A Study of the Effect of Sympathetic Framing on Attitudes toward the Homeless

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A Study of the Effect of Sympathetic Framing on Attitudes toward the Homeless

By

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Undergraduate honors thesis under the direction of

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Submitted to the LSU Roger Hadfield Ogden Honors College in partial fulfillment of the Upper Division Honors Program.

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Louisiana State University
& Agricultural and Mechanical College
Baton Rouge, Louisiana
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Abstract

The purpose of this study was to identify the effect of sympathetic frames on attitudes toward homeless people. Previous research has revealed correlations between feelings of sympathy and attitudes toward the economically disadvantaged; furthermore, this body of research has also shown that those who have a more positive impression of the poor tend to engage in more charitable behaviors and express more support for social welfare policies. This study builds upon that literature by examining how discourse about homelessness can shape people’s attitudes toward the homeless and their beliefs about them. To examine this relationship, I conducted an experiment in which participants answered questions about their attitudes toward homeless people after exposure to one of two randomly assigned narrative frames describing the life experiences of a hypothetical homeless person. One narrative frames the hypothetical individual’s experiences in terms of personal responsibility, while the other frames his experiences as a consequence of unfortunate circumstances beyond his control. After this exposure, participants were asked about the feelings and emotions they were feeling toward homeless people. Their responses were compared based upon which frame they were exposed to. The results of the experiment demonstrated that exposure to the sympathetic frames increased positive feelings toward the homeless. These results point to a persuasive communication strategy for convincing individuals to aid the homeless.
Introduction

The goal of this study is to examine how sympathetic frames affect feelings toward homeless people to identify a strategy that could be used to increase donations to homeless shelters and help fight the homeless problem in America. Research shows what many Americans know – the homeless problem in America is persistent and difficult to address (Henry et al 2022). The persistence of homelessness in America motivated me to look for a solution to the problem. I knew that people ended up homeless after struggling with access to stable housing because of a lack of financial stability (Sahlin 1992). The seemingly obvious solution to this problem would be to give homeless people more money to provide them with access to stable housing, but financially supporting hundreds of thousands of people every day is no simple feat. Without access to significant funding, I realized that the best thing I could do to help fight homelessness was to find a way to encourage others to give their money, and so I started searching for a persuasive strategy to encourage this altruistic behavior.

Through my research on the motivations of philanthropy, I determined that sympathy was one of the key stimulants that encourages individuals to donate. I realized that studying the relationship between sympathy and attitudes toward the homeless could reveal a persuasive strategy that could help to aid the homeless problem in America, so I began to focus my inquiry around this topic. Research showed me that sympathy and the desire to give to others were positively related, so if I could find a way to increase sympathy in individuals, they might be more likely to give. This led me to create this study to determine if sympathetic primers could affect sympathy and other emotions in individuals which could eventually be used to encourage donations.
The study measured the effects of sympathetic frames on positive feelings toward the homeless and various emotions in different scenarios. To measure these effects, I created a study in which participants were exposed to one of two randomly assigned short paragraphs describing the life experiences of a hypothetical homeless person before answering questions. One narrative story portrayed the homeless person as responsible for his own homelessness. The character in the story made a series of poor, but relatable, life decisions, and found himself homeless. The unsympathetic narrative framed the individual as personally responsible for the actions that led to his homelessness. The other story depicted an individual who was dealt a challenging hand in life, but despite his best efforts to remain financially stable, he ended up homeless. The positive narrative framed the individual’s experiences as a consequence of the unfortunate circumstances in his life that were beyond his control. After survey participants were exposed to one of the frames, they were asked about the emotions and feelings they had for the homeless.

The results of the experiment showed a statistically significant relationship between the sympathetic frames and increased positive feelings toward the homeless. Individuals who were exposed to the sympathetic narrative frame answered that they held more positive feelings toward homeless people than respondents who were exposed to the unsympathetic frame. On a seven-point sentiment scale, the difference between the mean responses to each frame was 0.28, about one-third of a standard deviation, 0.9. Although the survey was limited by a small, restricted sample size, the results still provided data that can be added to the pool of research on fighting homelessness, and it spoke to an important relationship that could help benefit those fighting the homeless problem.

I performed this study to determine whether there was a relationship between sympathetic frames and positive feelings for the homeless that could be used to create a persuasive strategy
for encouraging donations. I found that priming sympathy increased positive feelings toward the homeless, and thus could encourage altruism toward the homeless (Staub 1978). With this relationship established, I would encourage people trying to gather money to support the homeless to use sympathy primers in their appeals for donations. Using sympathetic narrations in advertising and speeches may influence people’s feelings toward the homeless and warm them up to the idea of donating. In short, sympathy primers could prove to be an effective tool for increasing donations and fighting the persistent homeless problem that exists in America.
Previous Research

Defining Homlessness and the Homeless Statistic

The fact that homelessness persists as a serious problem in the most socially and economically advanced country in the world is an ample reason for studying the subject and how to address it. Before understanding why we should find means to fight against homelessness, we must first attempt to understand how substantial of a problem it is.

Many individuals take an oversimplified approach when defining homelessness; they think of the homeless as individuals who simply do not own a home (Lewit and Baker 1996). Using this measure would provide vastly overstated numbers for the real problem of homelessness as there are many individuals who do not own a home but still live in a stable household (Lewit and Baker 1996). If this was the chosen metric, then individuals who live with their parents, college students living in dorms, and adults who rent apartments could all be considered homeless. Therefore, the definition must be centered to focus on the group of individuals who are in a financial situation that prevents them from having access to basic housing. For clarity of terms, being homeless will be defined as those who struggle to find stable shelter and regularly find themselves without access to said shelter (Sahlin 1992). Researchers attempting to study homelessness use this as a stable indicator to draw results that are capable of being analyzed (Sahlin 1992).

