | | -0.449 | |
| I feel happy after donating | 0.628 | | 0.474 | | | |
| I feel that I do something meaningful when I donate | 0.598 | | 0.455 | | | |
| I feel selfless after donating | | | | | | |
| I donate because I want to be recognized | | 0.667 | | | | |
| I donate because I want to receive praise | | 0.698 | | | | |
| I prefer my donation to remain anonymous | | | | | | 0.72 |
| I donate to flash to others that I am helping out | | 0.695 | | | | |
| I only donate because I get recognition | | 0.779 | | | | |
| I only donate because I want to let other people know I have the financial capacity to donate | | 0.746 | | | | |
| I only donate, because I receive some benefit in return i.e. tax certificate, gratuity messaging | | 0.676 | | | | |
| I donate in order to receive publications i.e. newsletter, annual reports | | 0.625 | | | | |
| I donate because I may benefit one day from the charity's work | | 0.48 | | | | |
| I would feel guilty if I did not make a donation | 0.631 | | | | | |
| I would feel sorry if I did not make a donation | 0.633 | | | | | |
| I would feel regretful if I did not make a donation | 0.665 | | -0.404 | | | |
| I would feel ashamed if I did not make a donation | 0.648 | | | | | |
| It would be irresponsible of me not to donate | 0.608 | | | | | |
| I would feel guilty if I could've helped but didn't. | 0.709 | | | | | |
| I would feel bad if I didn't help other people who needed my help. | 0.699 | | | | | |
| I would feel bad if I could've avoided mistakes I have made in the past | | | | 0.684 | | |
| I would feel regret if I could've planned better in the past but didn't. | 0.401 | | | 0.726 | | |
| I would regret making mistakes that are avoidable | 0.437 | | | 0.637 | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| I would feel sorry if I could've made a donation in the past but didn't. | 0.608 | | | | | |

Extraction: Principle component Extraction

6 factors extracted

## Table 5: Rotated Component Matrix

**Rotated Component Matrix**

| | 1 | 2 | 3 | 4 | 5 | 6 |
|---|---|---|---|---|---|---|
| 1) I try working towards my own well-being rather than towards the well-being of others | | | -0.462 | | | |
| 2) I try to work towards the well-being of society | | | 0.75 | | | |
| 3) I am interested in helping others | | | 0.81 | | | |
| 4) It is important for me to help others | | | 0.831 | | | |
| 5) I think it is important to help populations in need | | | 0.736 | | | |
| 6) My donation could help save someone's life | | | 0.532 | | | |
| 7) I feel good about myself after donating | | | | 0.812 | | |
| 8) I feel generous after donating | | | | 0.803 | | |
| 9) I feel happy after donating | | | | 0.772 | | |
| 10) I feel that I do something meaningful when I donate | | | 0.405 | 0.629 | | |
| 11) I feel selfless after donating | | | | 0.6 | | |
| 12) I donate because I want to be recognized | | 0.596 | | | | 0.51 |
| 13) I donate because I want to receive praise | | 0.683 | | | | 0.43 |
| 14) I prefer my donation to remain anonymous | | | | | | -0.79 |
| 15) I donate to flash to others that I am helping out | | 0.738 | | | | |
| 16) I only donate because I get recognition | | 0.838 | | | | |
| 17) I only donate because I want to let other people know I have the financial capacity to donate | | 0.834 | | | | |
| 18) I only donate, because I receive some benefit in return i.e. tax certificate, gratuity messaging | | 0.779 | | | | |
| 19) I donate in order to receive publications i.e. newsletter, annual reports | | 0.733 | | | | |
| 20) I donate because I may benefit one day from the charity's work | | 0.565 | | | | |
| 21) I would feel guilty if I did not make a donation | 0.803 | | | | | |
| 22) I would feel sorry if I did not make a donation | 0.816 | | | | | |
| 23) I would feel regretful if I did not make a donation | 0.847 | | | | | |
| 24) I would feel ashamed if I did not make a donation | 0.836 | | | | | |
| 25) It would be irresponsible of me not to donate | 0.773 | | | | | |
| 26) I would feel guilty if I could've helped but didn't. | 0.711 | | | | | |

| | | | | | | |
|---|---|---|---|---|---|---|
| **27) I would feel bad if I didn't help other people who needed my help.** | 0.667 | | | | | |
| **28) I would feel bad if I could've avoided mistakes I have made in the past** | | | | | 0.817 | |
| **29) I would feel regret if I could've planned better in the past but didn't.** | | | | | 0.886 | |
| **30) I would regret making mistakes that are avoidable** | | | | | 0.799 | |
| **31) I would feel sorry if I could've made a donation in the past but didn't.** | 0.596 | | | | 0.466 | |

a. Rotation converged in 6 iterations.

