

UNDERSTANDING HOSPICE VOLUNTEER MARKETS IN KENYA

BY

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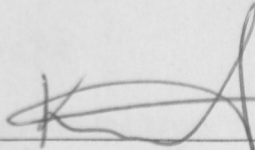
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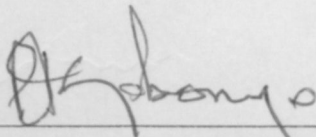
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DECLARATION

This project is my original work and has not been submitted for a degree in any other University.


_____ - 31/10/2000
KILAHO CHADEKA KENNEDY

This project has been submitted for examination with my approval ^{as} the University
Supervisor ^


_____ 1-11-2000
PROF. PETER K'OBONYO

DEDICATION

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For my:

Dad and Mum, Mr. & Mrs. Chadeka - whose dream I live to realise.

Son Jemo - whom I live for.

Brother Jumba - who guided me to see the light.

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ABSTRACT

This study had two major objectives:

- (i) The first objective sought to determine those demographic and psychographic variables that serve as incentives or disincentives for an individual's volunteer behavior.
- (ii) It also sought to determine the demographic and psychographic variables that distinguish hospice volunteers from non-volunteers.

Besides, one hypothesis was tested in the study.

The null hypothesis (Ho) was that hospice volunteers and non-volunteers exhibit the same psychographic variables as shown by their opinions.

The study made use of primary data collected between June 10th and August 15th. The population of interest consisted volunteers for all the hospices in the country. It was therefore a census survey of all hospice volunteers. There are five hospices spread across Kenya - two are located in Nairobi, one in Nyeri, Kisumu and Eldoret respectively. One of the hospices is categorized as a non-traditional hospice for it caters for the HIV positive orphaned or abandoned children.

For comparative purposes, non-hospice volunteers were also studied. In total 60 questionnaires were administered to 30 hospice volunteers and 30 non-hospice volunteers. Although there are more hospice volunteers than 30, these were the ones found to be regular hospice volunteers. The others are very unpredictable and erratic in their volunteer services.

The questionnaire was administered by the researcher and his assistants on a drop and pick basis. Of the 60 questionnaires administered to both volunteers and non-volunteers, only 39 were returned in time to form part of the data analysis.

The data was presented in tables. Percentages, total and mean scores were used in the analysis of demographic characteristics. The t-test was employed to establish significance in the difference between psychographic profiles exhibited by hospice volunteers and those exhibited by non-volunteers. The findings were:

Catholic doctrine was found to favour volunteering compared to Protestantism and other religious denominations. Most of the volunteers are frequent participants in religious functions. Most take part in such functions more than two times per week.

Volunteers age bracket was also found to be generally low between 15-35 years. The reason for this is that such young people have plenty of free time at their disposal. This is because most of them are either unemployed or have not settled down to a marriage life.

Volunteers were also found to be generally well-educated people. Most of them have attained college/university level status. Those in formal employment were found to have generally high gross family incomes. Those unemployed were found to come from families with high gross family incomes. Such volunteers spend their free time socialising with friends.

Finally, both volunteers and non-volunteers were found to be generally positive in their attitudes towards volunteering as expressed by their opinions.

The null hypothesis that both volunteers and non-volunteers do not exhibit the same psychographic variables of attitude as shown by their opinions was therefore rejected.

CHAPTER ONE

INTRODUCTION

1.1 BACKGROUND

After independence Kenya embraced the spirit of 'harambee' whose guiding principles were voluntary donation and voluntary offer of ones services for community development. Volunteering is however not a culture embraced and practised in Kenya alone. It is widely acknowledged all over the world as an important component of our present day society in general.

In the present day world, volunteering has become particularly important to the thousands of non-profit organizations (NPOs) which rely on its generosity. Many NPOs are highly dependent upon donated labour from volunteers willing to forego alternative consumption activities to expend some of their time in volunteer service.

1.1.2 Hospice - Volunteers

The word 'Hospice' is derived from the word 'Hospitium' which means hospitality.

The first hospice was opened in 1846 by the Irish Sisters of Charity who established Our Lady's Hospice, Dublin, Ireland. They made caring for dying patients their concern. That is how the term 'hospice' came to be equated with caring for the dying.

Hospice organizations greatly rely upon volunteer services. Such volunteers serve the terminally ill patients and their families by providing personal love, patient support, spiritual support and family support.

Burn (1984) indicates that volunteers are the backbone and sustaining forces behind a successful hospice program. Hospice volunteers are 'a key element in the provision of services to dying patients and their families' (Lafer, 1984).

The first hospice in Kenya was introduced to handle the terminally ill cancer patients. Nairobi hospice was incorporated and supported in the UK and Holland in 1990. Other traditional hospices exist in Nyeri, Kisumu and Eldoret. Nyumbani hospice, a non-traditional hospice on the other hand was founded as a non-profit organisation to cater for the abandoned and orphaned HIV positive children.

Both types of hospices rely heavily on the goodwill of volunteers to sustain their operations.

1.2 STATEMENT OF THE PROBLEM

As noted, volunteers are instrumental in the smooth running of hospice operations. However, to effectively recruit and retain such volunteers' calls for a thorough understanding of volunteer markets; i.e. their demographic and psychographic characteristics.

The greater problem facing volunteer organisations at the moment is a shortage of people to volunteer their services to such organisations. Wyner Jr. (1999) studied senior volunteers and attempted to differentiate traditional hospice volunteers from other volunteers.

He also undertook a detailed study of hospital volunteers as customers. Other similar studies have been conducted. No study into volunteer markets in Kenya has been undertaken.

An exploratory study by the researcher at Nairobi and Nyumbani hospices indicated a general shortage of volunteers and donors to these organisations. However no systematic study into the characteristics of current and potential volunteers as distinguished from non- volunteers has been done in Kenya. Such a study is important if management is to effectively target volunteers.

1.3 OBJECTIVES OF THE STUDY

The study has the following as its main objectives:

- 1) Determine those demographic and psychographic variables that serve as incentives or disincentives for an individual's volunteer behavior.
- 2) Determining the demographic and psychographic variables that distinguish hospice volunteers from non-volunteers.

1.4 HYPOTHESIS

Hospice volunteers and non-volunteers do not exhibit the same psychographic variables as shown by their opinions.

1.5 IMPORTANCE OF THE STUDY

The findings of this study are expected to benefit the following groups of people:

- 1) Management - the findings are expected to benefit hospice and other volunteer organisation management in designing effective target marketing programmes.
- 2) Academicians - the findings of this study are expected to form a basis upon which further research into other issues related to volunteer markets can be studied.
- 3) Government - it will help the relevant government ministries to formulate policy framework with regard to terminal illnesses and the required infrastructure to help the terminally ill.