Homelessness is a constantly evolving issue that demands a unique approach to measure it, but definitively measuring it is a difficult task for more than one reason. The first complication is that putting numbers to homelessness tends to counteract the goals one might have in quantifying it (Jocoy 2013). Those who seek to define the homeless statistic in America usually
do so with the intention of addressing it as an issue because research shows that it is necessary to quantify a problem before an adequate response can be formulated to solve it (Walberg 1984). But even though the goal of many who seek to define the homeless statistic is to add to the research pool that will eventually solve it, putting a statistic to the problem does not encourage individuals to donate as much as other mechanisms, such as emotional appeals (Jocoy 2013). Numbers depersonalize emotional issues, and homelessness, at its core, is a deeply emotional issue that needs to be personable to evoke change (Jocoy 2013). While scientific research demands we use numbers to quantify the problem, it is paramount that we do so only after recognizing that each number of the homeless statistic is a human being: someone’s son or daughter, brother or sister, niece or nephew, mom or dad.

The second reason that it is difficult to measure the homelessness statistic is because it is a constantly evolving problem. One night an individual may not have access to stable housing, but the next they may make a friend who will take them in for a few weeks. The most predictive and widely used counts of homelessness are point-in-time counts that measure, on any given night of the week, how many people are sleeping in homeless shelters (Perlman et al 2014). These measures are known to drastically underestimate counts of homelessness because of the episodic nature of the problem (O’Donnell 2020; Hopper et al 2008; Mast 2020). On any given night, only a fraction of the individuals who struggle with homelessness will be in shelters (O’Donnell 2020). Some individuals who normally would sleep in a shelter may have temporarily found housing with a friend, and even though they are still homeless, the point-in-time count would not be able to measure them. A much bigger problem is that not every homeless person has access to shelters, and those that do may not have consistent access to them (Williams 1996). Tent cities are a direct result of the lack of stable housing access that homeless
individuals face (Loftus-Farren 2011). Despite “housing” an increasing number of individuals, this interim solution has received little academic attention, and homeless living in these situations are not counted in the point-in-time count (Loftus-Farren 2011). Research published in the Demographic Research Journal used Australia as a case study to try to determine how drastically point-in-time counts under measure the homeless statistic (O’Donnell 2020). The researchers found that from the fiscal year 2013 to 2014, 3.4 times as many people struggled with homelessness than would have been counted on an average night by a point-in-time measurement (O’Donnell 2020). While modern-day America likely does not share the same demographic and social environment that Australia did, this shows that the results gathered in America are likely also significantly underestimated (O’Donnell 2020).

The Institute for Education Sciences’ National Center for Education Statistics found in its report on “The Condition of Education” that in the 2014 to 2015 school year, 2.5 percent of students in the U.S. public elementary and secondary school system were reported as struggling with homelessness (McFarland et al 2017). A total of 1.3 million children were reported as homeless at some point during the school year (McFarland et al 2017). But in 2015, The U.S. Department of Housing and Urban Development's Annual Homeless Assessment Report to Congress found that on a given night, there were only 564,708 homeless people in America (Solari et al 2016). This shows that the situation of measuring homelessness in America is like the findings in Australia; the homeless statistic is drastically underestimated. The 2021 report found that on a given night in 2021, there were 326,000 people staying in a homeless shelter (Henry et al 2022). While the statistics appear to show a decline in the homeless population since 2015, the report recognizes the effects that Covid-19 had on both increasing the homeless population and on the government’s ability to gather data (Henry et al 2022). Homelessness in
America is a serious problem that is difficult to quantify and affects millions of Americans every year (Henry et al. 2022).

The most resilient modern-day solution to the problem of homelessness are shelters that provide basic meals and a safe place to sleep (O’Sullivan 2020). Homeless shelters have successfully provided large populations of homeless with necessities for over 150 years (O’Sullivan 2020). Although they are effective at providing care to the homeless, they are expensive and require significant funding to help fight homelessness (Hopper et al. 1997). Lack of reliable funding has historically been the largest constraint on providing for the homeless through shelters (Lyon-Callo 1998). Most homeless shelters can take in more people but lack of access to funding is keeping them from operating at full capacity (Burt et al. 2010). As funding has increased over the years, homeless shelters have simultaneously been able to provide housing for a higher number of homeless individuals (Lucas 2017). A large percentage of funding for homeless shelters comes directly from the federal government, which provides billions of dollars of welfare to Americans struggling with homelessness (Lucas 2017). The next largest source of funding for homeless shelters are donations from private individuals (Agans and Liu 2015). Donations are essential for the operation of shelters and encouraging them could help solve the homeless problem in America (Moulton 2013).

In short, charitable behaviors on the part of the public and public support for social welfare benefits for the homeless can play a vital role in alleviating homelessness in the United States. Where, then, does charitable behavior and support for policies that would benefit the homeless come from?
What Influences Willingness to Help the Homeless

Sympathy is an emotional response to seeing the hardship of others that prompts humans to feel concern for, and usually a desire to help, a living being, or perceived living object (Kristjánsson 2014). It is a feeling primed in response to some hardship in life that the specified being finds themself facing (Darwall 2002). People regularly feel sympathy for humans and animals that they observe to be suffering (Gómez-Leal et al 2021). When people have sympathetic feelings toward someone else, these feelings are generally positive in tone as they exhibit a degree of care for another individual (Clark 1987). Philosophers note that sympathy plays a motivational role in encouraging positive feelings (Paytas 2015). Sympathy is often confused with empathy, compassion and pity because they are similar and often interrelated (Young-Mason 2001; Punter 2014). The interchangeability of these words was documented as early as the 18th century when Scottish philosopher and judge, Lord Kames, stated the synonymity of the terms (Home 1762; Schwalm 2015). It is important to clarify the relationships between sympathy and both empathy and compassion.