**Table 6: Component Transformation Matrix**

**Component Transformation Matrix**

| Component | 1 | 2 | 3 | 4 | 5 | 6 |
|---|---|---|---|---|---|---|
| 1 | .668 | -.256 | .501 | .405 | .264 | -.057 |
| 2 | .309 | .882 | -.151 | .140 | .192 | .219 |
| 3 | -.533 | .219 | .493 | .591 | -.266 | .069 |
| 4 | -.416 | -.056 | .031 | .025 | .907 | .023 |
| 5 | -.021 | .272 | .676 | -.659 | .008 | -.184 |
| 6 | -.014 | .180 | -.158 | .179 | .030 | -.954 |

# Appendix F

## Test for normality

**Table 1: Case Processing Summary**

| | Cases | | | | | |
|---|---|---|---|---|---|---|
| | Valid | | Missing | | Total | |
| | N | Percent | N | Percent | N | Percent |
| F1_ExtGuilt | 883 | 100.0% | 0 | 0.0% | 883 | 100.0% |
| F2_ExtrinsicMot | 883 | 100.0% | 0 | 0.0% | 883 | 100.0% |
| F3_Altruism | 883 | 100.0% | 0 | 0.0% | 883 | 100.0% |
| F4_Warmglow | 883 | 100.0% | 0 | 0.0% | 883 | 100.0% |
| F5_AnticipatoryGuilt | 883 | 100.0% | 0 | 0.0% | 883 | 100.0% |
| F6_Recognition | 883 | 100.0% | 0 | 0.0% | 883 | 100.0% |

**Table 2: Tests of Normality**

| | Kolmogorov-Smirnov[a] | | | Shapiro-Wilk | | |
|---|---|---|---|---|---|---|
| | Statistic | df | Sig. | Statistic | df | Sig. |

| | | | | | | |
|---|---|---|---|---|---|---|
| F1_ExtGuilt | .032 | 883 | .033 | .996 | 883 | .012 |
| F2_ExtrinsicMot | .162 | 883 | .000 | .843 | 883 | .000 |
| F3_Altruism | .041 | 883 | .001 | .969 | 883 | .000 |
| F4_Warmglow | .023 | 883 | .200* | .993 | 883 | .000 |
| F5_AnticipatoryGuilt | .039 | 883 | .003 | .993 | 883 | .000 |
| F6_Recognition | .048 | 883 | .000 | .992 | 883 | .000 |

*. This is a lower bound of the true significance.

a. Lilliefors Significance Correction

# Appendix G

## Mann Whitney U test-Gender

**Table 1: Descriptive Statistics: Factor 1 Existential Guilt**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F1_ExtGuilt | 880 | .0006912 | 1.00153199 | -3.42334 | 2.57564 |
| Q3: Please indicate your gender | 880 | 1.69 | .461 | 1 | 2 |

**Table 2: Ranks**

| | Q3: Please indicate your gender | N | Mean Rank | Sum of Ranks |
|---|---|---|---|---|
| F1_ExtGuilt | Male | 269 | 409.68 | 110204.00 |
| | Female | 611 | 454.07 | 277436.00 |
| | Total | 880 | | |

**Table 3: Test Statistics[a]**

| | F1_ExtGuilt |
|---|---|
| Mann-Whitney U | 73889.000 |
| Wilcoxon W | 110204.000 |
| Z | -2.387 |
| Asymp. Sig. (2-tailed) | .017 |

a. Grouping Variable: Q3: Please indicate your gender

**Table 4: Descriptive Statistics: Factor 2 Extrinsic-motivated impure altruism**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F2_ExtrinsicMot | 880 | -.0008073 | 1.00027898 | -1.53774 | 6.05557 |
| Q3: Please indicate your gender | 880 | 1.69 | .461 | 1 | 2 |

**Table 5: Ranks**

| | Q3: Please indicate your gender | N | Mean Rank | Sum of Ranks |
|---|---|---|---|---|
| F2_ExtrinsicMot | Male | 269 | 455.45 | 122516.00 |
| | Female | 611 | 433.92 | 265124.00 |
| | Total | 880 | | |

**Table 6: Test Statistics[a]**

| | F2_ExtrinsicMot |
|---|---|
| Mann-Whitney U | 78158.000 |
| Wilcoxon W | 265124.000 |
| Z | -1.158 |
| Asymp. Sig. (2-tailed) | .247 |

a. Grouping Variable: Q3: Please indicate your gender

**Table 7: Descriptive Statistics: Factor 3: Pure altruism**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F3_Altruism | 880 | .0025622 | .99158596 | -4.97433 | 2.59710 |
| Q3: Please indicate your gender | 880 | 1.69 | .461 | 1 | 2 |

**Table 8: Ranks**

| | Q3: Please indicate your gender | N | Mean Rank | Sum of Ranks |
|---|---|---|---|---|
| F3_Altruism | Male | 269 | 420.02 | 112986.00 |
| | Female | 611 | 449.52 | 274654.00 |
| | Total | 880 | | |