1.6 DEFINITION OF TERMS

1. Altruistic personality - personality that is habitually kind and helpful to others.
2. Demographic variables - are variables used in market segmentation and include age, family size, gender, income, occupation, education, religion, race, nationality and social class.
3. Psychographic variables - are used in market segmentation and include lifestyles and personality.
4. Value - a value is defined as an enduring belief that a specific mode of conduct is personally and socially preferable to alternative modes of conduct - Rokdach (1968).

CHAPTER TWO

LITERATURE REVIEW

2.1 HOSPICE VOLUNTEERS

Hospice volunteers are a special group who are available to provide supportive services for patients and their relatives. Men, women, business people and retirees can volunteer to help. Volunteers are carefully interviewed and receive training from the hospice team and other professionals before their participation in hospice care (www.Scu.edu).

Some specific ways a volunteer may help include:

- a) Visiting with patients.
- b) Participating in recreational activities.
- c) Relieving a caregiver for short periods of time.
- d) Shopping.
- e) Providing childcare.
- f) Providing transportation for physician office treatment visits
- g) Assisting with personal care.
- h) Helping with light household tasks.

The different types of volunteers include patient family volunteers, bereavement volunteers, children program volunteers and spiritual care volunteers.

2.2 THE ROLE OF THE HOSPICE

The hospice concept has given new hope to those who before could only look forward to their final days alone in the cold, impersonal setting of an institution. The mission of the hospice is to make the quality of the patient life the best possible when 'cure' is not possible. The hospice provides the terminally ill people and their families choices for care during a time of uncertainty.

The main objectives of hospices are to control pain and nausea caused by the disease itself and/or by medications, and to prevent depression if possible - Kritz (1995). If a client is depressed, hospice caregivers can identify this and appropriate treatment can be provided. Focus is on comfort to pain relief, not measures to cure or prolong life of terminally ill patients. Pain management is the most important care provided by hospice - Weiss (1989). Research indicates that uncontrolled pain contributes to terminally ill patients' physical, emotional and mental deterioration.

The hospice also provides physical, emotional and psychological support. The hospice mainly provides care in the patient's home. The patient's family receives support from nurses, aid, counsellors, the clergy and volunteers. There are counselling services provided for the patient and family members follow-up on them to adjust to death and bereavement, usually up to one year - Berry (1993). The hospice has brought the choice to many to have a better quality of life, to help many terminally ill people whose life expectancy is less than six months; Importantly, enabling them to die with dignity.

2.3 VOLUNTEERING FOR NON-TRADITIONAL HOSPICES

In the world many Aids service organisations have emerged. Some volunteers provide emotional and social support as 'buddies' to people with Aids (PWAs) and others help PWAs with household chores or transportation; still others staff information and referral hotlines, make educational presentations or engage in advocacy. Community volunteers also raise funds to support the work of Aids service organisations (ASOs) and/or directly assist people with Aids (PWAs).

Aids volunteers donate valuable services; the cost of caring for PWAs is greatly reduced in areas with active volunteer programs and Aids-related deaths have become less likely to take place in inpatient hospital settings and more likely to occur at home or in hospices. This is most likely because of support services provided by volunteers. Aids volunteerism has a considerable economic, public policy and is of public health significance.

Aids volunteers play critical roles in helping to meet the physical and psychological needs of PWAs. However to be sure but they have mental health needs of their own (Omoto 1990). Societal change related to HIV may importantly depend on volunteers, the preventive and palliative services they provide, and their ability to enact effective programs of education and advocacy.

According to Omoto & Snyder (1992), volunteerism is seen as a process involving three interactive and sequential stages; antecedents of volunteerism, experience as volunteers,

and the consequences of volunteering. In their research they sought to understand why people become Aids volunteers, what sustains their volunteer activities over time and in the face of personal costs of volunteerism, what volunteers and others gain from their efforts and how volunteering affects the lives of volunteers, people with Aids (PWAs), and the communities at large.

At the level of the volunteer, the antecedent's stage of the volunteer process addresses the characteristics that volunteers bring to ASOs and to their work - Omoto (1998). Potential volunteers have differing personalities that predispose them to offer certain kinds of help and have differing personal experiences with HIV diseases and volunteerism. Their motivations for their work is also likely to vary. Aids volunteerism gives some people a chance to express their personal values and beliefs or to satisfy felt humanitarian obligations to help others; a values motivation.

Another motivation expressed by volunteers is that of community concern, or volunteering out of obligation or concern about a community or particular social grouping (Omoto and Crain 1995). Some Aids volunteers come to their work primarily in search of greater understanding of Aids and how people cope with the HIV disease, some for reasons related to personal development such as to challenge themselves or enlarge their social networks.

The other motivation is esteem enhancement or volunteering to feel better about oneself or escape pressures and stress in other areas of one's life. In general, values motivation

tends to be endorsed most strongly by Aids volunteers and esteem least strongly (Omoto & Synder, 1993).

The act of Aids volunteerism is initiated and maintained for different and sometimes changing reasons. According to Omoto (1993), knowing about these different motivations should permit ASOs to target volunteer recruitment efforts to the specific motivations of particular people.

In focusing on the experience stage of volunteerism for volunteers themselves, it has been observed that volunteers who serve as friends for people with Aids have relatively high expectations for the quality of the relationships they will develop with client PWAs. Actual Volunteer - PWAs relationships are experienced as lower in quality than these expectations (Gunn & Crain, 1998). Similarly volunteer satisfaction with these relationships fall short of expectations and volunteers report some stress from these relationships.

Evidence also suggests that the stress experienced in these relationships by volunteers is related to the closeness of the volunteer - PWA relationship and the clients health. Less close relationships early on and healthier clients are related to less volunteer stress.

Volunteers also report feelings of stigmatisation and discomfort resulting from their work as Aids volunteers. According to Snyder, Omoto and Crain (1998) many report that the reactions of members of their own social networks have caused them to feel embarrassed

or stigmatised because of their Aids volunteerism. Surveys indicate that the need for charitable organisations is greater in the recent past and that charitable organisations help to make communities better places to live (Independent sector, 1996).

Hospice volunteers report significantly lower feelings of stigmatisation from the work they do (Omoto, Sunder & Crain, 1998).

At the consequence stage, it has been found that volunteers are indeed changed by their experiences with for example, increase in knowledge about safer sex practices, less stereotyped beliefs about PWA and significantly greater comfort with Aids and Aids-related issues. In their own self styled reports volunteers state that their experiences have powerfully affected and changed them (Omoto & Synder, 1995, 1998).