People most often confuse the word sympathy with the term empathy due to their similar pronunciation, spelling and meaning (Daniel 1984). While sympathy is feeling sincere concern for a living being going through a difficult time, empathy takes it a step further on the emotional scale (Darwall 2002). Those who experience empathy place themselves into the shoes of the individual going through a rough time and share the experience with them (Darwall 2002). Empathy does not determine what emotional responses will be produced from someone putting themselves in another person’s shoes. Although empathy often leads to a sympathetic concern, the response that follows depends on the interest of one individual into the perspective of another. Individuals may simply use empathy as a tool of pure, indifferent observation or even
sadistic enjoyment (Simmons 2014). Individuals often experience concern for people going through a rough time after emotionally placing themselves into the other person's shoes, and likewise, the concern for another individual can prompt someone to then place themselves into that person's shoes (Goldie 2002). Therefore, sympathy and empathy enter into a cause-and-effect relationship with each other. Not only are their definitions akin, but they have almost identical morphology (Daniel 1984). The only difference in word structure is a prefix substitute. Overall, their resemblance makes them indistinguishable to most individuals (Daniel 1984).

Sympathy and empathy should be considered interchangeable in the context of this study. A general lack of understanding of the terms diminishes the nuance between them and necessitates this clarification. Prior to answering questions related to sympathy in the survey, respondents were not given a definition of the two terms with an explanation of how they are different. Considering most individuals do not understand the difference and use these terms interchangeably, they should be considered as such in the context of the study.

Compassion is a sensitivity to the distress of others with a commitment to help them (Cole-King and Gilbert 2011). The key difference between compassion and sympathy is that sympathy focuses on emotional concern for a human being, while compassion focuses on the desire to help them (Rosan 2014). Sympathy tends to evoke compassion in individuals primed by sympathetic concern; concern usually leads to a desire to help. Compassion occurs in individuals only after they feel sympathetic concern for individuals. While sympathy demands concern for others, compassion adds to the emotional experience with a desire to help the other person (Chadwick 2015). The deep relationship between sympathy and compassion has been discussed in philosophy and literature since the 18th century (Fiering 1976). In short, sympathy is an
emotional concern that usually produces compassion for a living being that has suffered misfortune (Piston 2018). It is often used interchangeably with both empathy and compassion due to their similarity and the positively correlated relationship that exists between them (Daniel 1984).

The Relationship between Sympathy and Support for the Disadvantaged

Altruism is a principle of acting in a manner that exhibits selfless devotion to others either without benefiting oneself or at the expense of oneself (Widerquist 2003). In principle, human predispositions make it difficult for people to be perfect altruists throughout their life (Konstan 2000). Psychology teaches that humans naturally tend toward selfishness, which is in direct conflict with altruism (Ozinga 1999). Being altruistic is more of a goal to strive for, rather than a personality trait because it is impossible to be a pure altruist (Harris 1967). Basic psychology teaches that it is impossible for individuals to be completely selfless (Reginster 2000). Just because it is impossible to be a pure altruist, does not mean it is impossible to practice altruism (Harris 1967). A simple way to think about the application of altruism is the motivation to give time or donations to other people (Wuthnow 1993). In practice, altruism can be viewed as the societally beneficial goal of selflessly helping others (Rushton 1982).

The relationship between sympathy and altruism has been established for hundreds of years. Both philosophers and writers have stated the relationship since as early as the 19th century. Famous writers Charles Dickens and Nathaniel Hawthorne explored the relationship between sympathy and philanthropic altruism in Dickens’s Bleak House and Hawthorne’s The Blithedale Romance in the mid-1800s (Dickens 1993; Hawthorne 2001). These writings set the precedent for the continued debate about the degree of the relationship between sympathy and
altruism. The debate continues over what causes altruism; some philosophers believe that sympathy is the only motivation for altruistic behavior in humans, and that it must be present for humans to be altruistic (Batson 1989). Others argue that, while sympathy often leads to altruism, it is not the sole motivating factor (Staub 1978). Establishing the degree of the relationship between the terms is not important in the context of this study. It is important that the positively correlated relationship exists and is accepted (Eisenberg 1991).
Hypothesis

Based on the bodies of research discussed in the last section, I have four theoretical expectations about the relationship between sympathetic frames and attitudes toward homeless people.

My first expectation is that people who encounter a sympathetic frame of the causes of homelessness will be more likely to have positive attitudes toward homeless people. Emotions of sympathy will be measured both directly and through an indirect scale of post-treatment condition questions. The expected result is based on sympathy’s established role in motivating positive feelings in individuals who experience it (Clark 1987; Paytas 2015).

My second expectation is that people who are presented with a less sympathetic frame about the causes of homelessness – that is, which presents homelessness as a consequence of an individual’s choices rather than circumstances outside his control – will have more negative views of homeless people. This expectation stems from the reciprocal relationship that can be understood from prior research. If sympathy motivates positive feelings in individuals, then it is expected that the lack of sympathy would lead to a lack of these positive feelings and an overall more negative view of the individuals to which one possesses unsympathetic feelings (Clark 1987; Paytas 2015).

My third expectation is that both people who indicated a prior predisposition to give and to not give to the homeless will still be more likely to have an increase in positive feelings toward the homeless when exposed to sympathetic frames. I believe this will hold true even though some participants with a prior predisposition to give were exposed to a less sympathetic frame about the causes of homelessness and some participants without a predisposition to give
were exposed to a more sympathetic frame of the causes of homelessness. Since the positive relationship between motivation to give and sympathy is established, and the positive relationship between sympathy and positive feelings is established, it is expected that a relationship between motivations to give and positive feelings will also be present (Clark 1987; Paytas 2015; Eisenberg 1991; Staub 1978). Though prior predispositions to give may indicate prior positive feelings toward the homeless, the sympathetic frames are expected to demonstrate an increase in positive feelings if enough participants take the survey and the predispositions are averaged out.

My fourth and final expectation is that people who are exposed to a sympathetic frame of the causes of homelessness will be more likely to feel emotions of sympathy and compassion and less likely to feel emotions of anger and resentment toward homeless people. The expectation that the sympathetic frames will provoke emotions of sympathy is not based on prior research, rather on my design of the sympathetic frame. I designed the sympathetic and unsympathetic frames to produce sympathetic feelings and lack thereof, if they were designed effectively and no significant external factors affect them, then they should produce these emotions.
Research Design

Pre-Treatment Questions

The research design of this study is an experiment embedded in an online survey. The survey contains four different sections: the pre-treatment questions, the treatment conditions, the post-treatment questions, and the demographic questions. The wording of each question can be found in the questionnaire located within the appendix. The pre-treatment questions are designed to gather information from individuals about their encounters with the homeless.