**Table 9: Test Statistics[a]**

| | F3_Altruism |
|---|---|
| Mann-Whitney U | 76671.000 |
| Wilcoxon W | 112986.000 |
| Z | -1.586 |
| Asymp. Sig. (2-tailed) | .113 |

a. Grouping Variable: Q3: Please indicate your gender

**Table 10: Descriptive Statistics: Factor 4: Warm Glow**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F4_Warmglow | 880 | .0024052 | .99998586 | -3.63156 | 2.45180 |
| Q3: Please indicate your gender | 880 | 1.69 | .461 | 1 | 2 |

**Table 11: Ranks**

| | Q3: Please indicate your gender | N | Mean Rank | Sum of Ranks |
|---|---|---|---|---|
| F4_Warmglow | Male | 269 | 450.65 | 121224.00 |
| | Female | 611 | 436.03 | 266416.00 |
| | Total | 880 | | |

**Table 12: Test Statistics[a]**

| | F4_Warmglow |
|---|---|
| Mann-Whitney U | 79450.000 |
| Wilcoxon W | 266416.000 |
| Z | -.786 |
| Asymp. Sig. (2-tailed) | .432 |

a. Grouping Variable: Q3: Please indicate your gender

**Table 13: Descriptive Statistics: Factor 5: Anticipatory guilt**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F5_AnticipatoryGuilt | 880 | -.0010955 | 1.00133634 | -3.63320 | 2.50367 |
| Q3: Please indicate your gender | 880 | 1.69 | .461 | 1 | 2 |

**Table 14: Ranks**

| | Q3: Please indicate your gender | N | Mean Rank | Sum of Ranks |
|---|---|---|---|---|
| F5_AnticipatoryGuilt | Male | 269 | 432.42 | 116321.00 |
| | Female | 611 | 444.06 | 271319.00 |
| | Total | 880 | | |

**Table 15: Test Statistics[a]**

| | F5_Anticipatory Guilt |
|---|---|
| Mann-Whitney U | 80006.000 |
| Wilcoxon W | 116321.000 |
| Z | -.626 |
| Asymp. Sig. (2-tailed) | .532 |

a. Grouping Variable: Q3: Please indicate your gender

**Table 16: Descriptive Statistics: Factor 6:Recognition**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F6_Recognition | 880 | .0022823 | .99839623 | -4.10651 | 3.97333 |
| Q3: Please indicate your gender | 880 | 1.69 | .461 | 1 | 2 |

**Table 17: Ranks**

| | Q3: Please indicate your gender | N | Mean Rank | Sum of Ranks |
|---|---|---|---|---|
| F6_Recognition | Male | 269 | 420.55 | 113128.00 |
| | Female | 611 | 449.28 | 274512.00 |

**Table 18: Test Statistics[a]**

| | F6_Recognition |
|---|---|
| Mann-Whitney U | 76813.000 |
| Wilcoxon W | 113128.000 |
| Z | -1.545 |
| Asymp. Sig. (2-tailed) | .122 |

a. Grouping Variable: Q3: Please indicate your gender

# Appendix H

## Kruskal Wallis: Age and Population Group

## Age

**Table 1: Descriptive Statistics: Factor 1: Existential guilt**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F1_ExtGuilt | 883 | .0000000 | 1.00000000 | -3.42334 | 2.57564 |
| Q4: Please indicate your age range | 883 | 3.34 | 1.086 | 1 | 5 |

**Table 2: Ranks**

| | Q4: Please indicate your age range | N | Mean Rank |
|---|---|---|---|
| F1_ExtGuilt | 18-24 years | 52 | 474.42 |
| | 25-34 years | 161 | 413.67 |
| | 35-44 years | 204 | 442.94 |
| | 45-64 years | 363 | 455.21 |
| | 65 years and up | 103 | 421.49 |

| | | |
|---|---|---|
| Total | 883 | |

**Table 3: Test Statistics[a,b]**

| | F1_ExtGuilt |
|---|---|
| Chi-Square | 4.470 |
| df | 4 |
| Asymp. Sig. | .346 |

a. Kruskal Wallis Test

b. Grouping Variable: Q4: Please indicate your age range

**Table 4: Descriptive Statistics: Factor 2: Extrinsic-Motivated impure altruism**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F2_ExtrinsicMot | 883 | .0000000 | 1.00000000 | -1.53774 | 6.05557 |
| Q4: Please indicate your age range | 883 | 3.34 | 1.086 | 1 | 5 |

## Kruskal-Wallis Test

**Table 5: Ranks**

| | Q4: Please indicate your age range | N | Mean Rank |
|---|---|---|---|
| F2_ExtrinsicMot | 18-24 years | 52 | 496.23 |
| | 25-34 years | 161 | 428.97 |
| | 35-44 years | 204 | 412.32 |
| | 45-64 years | 363 | 456.17 |
| | 65 years and up | 103 | 443.83 |
| | Total | 883 | |