In exploring longevity of service it has been found that duration of service of one group of Aids volunteers was related to their reported satisfaction with their work, the amount of support they received from their social network, and the motivations they reported for becoming Aids volunteers (Omoto & Synder, 1995). Specifically volunteers tended to serve longer, to the extent that they were more satisfied with their work, had less social support, and reported stronger, and particularly self-focused, motivation for volunteering. To the extent that volunteer efforts disrupt harmonious relations with social network members and these members respond negatively to this disruption and to Aids volunteerism, volunteers may be likely to quit their ASO sooner than if their work is supported by others.

People who believe that they will be targets of stigmatisation for Aids - related volunteerism are less likely to follow through on their initial intentions to become volunteers. Those people who report for volunteer training expecting the most negative reactions from others are least likely to complete training. For those who become Aids volunteers, greater perceptions of stigmatization is related to an increased likelihood of early termination of service, and particularly if the experiences of stigmatisation were relatively unanticipated - Omoto, Synder & Cain (1998a).

Engaging in Aids volunteerism for reasons related to understanding, personal development or esteem enhancement all predicted longer duration of service, whereas ratings of the values and community concern motivations were unrelated to longevity of service. Volunteering for relatively more other-focused reasons, however, may not sustain people in the face of the stress and stigmatisation they are likely to encounter as Aids volunteers. These findings have implications not only for recruitment of volunteers by ASOs, but also for their training and for strategies of retention.

Today, the face of the HIV epidemic continues to evolve and many of the needs of PWAs are becoming less acute. What was once pressing social concern about HIV has begun to wane (Rofes, 1998). Still it is clear that the need, both current and future, for volunteers to provide education, care, and advocacy-related services to PWAs is likely to increase.

2.4 DEMOGRAPHIC CHARACTERISTICS

Demographic characteristics include age, sex, marital status, income, occupation and education. Demography refers to the vital and measurable statistics of population - Schoffan (1997).

Demographics help to locate a target while psychological or socio-cultural characteristics help to describe how its members think and feel - Kotler (1998). Demographic studies indicate that "mature-adult market" - over 50 years has much greater disposable income than its younger counterparts.

2.4.1 Age

Many marketers have carved for themselves a niche in the market place by concentrating on a specific age segment.

2.4.2 Sex

The traditional role of women is changing as more get into formal employment.

2.4.3 Marital Status

The various specific marital status include single and divorced individuals, single parents and dual-income married groups.

2.4.4 Income, Education and Occupation

Income simply indicates the ability (or inability) to pay for a product. Hence marketers combine income with something else to define their target markets more accurately e.g. age can be combined with income to identify the important "affluent elderly" segment.

Education and income tend to be closely related. Most high paying jobs require high educational training.

Media preferences also tend to support the close relationship among income, occupation and education. Hence education, occupation and income are combined in a composite index of social class that is useful in that it reflects values, attitudes, tastes and lifestyles.

2.5 PSYCHOGRAPHIC VARIABLES

2.5.1 Attitudes

An attitude is a lasting, general evaluation of people (including oneself), objects or issues - Solomon (1996). Attitude is lasting because it tends to endure over time.

According to psychologist Katz (1996) attitudes exist because they serve some function for the person. They are determined by a person's motives. The attitude functions as identified by Katz include:

a) Utilitarian Function

This is related to the basic principles of reward and punishment. Attitudes are developed towards objects or other issues depending on whether they provide pleasure or pain. If

the person derives pleasure from helping others, this individual is likely to develop a positive attitude towards helping others. In this case there is an appeal to the utilitarian function.

b) **Value-expressive Function**

Attitudes that perform a value-expressive function express the consumer's central values of self-concept - Solomon (1996). The attitude is formed on the basis of what the object or idea says about him or her as a person. Such value-expressive attitudes are relevant to lifestyle analyses where individuals cultivate a cluster of activities, interests and opinions to express a particular social identity.

c) **Ego-defensive Function**

Attitudes that are formed to protect a person from external threats or internal feelings perform an ego-defensive function.

d) **Knowledge Function**

Some attitudes are formed as a result of a need for order, structure or meaning. This is often present if a person is in an ambiguous situation or is confronted with a new product - Solomon (1996).

Attitude can serve more than one function but in most cases a particular one will be dominant. By isolating the dominant function a product or idea serves for an individual, marketers can emphasize those benefits in communication and packaging. Ads relevant

to the function favourable thoughts about what is being marketed and can result in heightened attention for both the ad and idea/product.

Attitude has three components: affect, behavior and cognition - Kanuk (1994). Affect refers to the way an individual feels about an attitude object. Behavior involves the person's intention to the way an individual feels about an attitude object. Cognition refers to the belief one has about an attitude object. These three components of an attitude are referred to as the ABC model of attitudes. The model emphasizes the interrelationships among knowing, feeling and doing - Solomon (1996). The interrelationships vary depending upon an individual's level of motivation with regard to the attitude object - Assels (1998).

2.5.2 Forming Attitudes

Attitudes can form in several ways depending on the particular hierarchy of effects in operation - Core (1985). It can occur because of classical conditioning, where an attitude object is paired with a catery trend. It can also be formed through instrumental conditioning in which consumption of the attitude object or issue is reinforced. According to Solomon (1996) attitude formation can also occur as a result of some complex cognitive process.

2.5.3 Commitment to an Attitude

The individual degree of commitment to an attitude varies with the level of involvement with the attitude object - Kanuk (1996). Hence:

a) **Compliance**

Here an attitude is formed because it helps in gaining rewards or avoiding punishment from others. Such an attitude is likely to change when a person's behaviour is not monitored.

b) **Identification**

The identification process occurs when attitudes are formed in order for one to be similar to another person or group - Forkan (1985).

c) **Internalisation**

Occurs at a high level of involvement and here deep-seated attitudes are internalised and become part of the person's value system. Such attitudes are very difficult to change because they are very important to the individual.

2.5.4 **Lifestyle**

Also referred to as psychographic characteristics, lifestyle variables are defined by how people spend their time (activities), what they consider important in their environment (interest) and what they think of themselves and the world around them (opinions) - Assel (1978).

2.5.5 Measurement of Lifestyle Characteristics

In contrast to demographics, there are no fixed definitions for lifestyle such as age, income or occupation. Lifestyles are measured by developing an inventory of activities, interests and opinions (AIO inventory) Mitchell (1981).

There are two types of AIO inventories:

- (a) Generalized AIO inventories that can be applied across product and service categories and identifies broad segments like sports enthusiasts.

Respondents can be given many statements and are asked the degree to which they agree or disagree with those statements. The obtained items can then be reduced to the required lifestyle dimensions by factor analysis, a method for grouping variables that are highly correlated.

- (b) Product-specific AIO inventories - are lifestyle inventories for a specific product for example internet users - Assel (1998).

Lifestyle characteristics are often used by marketers to develop market segmentation media and advertising strategies.