Question 3 asks how often individuals encounter homeless individuals. This information will be helpful in showing the relationship between repeated exposure to the homeless and, based on the results of treatment conditions, whether there is a relationship between continued exposure and a higher likelihood of positive feelings directed toward the homeless. If individuals indicate that they never encounter homeless people, the hypothesized results might indicate that those individuals would not be as compassionate, sympathetic or likely to give as individuals who do come into contact with homeless individuals.

Question 4 asks individuals how often they donate to homeless people. This pretreatment question will give insight into individuals' sympathy and compassion toward the homeless before individuals are positively or negatively primed in the treatment conditions. It will be useful to distinguish the information gathered from the post-treatment conditions into subsets based on their responses to this question. If an individual indicates in Question 4 that they always give to homeless people when they encounter them, this individual is hypothesized to express that they are more sympathetic to the homeless than an individual who answers that they never give to the
homeless, even if the more altruistic individual is exposed to the negative treatment condition and vice versa.

Question 5 asks individuals whether they have experienced homelessness in their lifetime. If an individual has been homeless in their lifetime, they would likely be predisposed to have strong feelings toward homeless people. Thus, the treatment conditions may not be effective in influencing their answers to the questions. To mitigate external factors that might affect the information gathered in the survey, individuals who indicate that they have been homeless will not be considered in the results if they represent a significant number of respondents.

Questions 6 - 8 are distractor questions that reduce the risk of the pre-treatment question affecting the results of the survey. These questions ask about topics unrelated to the survey to get respondents to think about other subjects immediately before they are exposed to the treatment conditions. If respondents are still thinking about Questions 3 through 5 when they read the treatment conditions, there is a higher likelihood of them being primed by the pre-treatment conditions and whatever feelings they may have evoked. However, if they are thinking about LSU football before they are asked to read a story that will prime them to answer questions on sympathy and altruism, then the primer will be more effective at influencing their answers than the pre-treatment conditions.

**Treatment Conditions**

One treatment condition acts as a prime to evoke sympathy in respondents while the other acts as a prime for an unsympathetic emotional response. Both treatment conditions are short readings that participants must read before going further into the study. The two treatment
conditions, questions 9 and 10, were randomly assigned to survey respondents to balance the effects of the treatments on the results.

The unsympathetic treatment condition is a story of an individual that was dealt a good hand in life, and after making a series of “relatable” mistakes, ended up homeless on the street. The individual grew up wealthy, completed high school, his parents paid for his college, and he was accepted back into his parent's household even after dropping out of college. But many college students can relate to the mistakes and incidents that the individual made before becoming homeless; many students have experienced partying, drugs, and losing a job. Since college students can relate to these occurrences to some degree, they may not be strongly primed with negative feelings toward the individual who, due to his own mistakes, ended up homeless. Thus, the treatment condition is designed to paint the picture that the individual is responsible for his own homelessness without showing him in an unrelatable, or unreasonable, light.

The sympathetic treatment condition paints a picture to evoke sympathy for the individual. In the alternative version of the story, the individual grew up in a poor household, worked hard in high school for good grades but still could not afford college, and worked full-time until he lost his job during the pandemic. The individual in the sympathetic treatment condition was dealt a poor hand in life, and despite his best efforts, he was not able to be a productive member of society and ended up homeless on the streets.

The treatment conditions are designed so that respondents who are given the unsympathetic treatment condition that shows the character in the story being at fault for his homelessness will be more likely to feel unsympathetic toward the homeless throughout the rest of the survey than they would have if left unprimed. On the contrary, the respondents who experienced the sympathetic treatment condition, who read a story in which an individual was
dealt a poor hand in life before becoming homeless, will be more likely to experience sympathy toward the homeless than they would have if unprimed by the treatment condition.

Psychological experiments that deal with people's emotions and feelings demonstrate relationships by isolating antecedent conditions, such as emotions, and repeatedly demonstrating a pattern of consequents. The sympathetic and unsympathetic treatment conditions are the antecedent conditions, also the independent variables, that will be tested against each other to determine relationships through their differences. The more isolated the treatment conditions are, the greater the confidence a researcher can have that they are what is influencing the consequent. The more restricted the treatment conditions are to avoid provoking an emotion that is not controlled for in the study, the better the treatment conditions will speak to a real relationship when tested against each other. Less restricted treatment conditions will produce external factors that could affect the results of the study. If a survey is not designed to mitigate the risks of external factors, it cannot truly derive a relationship even if an antecedent leads to the results of an expected consequent. Surveys that are vulnerable to external factors are vulnerable to the results being caused by factors unrelated to the hypothesized antecedents.

To restrict the treatment conditions and prevent the risk of external factors stemming from either condition that might affect the results, both conditions were written as similarly as possible while still controlling for a sympathetic or non-sympathetic response. By writing the conditions as similar as possible, it is unlikely that one condition would have a variable effect on the other. Both conditions were written carefully to not provoke feelings other than sympathy or lack thereof.
Post-Treatment Questions

The post-treatment questions are the measures for the consequents of exposure to the treatment conditions. The treatment condition to which a respondent was assigned is the key independent variable in this study, and these post-treatment questions are the dependent variables.

Questions 13a through 13d ask how often respondents feel compassionate, angry, sympathetic, and resentful toward the homeless when they encounter them. The sympathetic response variable in this question is key in drawing a relationship between the treatment conditions and their effects on sympathy. The other emotions included in this question will be helpful in viewing the overall feelings of individuals toward homeless people after being exposed to the treatment condition. The survey asks questions about compassion to affirm the effects of the treatment condition on sympathy. Using the established strong positive correlation between sympathy and compassion, the answers to questions involving compassion could indirectly speak to feelings of sympathy. If enough survey results were gathered, a test would have been performed to compare the relationship between sympathy and emotions of compassion, anger and resentment based on prior research about the relationship.