**Table 6: Test Statistics[a,b]**

| | F2_ExtrinsicMot |
|---|---|
| Chi-Square | 6.660 |
| df | 4 |
| Asymp. Sig. | .155 |

a. Kruskal Wallis Test

b. Grouping Variable: Q4: Please indicate your age range

**Table 7: Descriptive Statistics: Factor 3: Pure altruism**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F3_Altruism | 883 | .0000000 | 1.00000000 | -4.97433 | 2.59710 |
| Q4: Please indicate your age range | 883 | 3.34 | 1.086 | 1 | 5 |

**Table 8: Ranks**

| | Q4: Please indicate your age range | N | Mean Rank |
|---|---|---|---|
| F3_Altruism | 18-24 years | 52 | 496.67 |
| | 25-34 years | 161 | 445.07 |
| | 35-44 years | 204 | 436.58 |
| | 45-64 years | 363 | 441.72 |
| | 65 years and up | 103 | 421.32 |
| | Total | 883 | |

**Table 9: Test Statistics[a,b]**

| | F3_Altruism |
|---|---|
| Chi-Square | 3.183 |
| df | 4 |
| Asymp. Sig. | .528 |

Please indicate your age range

**Table 10: Descriptive Statistics: Factor 4: Warm glow**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F4_Warmglow | 883 | .0000000 | 1.00000000 | -3.63156 | 2.45180 |
| Q4: Please indicate your age range | 883 | 3.34 | 1.086 | 1 | 5 |

**Table 11: Ranks**

| | Q4: Please indicate your age range | N | Mean Rank |
|---|---|---|---|
| F4_Warmglow | 18-24 years | 52 | 493.02 |
| | 25-34 years | 161 | 493.94 |
| | 35-44 years | 204 | 446.50 |
| | 45-64 years | 363 | 439.39 |
| | 65 years and up | 103 | 335.34 |
| | Total | 883 | |

**Table 12: Test Statistics[a,b]**

| | F4_Warmglow |
|---|---|
| Chi-Square | 26.873 |
| df | 4 |
| Asymp. Sig. | .000 |

a. Kruskal Wallis Test

**Table 13: Descriptive Statistics: Factor 5: Anticipatory guilt**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F5_AnticipatoryGuilt | 883 | .0000000 | 1.00000000 | -3.63320 | 2.50367 |
| Q4: Please indicate your age range | 883 | 3.34 | 1.086 | 1 | 5 |

**Table 14: Ranks**

| | Q4: Please indicate your age range | N | Mean Rank |
|---|---|---|---|
| F5_AnticipatoryGuilt | 18-24 years | 52 | 450.81 |

| | | | |
|---|---|---|---|
| | 25-34 years | 161 | 478.80 |
| | 35-44 years | 204 | 418.88 |
| | 45-64 years | 363 | 440.93 |
| | 65 years and up | 103 | 429.61 |
| | Total | 883 | |

**Table 15: Test Statistics[a,b]**

| | F5_AnticipatoryGuilt |
|---|---|
| Chi-Square | 5.339 |
| df | 4 |
| Asymp. Sig. | .254 |

a. Kruskal Wallis Test

b. Grouping Variable: Q4: Please indicate your age range

**Table 16: Descriptive Statistics: Factor 6: Recognition**

| | N | Mean | Std. Deviation | Minimum | Maximum |
|---|---|---|---|---|---|
| F6_Recognition | 883 | .0000000 | 1.00000000 | -4.10651 | 3.97333 |
| Q4: Please indicate your age range | 883 | 3.34 | 1.086 | 1 | 5 |

**Table 17: Ranks**

| | Q4: Please indicate your age range | N | Mean Rank |
|---|---|---|---|
| F6_Recognition | 18-24 years | 52 | 434.69 |
| | 25-34 years | 161 | 425.29 |
| | 35-44 years | 204 | 438.45 |
| | 45-64 years | 363 | 436.13 |
| | 65 years and up | 103 | 499.54 |
| | Total | 883 | |

**Table 18: Test Statistics[a,b]**

| | F6_Recognition |
|---|---|
| Chi-Square | 6.209 |
| df | 4 |
| Asymp. Sig. | .184 |

a. Kruskal Wallis Test

b. Grouping Variable: Q4: Please indicate your age range

## Population Groups

**Table 19: Ranks: Factor 2: Extrinsic-Motivated impure altruism**

| | Q10: Please indicate which population group you identify as | N | Mean Rank |
|---|---|---|---|
| F2_ExtrinsicMot | Asian | 18 | 342.06 |
| | Black | 246 | 397.85 |
| | Coloured | 75 | 404.67 |

| | | | |
|---|---|---|---|
| | Indian | 72 | 430.63 |
| | White | 432 | 440.66 |
| | Total | 843 | |