CHAPTER THREE

METHODOLOGY

3.1 POPULATION

All the four traditional hospices in Nairobi, Eldoret, Kisumu and Nyeri and Nyumbani hospice, a non-traditional hospice were approached to participate in the study. All volunteers serving in various roles in these organizations were served with a questionnaire on a drop and pick basis. The questionnaire was collected from their places of volunteer work.

For comparative analysis, non-volunteers were also studied. For every volunteer studied, there was a non-volunteer in the study.

Volunteers were asked to provide or give references of non-volunteers to participate in this study.

3.2 SAMPLE

The sample frame for hospice volunteers was obtained from the hospice administration records. All the people whose names appear in the records as volunteers were asked to participate in the study. It was therefore a census survey of all hospice volunteers.

A corresponding number of non-volunteers obtained from volunteers were also approached for the study. These were drawn from various circles of life and of various ages.

As a representative check, administrators familiar with their volunteers were contacted after the data had been collected. They were asked to describe the demographic and psychographic characteristics of their volunteers. This was expected to verify the reliability of the data obtained.

3.3 MEASURES

Previous studies on volunteers used demographic and lifestyle variables and the same approach was used in this study. These included age, gender, education, income, church membership, church attendance and attitude. Respondents were also asked to report the number of hours they volunteer every month.

To measure psychographic variables, the population was asked a number of opinion questions custom made for this study. The mean and t-tests were used to uncover the significance of difference in opinions. Respondents were also asked to report the number of hours they volunteer per month.

CHAPTER FOUR

DATA ANALYSIS, FINDINGS AND DISCUSSION

4.1 INTRODUCTION

This chapter contains the summaries of data, analyses and presentation of findings of the study. These are treated in two major sections. The first section is findings and analyses about respondent demographics. The second part deals with analyses and findings about respondent psychographics, represented by their opinions.

The following key was used to score the responses in the Likert type scale questions.

Scale	Scores for positive statements	Scores for negative statements
Strongly Agree	+2	-2
Agree	+1	-1
Disagree	-1	+1
Strongly Disagree	-2	+2

4.2 OVERVIEW OF SURVEY RESULTS

A total of 60 questionnaires were issued to respondents. Of these, 30 went to people who volunteer for hospice organizations in Kenya and 30 were given to non-hospice volunteers. Only a total of 39 questionnaires were received in time to be included in this analysis. 25 of the questionnaires received were those served to hospice volunteers.

Of those hospice volunteers who responded, 73.1% were female and 26.9% were male. Of the non-volunteers who responded, 78.6% were female and 21.4% were male. The non-hospice volunteers consisted of 92.9% employee-professionals, and 7.1% students.

The hospice volunteers who responded were drawn from the occupational categories of employee-professionals (34.6%), student (50%) and volunteers (11.5%).

4.3 VOLUNTEER DEMOGRAPHICS

Table 4(a) Respondent Nationality

	Volunteers (%)	Non-volunteers
Kenyan	61.5	100
Foreigner	26.9	
None response	11.5	
Total	100.00	

The nationality of respondents was broadly categorized into Kenyan and Foreigner (non-Kenyan). All the non-volunteers who responded were Kenyans representing 100% response rate to this question. Of those hospice volunteers who gave their national identities 61.5% were Kenyans while 26.9% were foreigners. The foreigners were drawn from Ghana, America, Italy, Mauritius, France, Czechoslovakia and Britain. 11.5% of the hospice volunteer respondents did not indicate their national identities.

Table 4(b) Respondents Religious Affiliations

	Valid percent of volunteers	Valid percent of non volunteers
Catholic	57.7	28.6
Protestant	38.5	71.4
Other	3.8	

57.7% of the hospice volunteer respondents were Catholics. This compares favorably with 28.6% of non-volunteer respondents who professed Catholicism. On the other hand 38.5% of the volunteers indicated their religion as protestant while majority of the Protestants were noted among the non-volunteer respondents with a proportion of 71.4%. 3.8% of the volunteers were Hindus.

Table 4(c)i: Marital Status of Non-Volunteers

Status	Frequency	Percent
Single with children	1	7.10
Single without children	4	27.60
Married with children	8	57.10
Widowed without children	1	9.10
Total	14	100.00

As is shown in the table above majority of the non-volunteer respondents were married with children (57.1%). This was closely followed by single people without children (28.6%). Only one respondent was widowed without children.

Table 4(c) ii Marital Status for Volunteers

Status	Frequency	Percent
Single without children	20	80.0
Married without children	1	4.0
Divorced without children	4	16.0
Total	25	100.00

Compared to 27.6% of non-volunteers, 80% of volunteers for hospices comprised of single people without children. 16% of the volunteer respondents were divorced without children. These mainly volunteer for the only non-traditional hospice in the country - Nyumbani which caters for the orphaned and abandoned HIV children. No respondent among non-volunteers was divorced. Only one volunteer was married without children.

Table 4(d) Number of Children for Volunteers and Non-Volunteers

Number of children	Volunteer percent	Non-volunteer percent
1	33.3	20.0
2	33.3	40.0
3	16.7	10.0
4	16.7	10.0
5	0	20.0
Total	100.00	100.00

Of those volunteers with children, majority had between 1 and 2 children with each representing 33.3% of the proportion. This is unlike non-volunteer respondents where majority had two children representing 40% of the proportion of non-volunteers with children. The category of 3 and 4 children shared 16.7% a piece among the volunteers while this was represented by 10% a piece for non-volunteers. 20% of non-volunteers with children had five children. No single volunteer had more than four children.

Only one volunteer had children in the age bracket of 25-34 years representing 4% of the total number of volunteer respondents. 20% of the volunteers had children between the

age of 0-15 years. 9 of the non-volunteers had children between the age of 0-15 years. This represented 64.29% of the total number of non-volunteer respondents. Only one non-volunteer had a child in the age bracket of 16-25 years. This represented 7.14% of the total number of volunteer respondents.

Overall, the proportion of non-volunteers with children in the various age brackets was higher than that for volunteers.

All the children by volunteers were single. This was indicated by all the six volunteers who have children. Of the non-volunteer respondents with children, only one representing 7.14% of the total number of non-volunteer respondents had children who were married with children.

Table 4 (e) i Volunteers' Age Bracket

Age Bracket	Frequency (f)	Percent	Cumulative percent
15-25	17	68	68
25-35	4	16	84
35-45	3	12	96
45-55	1	4	100
	Σf 25	Σp 100	

As the table shows, over 80% of volunteers have their age less than 35 years. Only 16% of volunteer respondents' age is over 35 years.