Due to the threats of social desirability bias in responses as well as the potential discrepancy between self-reported intended behavior versus actual behavior, the survey cannot directly measure charitable giving in a meaningful way. An example of a question that measures charitable behavior could be, “How likely are you to give to a homeless person if you saw them today?” Respondents answering this question would feel motivated to answer that they are more likely to give money than they are. This is because respondents are aware that there are people who will see how they answered the survey question, and they want to appear in a more socially
desirable light, even if respondents know that surveyors will not know who answered what question in what way. To avoid these problems, the survey measures correlates of charitable behavior – attitudes toward and beliefs about homeless people. For example, if respondents say that homeless people have more money than they deserve, they likely do not have altruistic feelings toward them. But if respondents think that homeless people have less money than they deserve, then they believe that homeless people deserve more money than they have, and they may be more likely to donate to the homeless.

Question 14 asks “Do homeless people have as much money as they deserve, more money than they deserve, or less money than they deserve?” This question is worded to test for beliefs about homeless people and perceptions of any disadvantage they face.

Questions 15 and 16 are matrix table questions that ask how much respondents agree with 20 different questions that test for positive or negative feelings toward the homeless. There are 10 questions that ask about positive feelings toward the homeless and 10 that ask about negative feelings. Respondents can answer each question by indicating that they strongly disagree, disagree, somewhat disagree, neither agree nor disagree, somewhat agree, agree, or strongly agree. With seven question answers, a seven-point agreement scale was produced that can provide ordinal numbers for measuring data. Before running tests to determine positive or negative feelings toward the homeless, all questions were scaled in the same direction. Questions that asked about positive feelings toward the homeless were not altered; the scale for these was from one-strongly disagree to seven-strongly agree. The negative questions were reversed onto a scale from one-strongly agree to seven-strongly disagree. This allows all the data to be measured on the same scale from one to seven with a higher number indicating positive feelings toward the homeless and a lower number indicating negative feelings toward the homeless. The scaled
matrix questions from questions 15 and 16 were designed to test sentiment toward homeless and will be referred to as the sentiment questions in the results.

The post-treatment questions contain several attention checks to weed out bad data that might harm the results of the study. Attention checks are a common method used to identify the bad data provided by respondents who speed through surveys randomly answering questions without paying attention. Immediately following the treatment conditions, question 11 asks the name of the main character in the prior story and question 12 asks whether he worked full-time or part-time. Respondents who did not answer these simple questions correctly are likely speeding through the survey without paying attention. Thus, the data they provide is random and could counteract the good data from individuals who accurately answer questions. Question 17, posed right after the post-treatment condition questions, is another attention check that tells respondents how to answer.

After results are gathered, all survey responses in which any attention checks were answered wrong will be thrown out to conserve the integrity of the survey. The attention checks have two, four and five response options, which means respondents have a 50%, 25% and 20% chance of answering each question correctly. This means that individuals randomly guessing through the entire survey only have a 2.5% chance of answering all questions correctly. Therefore, the included attention checks should effectively mitigate the effects of bad response data.

**Demographics**

Standard demographic questions were used to determine the background of individuals taking the survey. Demographic questions determined the political affiliation of individuals, their
age, geographical upbringing, race and ethnicity, economic status, gender preferences, and religious background.

The survey was administered through the Manship School of Mass Communication’s Media Effects Lab (MEL) which provided a small and undiverse sample of participants. The Media Effects Lab at LSU is a media research lab that allows researchers the opportunity to gather information from students via several survey platforms. This study was performed online and administered to students from the mass communication college. The majority of students taking the survey were between the ages of 18 and 22 and were from Louisiana. The majority of students indicated that they were from a middle-class background and worked part-time, defined as less than 40 hours a week. Most students from the college are female and this was reflected in the demographic survey results. Over ¾ of the respondents taking the survey indicated that they identified as female. About half of the respondents indicated that religion was important in their life, while religious affiliation ranged from various Christian denominations to Jewish, Muslim and Buddhist backgrounds.

A total of 132 students provided responses to the survey that were used to determine results. There were more students who took the survey but only 132 remained after responses that failed the attention checks were removed. With a sample size this small, it may be difficult to speak to statistical relationships about the population of students in the Manship School.
Results

To analyze the effect of frames on sentiment toward the homeless, I averaged each respondent’s answers to the 20 sentiment questions (after recoding response options so that higher values meant more positive sentiment and lower values meant more negative sentiment) to create a single outcome measure for sentiment. Respondents were split into two groups based on which treatment condition they were exposed to, and then each group’s answers to the sentiment questions were compared to see if the sympathetic or unsympathetic treatment conditions had any effects on sentiment. I then conducted a t-test to analyze the difference in the average value of this sentiment measure across respondents in the two treatment conditions.

The results appear in table 1. There is a statistically significant difference between the two groups in their sentiment toward the homeless. The difference in means shows that the group of respondents exposed to the sympathetic treatment condition had more positive feelings toward the homeless than individuals exposed to the unsympathetic treatment condition. On the seven-point scale of sentiment, respondents exposed to the sympathetic treatment condition answered more positively, on average, by 0.28 or about 4%. In statistical terms, the size of the difference of means, 0.28, is about one-third of a standard deviation, 0.9

<table>
<thead>
<tr>
<th>Treatment Group:</th>
<th>Mean:</th>
<th>Number of Observations:</th>
<th>Difference between Means:</th>
<th>P-Value for the Difference:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsympathetic</td>
<td>4.80</td>
<td>72</td>
<td>4.80 - 5.08</td>
<td>0.07</td>
</tr>
</tbody>
</table>
A similar test was run for the treatment conditions, but this time controlling for prior predispositions to give. If respondents indicate a prior predisposition to give to the homeless on question 4, it is hypothesized that they will be more likely to have more positive feelings toward the homeless than individuals that indicated they did not give to the homeless, even if the givers were exposed to the unsympathetic treatment condition and the non-givers were exposed to the sympathetic treatment conditions. Although respondents may be predisposed to feel positively or negatively toward the homeless, a large enough sample size should cause the predispositions to average out and allow the effects of the sympathetic and unsympathetic frames to be observable. This was tested by splitting the results from the prior t-test into groups of individuals based on if they indicated that they had previously given to the homeless. Among all respondents who indicated that they had previously given to the homeless, those exposed to the sympathetic treatment condition were still more likely to have positive feelings than those who were exposed to the unsympathetic treatment condition. Therefore, the results from the original test hold true even when controlling for predispositions to give.