**Table 20: Test Statistics[a,b]**

| | F2_ExtrinsicMot |
|---|---|
| Chi-Square | 7.366 |
| df | 4 |
| Asymp. Sig. | .118 |

**Table 21: Ranks Factor 3: Pure altruism**

| | Q10: Please indicate which population group you identify as | N | Mean Rank |
|---|---|---|---|
| F3_Altruism | Asian | 18 | 529.22 |
| | Black | 246 | 462.11 |

| | | | |
|---|---|---|---|
| | Coloured | 75 | 419.89 |
| | Indian | 72 | 459.97 |
| | White | 432 | 388.73 |
| | Total | 843 | |

**Table 22: Test Statistics[a,b]**

| | F3_Altruism |
|---|---|
| Chi-Square | 19.990 |
| df | 4 |
| Asymp. Sig. | .001 |

a. Kruskal Wallis Test

b. Grouping Variable: Q10: Please indicate which population group you identify as

**Table 23: Ranks Factor 4: Warm glow**

| | Q10: Please indicate which population group you identify as | N | Mean Rank |
|---|---|---|---|
| F4_Warmglow | Asian | 18 | 447.39 |
| | Black | 246 | 508.19 |
| | Coloured | 75 | 451.67 |
| | Indian | 72 | 448.72 |
| | White | 432 | 362.26 |
| | Total | 843 | |

**Table 24: Test Statistics[a,b]**

| | F4_Warmglow |
|---|---|
| Chi-Square | 59.000 |
| df | 4 |
| Asymp. Sig. | .000 |

a. Kruskal Wallis Test

b. Grouping Variable: Q10: Please indicate which population group you identify as

**Table 25: Ranks Factor 5: Anticipatory guilt**

| | Q10: Please indicate which population group you identify as | N | Mean Rank |
|---|---|---|---|
| F5_AnticipatoryGuilt | Asian | 18 | 519.00 |
| | Black | 246 | 423.14 |
| | Coloured | 75 | 409.07 |
| | Indian | 72 | 403.54 |
| | White | 432 | 422.63 |
| | Total | 843 | |

**Table 26: Test Statistics[a,b]**

| | F5_Anticipatory Guilt |
|---|---|
| Chi-Square | 3.490 |
| df | 4 |
| Asymp. Sig. | .479 |

a. Kruskal Wallis Test

b. Grouping Variable: Q10: Please indicate which population group you identify as

**Table 27: Ranks Factor 6: Recognition**

| | Q10: Please indicate which population group you identify as | N | Mean Rank |
|---|---|---|---|
| F6_Recognition | Asian | 18 | 362.39 |
| | Black | 246 | 414.74 |
| | Coloured | 75 | 388.67 |

| | | | |
|---|---|---|---|
| | Indian | 72 | 337.58 |
| | White | 432 | 448.47 |
| | Total | 843 | |

**Table 28: Test Statistics[a,b]**

| | F6_Recognition |
|---|---|
| Chi-Square | 16.463 |
| df | 4 |
| Asymp. Sig. | .002 |

**Table 29: Ranks Factor 1: Existential Guilt**

| | Q10: Please indicate which population group you identify as | N | Mean Rank |
|---|---|---|---|
| F1_ExtGuilt | Asian | 18 | 433.56 |
| | Black | 246 | 469.17 |
| | Coloured | 75 | 467.96 |
| | Indian | 72 | 461.10 |

| | | | |
|---|---|---|---|
| | White | 432 | 380.16 |
| | Total | 843 | |

**Table 30. Test Statistics[a,b]**

| | F1_ExtGuilt |
|---|---|
| Chi-Square | 26.551 |
| df | 4 |
| Asymp. Sig. | .000 |

a. Kruskal Wallis Test

b. Grouping Variable: Q10: Please indicate which population group you identify as

# Appendix I: Post Hoc Tests

## 1. Population Groups

### *1.1 Population groups and existential guilt*

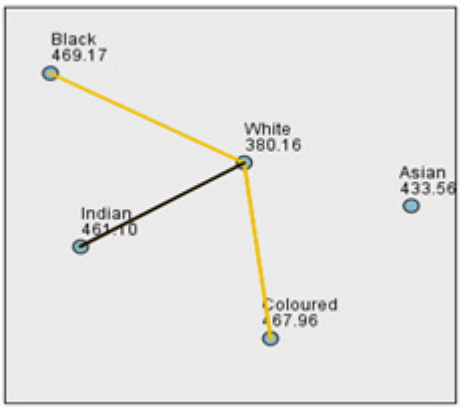
**Table 1: Population Groups and Existential guilt**

**Hypothesis Test Summary**

| | Null Hypothesis | Test | Sig. | Decision |
|---|---|---|---|---|
| 1 | The distribution of F1_ExtGuilt is the same across categories of Q10: Please indicate which population group you identify as. | Independent-Samples Kruskal-Wallis Test | .000 | Reject the null hypothesis. |
| 2 | The distribution of F1_ExtGuilt is the same across categories of Q10: Please indicate which population group you identify as. | Independent-Samples Jonckheere-Terpstra Test for Ordered Alternatives | .000 | Reject the null hypothesis. |

Asymptotic significances are displayed. The significance level is .05.