Table 4 (e) ii Non-Volunteer Age Bracket

Age Bracket	Frequency (f)	Percent	Cumulative percent
15-25	2	14.3	14.3
25-35	4	42.9	57.1
35-45	5	35.7	92.9
45-55	1	7.1	100
	Σf 14		

Compared with volunteer only 57.1% of non-volunteer respondents were aged between 15-35 years. Majority of the non-volunteers were in the age bracket of 25-35 years representing 42.9% of the total number of non-volunteer respondents.

4.3.2 Education Level

Majority of volunteer respondents (73.1%) had either attained a university or college graduate level or were in pursuit of such excellence. Only 26.9% of volunteers were high school graduates.

Similarly, 78.6% of non-volunteer respondents had at least a college or university certificate or were in pursuit of such credentials. Only 21.4% of non-volunteers were high school graduates.

(See appendix for analysis table).

Table 4(f) Description of Residence

Description	Percent Volunteer	Percent Non-Volunteer
Rented	40.0	71.4
Owned	36.0	21.4
Live with relatives/friends	20.0	7.1
Other	4.0	
	Σp 100.0	

As table 4(f) indicates, majority of non-volunteers indicated that they live in rented houses (71.4%). The case is the same with volunteers 40%. However a significantly higher proportion of volunteers indicated that they are accommodated by friends or relatives (20%), only one volunteer indicated that they live in tents. This represented only 4% of the total population.

Table 4(g) Gross Family Incomes for Volunteers and Non-Volunteers

Bracket	Volunteers		Non-volunteers	
	Frequency	Percent	Frequency	Percent
Less than sh. 20,000	4	22.2	5	35.7
21,000-40,000	4	22.2	7	50.0
41,000-60,000	4	22.2	2	14.3
31,000-100,000	2	11.1		
101,000-120,000	2	11.1		
121,000-140,000	1	5.6		
Over sh.200,000	1	5.6		

Volunteers disclosed a wide range of income brackets ranging from the least (22.2%) to the highest bracket (5.6%). Most of the non-volunteers had their incomes confined to the lower brackets with majority of respondents (50%) falling in the 41,000-60,000 income bracket. The difference is largely due to the expatriate presence among hospice volunteers. All the non-volunteers approached were Kenyan citizens employed locally.

While all non-volunteers attend religious functions only 70% of volunteer respondents do this. Table 4(h) shows the frequency of religious activity attendance for both volunteers and non-volunteers.

Table (h) Religious Functions Attendance

Frequency	Volunteer percent	Non-Volunteer percent
Once	3	35.7
Twice	16	50.0
More than two times	32	14.3
Non response	20	
	Σ 100.0	Σ 100.0

From the table it emerges the volunteers who attend religious functions more than once constituted 32% of respondents. The same case applied to those attending such functions once. 16% of volunteers did not respond to this question. However, majority of the non-volunteers indicated that they attend religious functions twice in a week. These represented 50% of the total number of respondents.

Both volunteers and non-volunteers showed preference for socializing with friends or family during their free time. 72% of the volunteer respondents were in agreement while over 80% of non-volunteers agreed. 20% of volunteers engaged in sporting activities during their free time compared to 7.1% of non-volunteers. Non of the non-volunteer respondents belong to a private members' club while only 3.8% of the volunteers spend their time at such clubs.

4.4 ATTITUDES OF VOLUNTEERS AND NON-VOLUNTEERS

Table 4.4(a) shows that there is no significant differences in the opinions expressed by both volunteers and non-volunteers regarding various aspects on volunteerism.

Table 4.4(a) Mean Scores on Opinions

Opinion	Status	Mean
The suffering of other should be everyone's concern	Volunteers	1.6154
	Non-Volunteers	1.6923
Helping others should not necessarily be accompanied by economic motive	Volunteers	1.4231
	Non-Volunteers	1.3077
People should volunteer as a service to God	Volunteers	1.2800
	Non-Volunteers	1.5385
Volunteerism enhances social standing	Volunteers	0.8462
	Non-Volunteers	0.7500
Volunteerism alleviates suffering	Volunteers	0.9600
	Non-Volunteers	1.2380
Volunteerism is service to mankind	Volunteers	1.5385
	Non-Volunteers	1.3077
Volunteerism to charity is a good way to spend free time	Volunteers	1.3462
	Non-Volunteers	0.9231
Volunteering is not important	Volunteers	1.8077
	Non-Volunteers	1.3846
Lack of time is the reason for failure to volunteer	Volunteers	0.9615
	Non-Volunteers	0.3077
Lack of medical skills is the reason for failure to volunteer for hospices	Volunteers	1.3462
	Non-Volunteers	1.0000

Table 4.4 (a) continued

Opinion	Status	Mean
Hospices require highly trained medical staff	Volunteers	-0.3200
	Non-Volunteers	7.692E-02
The terminally ill should be left to die for they would die anyway	Volunteers	1.8400
	Non-Volunteers	2.0000
The terminally ill require our compassion	Volunteers	1.8333
	Non-Volunteers	1.7692
Services in hospices exposes one to unnecessary health danger	Volunteers	1.3200
	Non-Volunteers	1.3846
I do not understand the role of hospices	Volunteers	1.3200
	Non-Volunteers	0.6923
Nobody approached me to offer volunteer services	Volunteers	8.333E-02
	Non-Volunteers	-0.1536
Volunteerism is for the rich and well off	Volunteers	1.6400
	Non-Volunteers	1.6923

Although differences in opinions are insignificant, table 4.3(a) shows that volunteers scored slightly more than non-volunteers on most of the statements. This represented a proportion of 64.71% of the seventeen statements posed to respondents.

In spite of the slight differences, table 4.3(b) confirms that the differences in opinions between volunteers and non-volunteers were insignificant. The table contains t-tests for each statement at various degrees of freedom (df) and 95% confidence level. These are compared with corresponding table t values.

4.4(b) -t-tests on Opinions

Opinion	t	df
The suffering of other should be everyone's concern	-0.301	37
Helping others should not necessarily be accompanied by economic motive	0.359	37
People should volunteer as a service to God	+0.798	36
Volunteerism enhances social standing	0.230	36
Volunteerism alleviates suffering	-0.677	36
Volunteerism is service to mankind	1.059	37
Volunteerism to charity is a good way to spend free time	1.107	37
Volunteering is not important	2.092	37

Table 4.4 (b) continued

Lack of time is the reason for failure to volunteer	1.490	37
Lack of medical skills is the reason for failure to volunteer for hospices	1.134	37
Hospices require highly trained medical staff	-0.928	36
The terminally ill should be left to die for they would die anyway	-0.688	35
The terminally ill require our compassion	0.323	35
Services in hospices exposes one to unnecessary health danger	-0.220	36
I do not understand the role of hospices	1.830	36
Nobody approached me to offer volunteer services	0.451	35
Volunteerism is for the rich and well off	-0.203	36

As the table shows, there is little difference in the means of opinions. This is ascertained by comparing the calculated t-values with the critical t-values for 2 tails at 95% confidence at the given degrees of freedom. The only notable difference was in the opinion that 'volunteering is not important'. Here volunteers scored significantly high indicating how much they treasure volunteerism. This therefore means that the null hypothesis that 'Hospice volunteers and non-hospice volunteers do not exhibit the same attitude as shown by their opinions' is rejected. The alternative hypothesis is rejected. The critical t exceeds the calculated t-tests.