A test was then run to see if the sympathetic treatment condition's positive effects on sentiment toward the homeless were larger on prior givers or prior non-givers. It is important to know how sympathy frames affect prior-givers compared to prior non-givers. If the goal is to create a persuasive strategy aimed at increasing donations, and each group is affected by frames differently, it may be appropriate to use sympathy frames to appeal to one group and potentially use a different strategy to target the other. The data showed an increase of sentiment by 0.29 for
prior givers versus only a 0.2 increase in positive sentiment for prior non-givers (see tables 2 - 3). Although the correlation of answers seems to indicate that the sympathetic treatment condition could have a larger positive effect on sentiment for prior givers, the sample size for each group was not large enough to cut through the noise of random error. Without larger sample sizes for these subgroups, any potential difference in the magnitude of the relationship between those already predisposed toward charitable behavior and those not already predisposed cannot be identified in this study.

**TABLE 2: Treatment Condition’s relationship to sentiment toward homeless for prior non-givers**

<table>
<thead>
<tr>
<th>Treatment Group:</th>
<th>Mean:</th>
<th>Number of Observations:</th>
<th>Difference between Means:</th>
<th>P-Value for the Difference:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsympathetic</td>
<td>4.55</td>
<td>30</td>
<td>4.55 - 4.75</td>
<td>.46</td>
</tr>
<tr>
<td>Sympathetic</td>
<td>4.75</td>
<td>22</td>
<td>= -0.20</td>
<td>0.46 &gt; α</td>
</tr>
</tbody>
</table>

**TABLE 3: Treatment Condition’s relationship to sentiment toward homeless for prior givers**

<table>
<thead>
<tr>
<th>Treatment Group:</th>
<th>Mean:</th>
<th>Number of Observations:</th>
<th>Difference between Means:</th>
<th>P-Value for the Difference:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsympathetic</td>
<td>4.96</td>
<td>42</td>
<td>4.96 - 5.25</td>
<td>0.13</td>
</tr>
<tr>
<td>Sympathetic</td>
<td>5.25</td>
<td>40</td>
<td>= -0.29</td>
<td>0.13 &gt; α</td>
</tr>
</tbody>
</table>
Finally, I tested the difference in average responses to the measures of emotions across the two groups of respondents (see tables 4 - 7). Four emotions were tested: compassion, anger, sympathy and resentment. Interestingly, there are no statistically significant differences in emotional response associated with treatment exposure. Although the sample size is too small to identify the pattern statistically, the sympathetic treatment condition appeared to potentially increase both compassion and sympathy, as hypothesized, while slightly increasing anger against homeless individuals. As hypothesized, the sympathetic treatment condition also appeared to potentially decrease resentment against the homeless. Again, however, none of these differences are statistically meaningful. Therefore, while this study demonstrates that sympathetic frames improve sentiment toward the homeless, it provides no evidence that such an effect occurs because the frames boost the level of sympathy people feel.

**TABLE 4: Treatment Condition’s relationship to feelings of Compassion**

<table>
<thead>
<tr>
<th>Treatment Group:</th>
<th>Mean:</th>
<th>Number of Observations:</th>
<th>Difference between Means:</th>
<th>P-Value for the Difference:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsympathetic</td>
<td>3.42</td>
<td>71</td>
<td>3.42 - 3.61</td>
<td>0.27</td>
</tr>
<tr>
<td>Sympathetic</td>
<td>3.61</td>
<td>62</td>
<td>= -0.19</td>
<td>0.27 &gt; (\alpha)</td>
</tr>
</tbody>
</table>

**TABLE 5: Treatment Condition’s relationship to feelings of Anger**
<table>
<thead>
<tr>
<th>Treatment Group:</th>
<th>Mean:</th>
<th>Number of Observations:</th>
<th>Difference between Means:</th>
<th>P-Value for the Difference:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsympathetic</td>
<td>1.36</td>
<td>70</td>
<td>1.36 - 1.45</td>
<td>0.49</td>
</tr>
<tr>
<td>Sympathetic</td>
<td>1.45</td>
<td>62</td>
<td>= -0.09</td>
<td>0.49 &gt; α</td>
</tr>
</tbody>
</table>

**TABLE 6: Treatment Condition’s relationship to feelings of Sympathy**

<table>
<thead>
<tr>
<th>Treatment Group:</th>
<th>Mean:</th>
<th>Number of Observations:</th>
<th>Difference between Means:</th>
<th>P-Value for the Difference:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsympathetic</td>
<td>3.66</td>
<td>71</td>
<td>3.66 - 3.82</td>
<td>0.35</td>
</tr>
<tr>
<td>Sympathetic</td>
<td>3.82</td>
<td>62</td>
<td>= -0.16</td>
<td>0.35 &gt; α</td>
</tr>
</tbody>
</table>

**TABLE 7: Treatment Condition’s relationship to feelings of Resentment**

<table>
<thead>
<tr>
<th>Treatment Group:</th>
<th>Mean:</th>
<th>Number of Observations:</th>
<th>Difference between Means:</th>
<th>P-Value for the Difference:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unsympathetic</td>
<td>1.4</td>
<td>70</td>
<td>1.4 - 1.23</td>
<td>0.13</td>
</tr>
<tr>
<td>Sympathetic</td>
<td>1.23</td>
<td>62</td>
<td>= 0.17</td>
<td>0.13 &gt; α</td>
</tr>
</tbody>
</table>

Overall, the main hypothesis that people who encounter sympathetic frames will be more likely to feel positively toward the homeless was affirmed. The treatment conditions increased positive feelings toward the homeless. Respondents who were presented with the sympathetic
treatment condition were more likely to feel positively toward homeless people than those who were exposed to the unsympathetic treatment condition. Thus, the second expectation that predicted the unsympathetic frame would decrease positive feelings was also affirmed. The third expectation – that sympathetic frames will increase positive feelings in participants even when controlling for prior predispositions to give – was also affirmed.