**Pairwise Comparisons of Q10: Please indicate which population group you identify as**




Each node shows the sample average rank of Q10: Please indicate which population group you identify as.

| Sample1-Sample2 | Test Statistic | Std. Error | Std. Test Statistic | Sig. | Adj.Sig. |
|---|---|---|---|---|---|
| White-Asian | 53.391 | 58.576 | .911 | .362 | 1.000 |
| White-Indian | 80.933 | 30.996 | 2.611 | .009 | .090 |
| White-Coloured | 87.796 | 30.460 | 2.882 | .004 | .039 |
| White-Black | 89.002 | 19.449 | 4.576 | .000 | .000 |
| Asian-Indian | -27.542 | 64.167 | -.429 | .668 | 1.000 |
| Asian-Coloured | -34.404 | 63.910 | -.538 | .590 | 1.000 |
| Asian-Black | -35.611 | 59.456 | -.599 | .549 | 1.000 |
| Indian-Coloured | 6.863 | 40.175 | .171 | .864 | 1.000 |
| Indian-Black | 8.069 | 32.627 | .247 | .805 | 1.000 |
| Coloured-Black | 1.207 | 32.118 | .038 | .970 | 1.000 |

Each row tests the null hypothesis that the Sample 1 and Sample 2 distributions are the same.
Asymptotic significances (2-sided tests) are displayed. The significance level is .05.
Significance values have been adjusted by the Bonferroni correction for multiple tests.

**Figure 1: Post Hoc: Population groups and existential guilt**

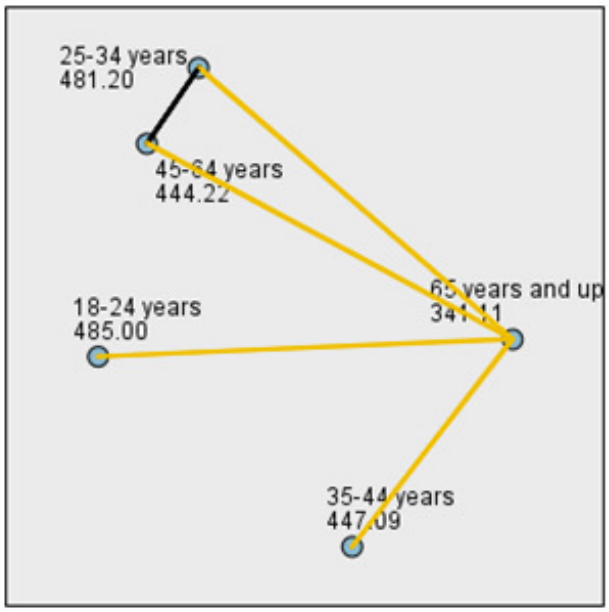
### *1.2 Warm glow and Age*

**Table 2: Warm glow and Age**

**Hypothesis Test Summary**

| | Null Hypothesis | Test | Sig. | Decision |
|---|---|---|---|---|
| 1 | The distribution of Warm Glow is the same across categories of Q4: Please indicate your age range. | Independent-Samples Kruskal-Wallis Test | .000 | Reject the null hypothesis. |
| 2 | The distribution of Warm Glow is the same across categories of Q4: Please indicate your age range. | Independent-Samples Jonckheere-Terpstra Test for Ordered Alternatives | .000 | Reject the null hypothesis. |

**Pairwise Comparisons of Q4: Please indicate your age range**



Each node shows the sample average rank of Q4: Please indicate your age range.

| Sample1-Sample2 | Test Statistic | Std. Error | Std. Test Statistic | Sig. | Adj.Sig. |
|---|---|---|---|---|---|
| 65 years and up.45-64 years | 14,248.500 | 1,205.904 | -3.687 | .000 | .001 |
| 65 years and up.35-44 years | 7,998.500 | 734.174 | -3.415 | .000 | .003 |
| 65 years and up.25-34 years | 5,752.000 | 604.975 | -4.198 | .000 | .000 |
| 65 years and up.18-24 years | 1,779.000 | 263.831 | -3.407 | .000 | .003 |
| 45-64 years.35-44 years | 36,787.000 | 1,871.441 | -.128 | .449 | 1.000 |
| 45-64 years.25-34 years | 26,696.000 | 1,598.330 | -1.580 | .057 | .570 |
| 45-64 years.18-24 years | 8,562.500 | 808.635 | -1.083 | .139 | 1.000 |
| 35-44 years.25-34 years | 15,168.000 | 1,000.369 | -1.254 | .105 | 1.000 |
| 35-44 years.18-24 years | 4,850.000 | 476.448 | -.953 | .170 | 1.000 |
| 25-34 years.18-24 years | 4,178.500 | 386.213 | -.019 | .492 | 1.000 |

Each row tests the null hypothesis that the Sample 1 and Sample 2 distributions are the same.
Asymptotic significances (1-sided tests) are displayed. The significance level is .05..
Significance values have been adjusted by the Bonferroni correction for multiple tests.