CONCLUSION

A number of issues are brought to light from the foregoing analysis. The first is the clear differences in the demographic features characterizing volunteers and non-volunteers. Most hospice volunteers are single individuals and those with children have fewer children. Majority of the volunteers were consistently found to be young most falling in the age bracket of 15-25 years.

Another finding of this study is that more foreigners are more likely to volunteer than Kenyans. In most cases these are people with high incomes. However the Kenyans who volunteer are mostly students or people who are unemployed and therefore have plenty of free time. The working class who volunteer do so during their free time. This is mostly during weekends.

While both volunteers and non-volunteers are religious people, the volunteers are more regular in their attendance of religious activities. Another important finding is the relatively high proportion of catholic volunteers. Its doctrines seem to favour concern for others.

Another important observation is that there is no clear-cut distinction between volunteers and non-volunteers in terms of their opinions about volunteerism. Most non-volunteers are positive about volunteerism much as are hospice volunteers. This therefore means that demographic rather than psychographics should form the basis for targeting hospice volunteers for recruitment in Kenya.

CHAPTER FIVE

CONCLUSION

5.1 INTRODUCTION

This chapter summarizes and discusses the findings according to the objectives set out for the study. It also highlights the limitations of the study and makes recommendations regarding areas that require future research.

5.11 Conclusions on the Demographic Characteristics of Hospice Volunteers

It is clear that volunteering requires creation of free or extra time. Both Kenyans and foreigners of various nationalities offer volunteer services to hospices in the country. The implication of this therefore is that hospice organizations should look beyond the national boundaries in their search for people to offer volunteer services.

Another important aspect is the role played by various religious doctrines in influencing volunteer patterns. Generally Catholicism is favorable to volunteering. This emerged clearly with 57.7% of the hospice volunteers professing Catholicism. On the other hand, 71.4% of the non-volunteers were Protestants which confirms that Catholics are more oriented towards concern for others. This therefore forms an important group to target in searching for volunteers.

Single people without children are more likely to volunteer than married people with children. However married or divorced people without children also form an important group to target as volunteers. This is because in most cases they have some free time they can expend on volunteer services.

Majority of the young people in the age bracket of 15-35 years are more likely to volunteer in Kenya. This was reflected in the findings with 84% of the hospice volunteers falling in this age category. This compared favorably with non-volunteers who had 57.1% of the respondents falling in this age bracket. The reason for this is because such young people have more free time as they are either jobless or do not have other demanding responsibilities in their lives.

Another important finding is that volunteers are well-educated people majority of who have at least a college certificate. 73.1% of the volunteers had a college/university education. Since they are young people, most of the volunteers either live in rented houses or live with parents or relatives in rented houses. Some from well off families reside in their parents' own houses.

The gross family incomes for volunteers is generally high because of the expatriate presence and the fact that most young local volunteers come from well off families. Such volunteers are also frequent participants in religious activities with 32% taking part in religious functions more than two times per week compared to only 14.3% of the non-volunteers. Another important aspect of volunteers is the fact that they spend most of their free time socializing with other friends or families. They are therefore more people oriented.

5.12 Psychographic Characteristics of Volunteers

Only the opinions of volunteers and non-volunteers were sought. These were opinions touching on various aspects of volunteerism.

It was found that there are no significant differences in people's opinions towards volunteering. Both volunteers and non-volunteers are positive about volunteering. The implication of this is that hospice management cannot rely on an individual's opinion to concretely determine whether such an individual is likely to become a volunteer or not. Effort should be taken to investigate the demographic features of such individuals before qualifying them for volunteers.

5.2 RECOMMENDATIONS

There is need to employ target marketing in search for volunteers. It is therefore important that hospice understand the role demographic variables such as age, marital status, educational level, income, religious affiliations and nationalities play in determining potential volunteers. However, foreigners should be screened carefully as their cultural backgrounds impact differently on their motives to volunteer. While Kenyan youths will volunteer for having free time to expend on volunteer services, some foreigners will volunteer because they find it obligatory to do such service to fellow mankind.

In determining religious affiliations of volunteers care should be taken as some potential volunteers ally with none of the religious groups. Such people believe that in serving

other less fortunate or terminally ill people in society they are fulfilling their religious roles.

Generally the volunteers were found to be full time putting upto six hours of volunteering every week day.

People's opinions alone cannot form sufficient evidence of an individual's ability to volunteer. People can be dishonest in their opinions. Such opinions should therefore be backed by relevant demographic features.

5.3 LIMITATIONS OF THE STUDY

The major limitation of this study was time. The hospices are widely dispersed across the country which made data collection more difficult.

There was also a problem in getting non-volunteers to respond to most of the issues raised in the questionnaire. This led to a low response rate from the non-volunteers. Other practical constraints included limited resources.

It can be said however that the execution of this study was done with a lot of care so as to minimize these limitations.

5.4 RECOMMENDATIONS FOR FUTURE RESEARCH

This study covers hospice volunteers in general. Future studies could endeavor to investigate specific volunteer groups like seniors or juniors (youths).

The study concentrated on only hospice volunteers. It is recommended that future research effort be directed at investigating volunteers for other charitable organizations like homes for the aged and children's homes. It would probably uncover differences between volunteers for different organizations.

One objective of this study was to uncover the demographic and psychographic profiles exhibited by hospice volunteers. Such profiles are important in targeting volunteers for recruitment. Future research could be directed into investigating aspects concerning volunteer retention and motivation.

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APPENDIX

LETTER TO RESPONDENT

TO WHOM IT MAY CONCERN

I am a staff member of the University of Nairobi, Faculty of Commerce,
conducting a research titled "Understanding Market Valuation methods in Kenya".
I am writing to you in order to request for the attached questionnaire.

I appreciate your reply for academic purposes and need to reach to you

APPENDIX

ALAN CHADIMA KEMENY
C/O. 101/102
FACULTY OF COMMERCE
UNIVERSITY OF NAIROBI
NAIROBI

LETTER TO RESPONDENT

TO WHOM IT MAY CONCERN

I am a final year MBA student at the University of Nairobi, Faculty of Commerce, conducting a research titled "Understanding Hospice Volunteer markets in Kenya".

This is therefore to request for your assistance towards filling the attached questionnaire.