My fourth expectation was the only one that was not affirmed by the results of the study. I hypothesized that the participants exposed to a sympathetic frame of the causes of homelessness would be more likely to indicate they possessed feelings of sympathy than individuals who were exposed to the unsympathetic frame. Although respondents that experienced the sympathetic frame indicated more feelings of sympathy and compassion than those exposed to the unsympathetic frame, the results were not statistically significant enough to affirm the relationship. This could have been due to the small sample size of the survey or because there is actually no relationship that exists between the two variables.
Conclusion

The results of this experiment provide useful data that show a potentially effective strategy for increasing support for the homeless and helping fight the homeless crisis in America. Using the treatment conditions to compare the effects of frames, the study found that sympathetic frames increased positive feelings toward homeless people, and exposure to the unsympathetic frames decreased positive feelings. Sympathetic frames appeared to potentially increase compassion and sympathy in individuals exposed to them, but the sample size from the study was too small to identify a statistically significant pattern. The study demonstrated that sympathetic frames improve positive sentiment toward the homeless, but it did not provide ample evidence that such an effect occurred because the frames boosted the level of sympathy that people were feeling. A study with a larger sample size would definitively speak to the relationship between sympathetic primers and sympathy; although it is impossible to tell from the results of this study what that relationship would look like.

The survey also reveals important avenues for future research. The study was significantly limited by the small, demographically centralized population sample. The entire population were college aged students attending Louisiana State University. Most students were white, middle-class, part-time working, females. Each demographic background subgroup could be affected by primers in dramatically different ways, but the survey performed is too limited to determine these relationships. Future testing, on larger and more diverse samples, could reveal potential future persuasive strategies targeted toward each subgroup of demographics. With a significantly larger sample size, the effects of sympathetic primers could be evaluated based on each demographic background subgroup to determine different relationships that likely exist.
between these groups. Specific avenues for future research include, but are not limited to, the effects of sympathetic primers on gender, economic background, race, education, religion, age, and political affiliation.

Overall, the survey confirmed the most important hypothesized result from the experiment. Although there were not enough survey respondents to speak to all of the important relationships related to the survey, the positive emotional effect of sympathetic primers was statistically significant enough to establish a relationship. Using the well-established prior link between sympathy and altruism, homeless shelters and those fighting homelessness in America can effectively use sympathy primers to increase positive feelings toward the homeless while encouraging donations to fight homelessness. I performed this experiment with the goal of finding a potentially effective strategy to encourage donations to the homeless which the results successfully established.
Appendix

Questionnaire

Q1 Study Title: A Study of Sympathy and Altruism

Purpose: The purpose of this study is to measure the relationship between the emotion of sympathy and altruistic behavior toward the economically disadvantaged.

Inclusion criteria: You are eligible to participate if you are aged 18 or older.

Exclusion criteria: You are ineligible to participate if you are under the age of 18.

There are no known risks involved in participating in this study beyond those associated with everyday life. We will not ask for your name or any other identifying information. The study will last approximately 10 minutes.

LSU associate professor of political communication, Dr. Michael Henderson, is leading this study. You can call him at 225-578-5149 with any questions about this survey or email him at mbhende1@lsu.edu.

You may choose not to participate or to withdraw from the study at any time without penalty or loss of any benefit to which you might otherwise be entitled. You may also refuse to answer any question.

Your responses collected as part of the research may be used or distributed for future research. Results of the study may be published, but no participant names or other identifying information will be included in the publication.
This study has been approved by the LSU IRB. For questions concerning participant rights, please contact the IRB Chair, Alex Cohen, at 225-578-8692 or irb@lsu.edu.

Do you agree to participate in this survey?

- Yes (1)
- No (2)

Q2 Are you 18 years of age or older?

- Yes (1)
- No (2)

Q3 How often do you encounter homeless people?

- Very Often (1)
- Often (2)
- Somewhat Often (3)
- Not Often (4)
- Never (5)
Q4 When you encounter homeless people asking for money, how often do you give to them?

  o Always (1)
  o Most of the time (2)
  o About half the time (3)
  o Sometimes (4)
  o Never (5)

Q5 In your lifetime, have you or your family ever been homeless?

  o Yes (1)
  o No (2)
  o Unsure (3)

Q6 Next, we would like to ask you about LSU's football season.

  College Football season is just getting started, and many people believe that LSU is going through a rebuilding season with our new head coach Brian Kelly. Do you believe LSU is going through a rebuilding season?

  o Definitely not (1)
  o Probably not (2)
Q7 How would you describe your confidence in head coach Brian Kelly at this point in the season?

o Always Confident (1)

o Mostly Confident (2)

o Confident about half of the time (3)

o Sometimes Confident (4)

o Never Confident (5)

Q8 Have you attended any LSU Football games this season?

o Yes (1)

o No (2)

Q9 Please read the following short paragraph, which we will ask you some questions about.

When you are finished, click the button below to proceed to the next question.
Trevor grew up in a poor household. After completing high school with good grades, his family could not afford to pay for him to go to college. Instead, he worked full-time washing dishes but he lost his job when his workplace closed permanently in the wake of the Covid-19 pandemic. After a few months, his meager savings were depleted. When he could no longer afford rent, he was evicted. Trevor is now homeless and asks for money from passersby on the streets.

Q10 Please read the following short paragraph, which we will ask you some questions about.

When you are finished, click the button below to proceed to the next question.