**Figure 2: Post Hoc: Warm glow and Age**

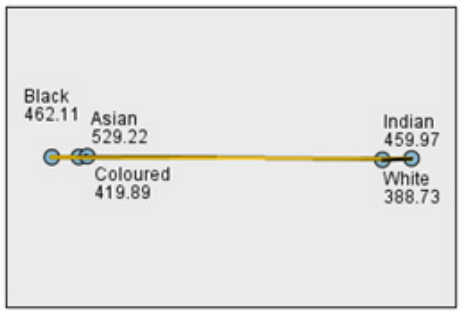
### *1.3 Population groups and altruism*

**Table 3: Altruism and Population groups**

**Hypothesis Test Summary**

| Null Hypothesis | Test | Sig. | Decision |
|---|---|---|---|
| The distribution of F3_Altruism is the same across categories of Q10: Please indicate which population group you identify as. | Independent-Samples Kruskal-Wallis Test | .001 | Reject the null hypothesis. |
| The distribution of F3_Altruism is the same across categories of Q10: Please indicate which population group you identify as. | Independent-Samples Jonckheere-Terpstra Test for Ordered Alternatives | .000 | Reject the null hypothesis. |

**Pairwise Comparisons of Q10: Please indicate which population group you identify as**




Each node shows the sample average rank of Q10: Please indicate which population group you identify as.

| Sample1-Sample2 | Test Statistic | Std. Error | Std. Test Statistic | Sig. | Adj.Sig. |
|---|---|---|---|---|---|
| White.Coloured | 31.166 | 30.460 | 1.023 | .306 | 1.000 |
| White.Indian | 71.245 | 30.996 | 2.299 | .022 | .215 |
| White.Black | 73.387 | 19.449 | 3.773 | .000 | .002 |
| White.Asian | 140.495 | 58.576 | 2.398 | .016 | .165 |
| Coloured.Indian | -40.079 | 40.175 | -.998 | .318 | 1.000 |
| Coloured.Black | 42.220 | 32.118 | 1.315 | .189 | 1.000 |
| Coloured.Asian | 109.329 | 63.910 | 1.711 | .087 | .871 |
| Indian.Black | 2.142 | 32.627 | .066 | .948 | 1.000 |
| Indian.Asian | 69.250 | 64.167 | 1.079 | .280 | 1.000 |
| Black.Asian | 67.108 | 59.456 | 1.129 | .259 | 1.000 |

Each row tests the null hypothesis that the Sample 1 and Sample 2 distributions are the same.
Asymptotic significances (2-sided tests) are displayed. The significance level is .05.
Significance values have been adjusted by the Bonferroni correction for multiple tests.

**Figure 3: Post Hoc: Altruism and Population groups**

### *1.4 Population groups and recognition*

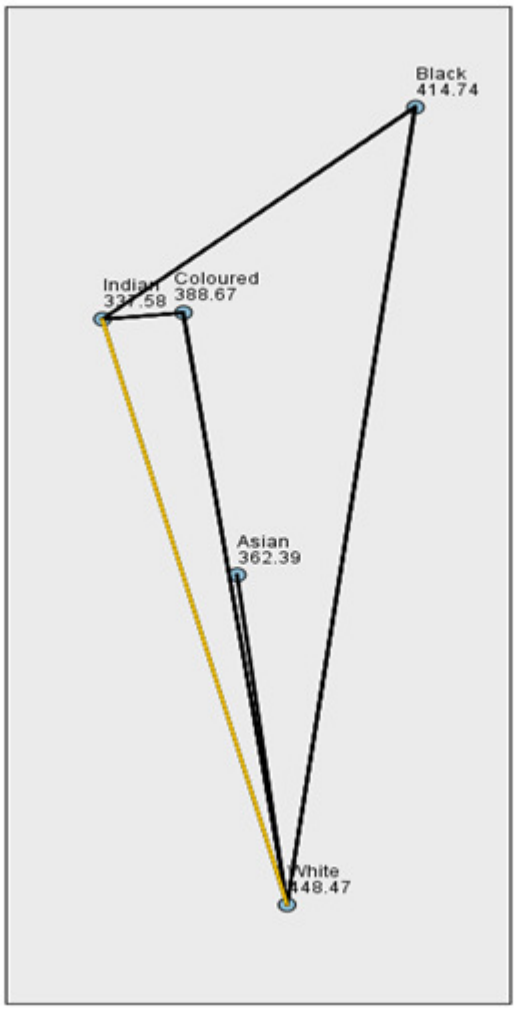
**Table 4: Population group and recognition**