The information sought is purely for academic purposes and shall be held in strict confidence and in no way shall it be related to you.

Thank you.

Yours faithfully,

KILAHO CHADEKA KENNEDY
c/o MBA OFFICE
FACULTY OF COMMERCE
UNIVERSITY OF NAIROBI
P.O. BOX 30197
NAIROBI



UNIVERSITY OF NAIROBI
FACULTY OF COMMERCE
MBA PROGRAMME - LOWER KABETE CAMPUS

P.O. Box 30197
 Nairobi, Kenya

Telephone: 732160 Ext. 208
 Telegrams: "Varsity", Nairobi
 Telex: 22095 Varsity

DATE:

TO WHOM IT MAY CONCERN

The bearer of this letter:

Registration No:

is a Master of Business & Administration student of the University of Nairobi.

He/she is required to submit as part of his/her coursework assessment a research project report on some management problem. We would like the students to do their projects on real problems affecting firms in Kenya. We would, therefore, appreciate if you assist him/her by allowing him/her to collect data in your organization for the research.

Thank you.

DR. MARTIN OGUTU
LECTURER & CO-ORDINATOR, MBA PROGRAMME

MO/ek



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FACULTY OF COMMERCE
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Thank you.

DR. MARTIN OGUTU
LECTURER & CO-ORDINATOR, MBA PROGRAMME

MO/ek

LIST OF ORGANIZATIONS WHOSE MEMBERS WERE INTERVIEWED

1. CID Headquarters
2. Eldoret Hospice
3. Kisumu Hospice
4. Ministry of Education
5. Nairobi Hospice
6. Nyeri Hospice
7. Nyumbani Hospice
8. University of Nairobi

QUESTIONNAIRE

PART A

1. Name:.....
2. Sex: Male [] Female []
3. Nationality.....
3. Religion catholic [] Protestant []
other (please indicate).....
5. Occupation.....
6. Marital status single
Single without child/children []
Single with child/children []
Married without child/children []
Married with child/children []
Divorced without child/children []
Divorced with child/children []
Widowed with child/children []
Widowed without child/children []
Other (indicate).....

7. Please indicate the number of children you have (if any).....

8. Kindly indicate your children's age brackets

Age bracket

No of children in age brackets

Less than 15 years
15 - 25 years
25 - 34 years
35 - 44 years
45 - 54 years
Over 55 years

9 What is your children's marital status?

<u>Status</u>	<u>No. of children</u>
Single
Married
Divorced
Widowed

10. Please indicate your own age bracket

- Less than 15 years []
- 15 – 25 []
- 25 – 35 []
- 35 – 45 []
- 45 – 55 []
- Over 55

11. Please indicate your education level

- Primary []
- High school graduate []
- College/University graduate []
- Other (indicate)

12 How would you describe your residence?

- Rented []
- Owned []
- Live with friends/relatives []
- Other (please indicate).....

13. Which of the following categories includes your total gross family income per month

- | | |
|---------------------|-----|
| Less than sh 20,000 | [] |
| 21,000 – 40,000 | [] |
| 41,000 – 60,000 | [] |
| 61,000 – 80,000 | [] |
| 81,000 – 100,000 | [] |
| 101,000 – 120,000 | [] |
| 121,000 – 140,000 | [] |
| 141,000 – 160,000 | [] |
| 161,000 – 180,000 | [] |
| 181,000 – 200,000 | [] |
| Over sh. 200,000 | [] |

PART B

1. Do you attend religious functions/activities

Yes [] No []

2. If answer to (1) is yes, indicate number of times you attend religious functions per week.

Once []

Twice []

More than two times []

Other (indicate)

3. How do you spend your free time

On sporting activities []

Socializing with friends []

At private members club []

Other (Indicate).....

4. Do you offer any volunteer services

Yes [] No []

If answer is 'Yes' then go to 5. If the answer is 'No' then go to Q.8).

5. If answer to (4) is 'Yes' which activities do you volunteer for.

.....
.....

6. To which organization do you offer your volunteer services. (Please indicate name of organization).....

.....
.....

7. How many hours per week do you volunteer.....

.....
.....

8. What interests you in life.....

.....
.....

PART C

Q. 1. Indicate your opinion about the following statements

Key: 1. Strongly agree 2. Agree, 3 Disagree 4. Strongly disagree

- | | 1 | 2 | 3 | 4 |
|--|-----|-----|-----|-----|
| 1. The suffering of others should be everyone's concern | [] | [] | [] | [] |
| 2. helping others should not necessarily be accompanied by economic motive | [] | [] | [] | [] |
| 3. People should volunteer as a service to God | [] | [] | [] | [] |
| 4. Volunteerism enhances social standing | [] | [] | [] | [] |
| 5. Volunteerism alleviates suffering | [] | [] | [] | [] |
| 6. Volunteerism is service to mankind | [] | [] | [] | [] |
| 7. Volunteering to charity is a good way to spend free time | [] | [] | [] | [] |
| 8. Volunteering is not important. | [] | [] | [] | [] |
| 9. Lack of time is the reason for failure to volunteer | [] | [] | [] | [] |
| 10. Lack of medical skills is the reason for failure to volunteer for hospices | [] | [] | [] | [] |

Q.2. Indicate the degree to which you agree or disagree with the following observations.

Key: 1. Strongly agree 2. Agree, 3 Disagree 4. Strongly disagree

- | | 1 | 2 | 3 | 4 |
|---|-----|-----|-----|-----|
| 1. Hospices require highly trained medical staff | [] | [] | [] | [] |
| 2. The terminally ill should be left to die for they would die anyway | [] | [] | [] | [] |
| 3. The terminally ill require our compassion | [] | [] | [] | [] |
| 4. Service in hospices exposes one to unnecessary Health danger | [] | [] | [] | [] |
| 5. I don't understand the role of hospices | [] | [] | [] | [] |
| 6. Nobody has approached me to offer volunteer services | [] | [] | [] | [] |
| 7. Volunteerism is for the rich and well off. | [] | [] | [] | [] |

Status

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Volunteers	26	100.0	100.0	100.0

Sex:

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	7	26.9	26.9	26.9
	Female	19	73.1	73.1	100.0
	Total	26	100.0	100.0	

Nationality

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Kenya	16	61.5	69.6	69.6
	Foreigner	7	26.9	30.4	100.0
	Total	23	88.5	100.0	
Missing	System	3	11.5		
Total		26	100.0		

Religion

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	catholic	15	57.7	57.7	57.7
	Protestant	10	38.5	38.5	96.2
	other	1	3.8	3.8	100.0
	Total	26	100.0	100.0	