Trevor grew up in a wealthy household. After completing high school with mediocre grades, his family paid for him to go to college. But, he often found himself partying and taking drugs with his friends. After failing his third semester of college, Trevor dropped out. Instead, he worked full-time washing dishes but he lost his job when his workplace closed permanently in the wake of the Covid-19 pandemic. He returned to his family’s house for a few months until they found him using drugs and kicked him out. Trevor is now homeless and asks for money from passersby on the streets.
Q11 What was the name of the main character in the story you just read?

- Trevor (1)
- James (2)
- Brennan (3)
- Joseph (4)

Q12 Did the main character work full-time or part-time in the story?

- Full-time (1)
- Part-time (2)

Q13 How well do each of the following terms describe how you feel when you encounter a homeless person?

<table>
<thead>
<tr>
<th>Not well at all (1)</th>
<th>Slightly well (2)</th>
<th>Moderately well (3)</th>
<th>Very well (4)</th>
<th>Extremely well (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compassionate (1)</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Angry (2)</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Sympathetic (3)</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
<tr>
<td>Resentful (4)</td>
<td>o</td>
<td>o</td>
<td>o</td>
<td>o</td>
</tr>
</tbody>
</table>
Q14 Do homeless people have as much money as they deserve, more money than they deserve, or less money than they deserve?

- Homeless people have more money than they deserve (1)
- Homeless people have as much money as they deserve (2)
- Homeless people have less money than they deserve (3)

Q15 How much do you agree or disagree with the following statements?

Strongly disagree (1) Disagree (2) Somewhat disagree (3) Neither agree nor disagree (4) Somewhat agree (5) Agree (6) Strongly agree (7)

Homeless people don’t work because they can make enough money sitting on the street panhandling. (1)

- - - - - - -

Homeless people try to improve their circumstances. (2)

- - - - - - -

People experiencing homelessness are likely alcoholics or addicted to drugs. (3)

- - - - - - -

I do not feel bad for the homeless when I encounter them. (4)

- - - - - - -
Homeless people try their hardest to succeed. (5)

People are likely homeless because they dropped out of school. (6)

Homeless people spend the money they are given on basic necessities. (7)

If homeless people tried harder, they would be just as well off as people like me. (8)

Homeless people want to contribute to society. (9)

If homeless people worked harder, they wouldn’t be homeless. (10)

Q16 Here are ten more statements.

How much do you agree or disagree with these statements?

Strongly disagree (1) Disagree (2) Somewhat disagree (3) Neither agree nor disagree (4) Somewhat agree (5) Agree (6) Strongly agree (7)
Most homeless people would work if they could get a job. (1)

I think that the homeless are just pulling a con on people when they are panhandling. (2)

Homeless people choose to be homeless. (3)

I feel bad for the homeless when I encounter them. (4)

Homeless people are more likely to commit violent crimes. (5)

Homeless people only ask for money because they have to. (6)

People experiencing homelessness are lazy. (7)

I want to help the homeless when I encounter them. (8)

Whatever money homeless people have, they spend on drugs and alcohol. (9)
Homeless people are looking for handouts rather than work. (10)

Q17 This is a true or false question.

Homeless people constantly face hardships due to their lack of stable housing. This university has a better football team than Alabama. Select definitely true to indicate you are paying attention.

- Definitely true (1)
- Probably true (2)
- Neither true nor false (3)
- Probably false (4)
- Definitely false (5)

Q18 Generally speaking, do you consider yourself a Democrat, Republican, Independent, or something else? (Select one)

- Democrat (1)
- Republican (2)
Q19 Would you consider yourself a strong or a not-so-strong Democrat?

- Strong (1)
- Not so strong (2)
- Unsure (3)

Q20 Would you consider yourself a strong or a not-so-strong Republican?

- Strong (1)
- Not so strong (2)
- Unsure (3)

Q21 Would you say that you lean to the Democratic Party or Republican Party, or would you say you don't lean to either party?

- Lean Democratic (1)
- Lean Republican (2)
Q22 In what year were you born?

▼ 2005 (1) ... 1940 (66)

Q23 Are you from the United States?

o Yes (1)

o No (2)

Q24 Please enter the country that you are from

________________________________________________________________

Q25 Please enter the State you were raised in

▼ Alabama (1) ... Wyoming (50)

Q26 What is the name of the town or city you are from?

________________________________________________________________

43
Q27 Are you of Hispanic, Latino, or Spanish origin?

- Yes (1)
- No (2)
- Unsure (3)

Q28 Which of the following best describes you? (Select all that apply)

- White (1)
- Black or African American (2)
- American Indian or Alaska Native (3)
- Asian (4)
- Native Hawaiian or Pacific Islander (5)
- Other (6) __________________________________________________

Q29 Do you currently have a job which you get paid for?

- Yes (1)
- No (2)
Q30 Do you work full-time or part-time? Full-time work is considered working over 40 hours a week between your jobs, while part-time is anything less.

- Full-time (1)
- Part-time (2)

Q31 How would you describe the household you grew up in?

- Upper class (1)
- Middle class (2)
- Lower class (3)

Q32 Do you describe yourself as a man, a woman, or in some other way?

- Man (1)
- Woman (2)
- Some other way (3)

Q33 Would you describe yourself as a "born-again" or evangelical Christian, or not?

- Yes (1)
Q34 How important is religion in your life?

- Very important (1)
- Somewhat important (2)
- Not too important (3)
- Not at all important (4)

Q35 Aside from weddings and funerals, how often do you attend religious services?

- More than once a week (1)
- Once a week (2)
- Once or twice a month (3)
- A few times a year (4)
- Seldom (5)
- Never (6)
- Don't know (7)
Q36 People practice their religion in different ways. Outside of attending religious services, how often do you pray?

- Severaltimes a day (1)
- Once a day (2)
- A few times a week (3)
- Once a week (4)
- A few times a month (5)
- Seldom (6)
- Never (7)
- Don't know (8)

Q37 What is your present religion, if any?

- Protestant (1)
- Roman Catholic (2)
- Mormon (3)
- Eastern or Greek Orthodox (4)
- Jewish (5)
- Muslim (6)
Q38 Conclusion:

Thank you for your time.

Please type your five digit MEL number, so that you may receive credit for your participation in this study.
Works Cited


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