Hypothesis Test Summary

| | Null Hypothesis | Test | Sig. | Decision |
|---|---|---|---|---|
| 1 | The distribution of F6_Recognition is the same across categories of Q10: Please indicate which population group you identify as. | Independent-Samples Kruskal-Wallis Test | .002 | Reject the null hypothesis. |
| 2 | The distribution of F6_Recognition is the same across categories of Q10: Please indicate which population group you identify as. | Independent-Samples Jonckheere-Terpstra Test for Ordered Alternatives | .014 | Reject the null hypothesis. |

Asymptotic significances are displayed. The significance level is .05.

**Pairwise Comparisons of Q10: Please indicate which population group you identify as**




Each node shows the sample average rank of Q10: Please indicate which population group you identify as.

| Sample1-Sample2 | Test Statistic | Std. Error | Std. Test Statistic | Sig. | Adj.Sig. |
|---|---|---|---|---|---|
| Indian-Asian | 600.000 | 99.136 | -.484 | .314 | 1.000 |
| Indian-Coloured | 2.349.000 | 258.070 | -1.360 | .087 | .959 |
| Indian-Black | -7.754.000 | 688.181 | -3.420 | .010 | .102 |
| Indian-White | 19.639.000 | 1.144.098 | 3.572 | .000 | .002 |
| Asian-Coloured | 715.500 | 102.834 | .394 | .347 | 1.000 |
| Asian-Black | 2.475.500 | 312.706 | .836 | .202 | 1.000 |
| Asian-White | 4.707.000 | 540.600 | 1.515 | .065 | .649 |
| Coloured-Black | 8.694.500 | 703.616 | .754 | .225 | 1.000 |
| Coloured-White | 18.561.000 | 1.121.153 | 2.016 | .022 | .219 |
| Black-White | 57.306.000 | 2.452.188 | 1.701 | .045 | .445 |

Each row tests the null hypothesis that the Sample 1 and Sample 2 distributions are the same.
Asymptotic significances (1-sided tests) are displayed. The significance level is .05..
Significance values have been adjusted by the Bonferroni correction for multiple tests.

**Figure 4: Post Hoc: Population group and recognition**

### *1.5 Population groups and warm glow*

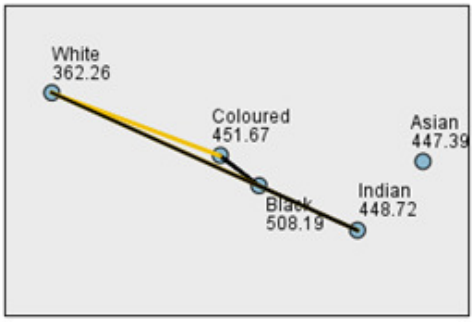
**Table 5: Warm glow and population groups**

**Hypothesis Test Summary**

| | Null Hypothesis | Test | Sig. | Decision |
|---|---|---|---|---|
| 1 | The distribution of F4_Warmglow is the same across categories of Q10: Please indicate which population group you identify as. | Independent-Samples Kruskal-Wallis Test | .000 | Reject the null hypothesis. |

Asymptotic significances are displayed. The significance level is .05.

**Pairwise Comparisons of Q10: Please indicate which population group you identify as**




Each node shows the sample average rank of Q10: Please indicate which population group you identify as.

| Sample1-Sample2 | Test Statistic | Std. Error | Std. Test Statistic | Sig. | Adj.Sig. |
|---|---|---|---|---|---|
| White-Asian | 85.130 | 58.576 | 1.453 | .146 | 1.000 |
| White-Indian | 86.463 | 30.996 | 2.790 | .005 | .053 |
| White-Coloured | 89.407 | 30.460 | 2.935 | .003 | .033 |
| White-Black | 145.928 | 19.449 | 7.503 | .000 | .000 |
| Asian-Indian | -1.333 | 64.167 | -.021 | .983 | 1.000 |
| Asian-Coloured | -4.278 | 63.910 | -.067 | .947 | 1.000 |
| Asian-Black | -60.798 | 59.456 | -1.023 | .307 | 1.000 |
| Indian-Coloured | 2.944 | 40.175 | .073 | .942 | 1.000 |
| Indian-Black | 59.465 | 32.677 | 1.820 | .068 | .684 |
| Coloured-Black | 56.520 | 32.118 | 1.760 | .078 | .784 |

Each row tests the null hypothesis that the Sample 1 and Sample 2 distributions are the same.
Asymptotic significances (2-sided tests) are displayed. The significance level is .05.
Significance values have been adjusted by the Bonferroni correction for multiple tests.

**Figure 5: Post Hoc: Warm glow and population groups**