Occupation

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Empoyees -professionals	7	26.9	28.0	28.0
	Students	13	50.0	52.0	80.0
	Business	2	7.7	8.0	66.0
	Volunteers	3	11.5	12.0	100.0
	Total	25	96.2	100.0	
Missing	System	1	3.8		
Total		26	100.0		

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Marital status

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Single with child-children	20	76.9	76.9	76.9
	Married without child-children	1	3.8	3.8	80.8
	Divorced without child-children	4	15.4	15.4	96.2
	Widowed with child-children	1	3.8	3.8	100.0
	Total	26	100.0	100.0	

Please indicate the number of children you have (if any)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00	2	7.7	33.3	33.3
	2.00	2	7.7	33.3	66.7
	3.00	1	3.8	16.7	83.3
	4.00	1	3.8	16.7	100.0
	Total	6	23.1	100.0	
Missing	System	20	76.9		
Total		26	100.0		

Kindly indicate No of children in age brackets Less than 15 years

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00	3	11.5	60.0	60.0
	2.00	1	3.8	20.0	80.0
	3.00	1	3.8	20.0	100.0
	Total	5	19.2	100.0	
Missing	System	21	80.8		
Total		26	100.0		

Kindly indicate No of children in age brackets 15 - 25 years

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00	1	3.8	50.0	50.0
	3.00	1	3.8	50.0	100.0
	Total	2	7.7	100.0	
Missing	System	24	92.3		
Total		26	100.0		

Kindly indicate No of children in age brackets 25 - 34 years

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00	1	3.8	100.0	100.0
Missing	System	25	96.2		
Total		26	100.0		

No of children Single

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00	2	7.7	33.3	33.3
	2.00	2	7.7	33.3	66.7
	3.00	1	3.8	16.7	83.3
	4.00	1	3.8	16.7	100.0
	Total	6	23.1	100.0	
Missing	System	20	76.9		
Total		26	100.0		

Please indicate your own age bracket

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	15 - 25	17	65.4	65.4	65.4
	25 - 35	4	15.4	15.4	80.8
	35 - 45	3	11.5	11.5	92.3
	45 - 55	2	7.7	7.7	100.0
	Total	26	100.0	100.0	

Please indicate your education level

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	High school graduate	7	26.9	26.9	26.9
	College-University graduate	19	73.1	73.1	100.0
	Total	26	100.0	100.0	

How would you describe your residence?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Rented	10	38.5	38.5	38.5
	Owned rented	9	34.6	34.6	73.1
	Live with friends-relatives	6	23.1	23.1	96.2
	Other	1	3.8	3.8	100.0
	Total	26	100.0	100.0	

Which of the following categories includes your total gross family income per month

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid				
Less than sh 20,000	4	15.4	22.2	22.2
21,000 - 40,000	4	15.4	22.2	44.4
41,000 - 60,000	4	15.4	22.2	66.7
81,000 - 100,000	2	7.7	11.1	77.8
101,000 - 120,000	2	7.7	11.1	88.9
121,000 - 140,000	1	3.8	5.6	94.4
Over sh. 200,000	1	3.8	5.6	100.0
Total	18	69.2	100.0	
Missing				
System	8	30.8		
Total	26	100.0		

Do you attend religious functions-activities

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid				
Yes	20	76.9	80.0	80.0
No	5	19.2	20.0	100.0
Total	25	96.2	100.0	
Missing				
System	1	3.8		
Total	26	100.0		

If answer is yes, indicate number of times you attend religious functions per week

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid				
Once	8	30.8	40.0	40.0
Twice	4	15.4	20.0	60.0
More than two times	7	26.9	35.0	95.0
4.00	1	3.8	5.0	100.0
Total	20	76.9	100.0	
Missing				
System	6	23.1		
Total	26	100.0		

How do you spend your free time

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid				
On sporting activities	5	19.2	19.2	19.2
Socializing with friends-family	18	69.2	69.2	88.5
At private members club	1	3.8	3.8	92.3
4.00	2	7.7	7.7	100.0
Total	26	100.0	100.0	

Do you offer any volunteer services

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	22	84.6	84.6	84.6
No	4	15.4	15.4	100.0
Total	26	100.0	100.0	

Indicate your opinion about The suffering of others should be everyone's concern

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Strongly agree	20	76.9	76.9	76.9
Agree	4	15.4	15.4	92.3
Disagree	2	7.7	7.7	100.0
Total	26	100.0	100.0	

Indicate your opinion about the helping others should not necessarily be accompanied by economic motive

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Strongly agree	16	61.5	61.5	61.5
Agree	8	30.8	30.8	92.3
Disagree	1	3.8	3.8	96.2
Strongly disagree	1	3.8	3.8	100.0
Total	26	100.0	100.0	

Indicate your opinion about People should volunteer as a service to God

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Strongly agree	13	50.0	52.0	52.0
Agree	9	34.6	36.0	88.0
Disagree	3	11.5	12.0	100.0
Total	25	96.2	100.0	
Missing System	1	3.8		
Total	26	100.0		

Indicate your opinion about Volunteerism enhances social standing

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Strongly agree	9	34.6	34.6	34.6
Agree	11	42.3	42.3	76.9
Disagree	5	19.2	19.2	96.2
Strongly disagree	1	3.8	3.8	100.0
Total	26	100.0	100.0	

Indicate your opinion about Volunteerism alleviates suffering

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	11	42.3	44.0	44.0
	Agree	9	34.6	36.0	80.0
	Disagree	3	11.5	12.0	92.0
	Strongly disagree	2	7.7	8.0	100.0
	Total	25	96.2	100.0	
Missing	System	1	3.8		
Total		26	100.0		

Indicate your opinion about Volunteerism is service to mankind

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	16	61.5	61.5	61.5
	Agree	9	34.6	34.6	96.2
	Disagree	1	3.8	3.8	100.0
	Total	26	100.0	100.0	

Indicate your opinion about Volunteering to charity is a good way to spend free time

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	16	61.5	61.5	61.5
	Agree	7	26.9	26.9	88.5
	Disagree	2	7.7	7.7	96.2
	Strongly disagree	1	3.8	3.8	100.0
	Total	26	100.0	100.0	

Indicate your opinion about Volunteering is not important

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Disagree	5	19.2	19.2	19.2
	Strongly disagree	21	80.8	80.8	100.0
	Total	26	100.0	100.0	

Indicate your opinion about Lack of time is the reason for failure to volunteer

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Agree	6	23.1	23.1	23.1
	Disagree	9	34.6	34.6	57.7
	Strongly disagree	11	42.3	42.3	100.0
	Total	26	100.0	100.0	

Indicate your opinion about Lack of medical skills is the reason for failure to volunteer for hospices

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Strongly agree	1	3.8	3.8	3.8
Disagree	13	50.0	50.0	53.8
Strongly disagree	12	46.2	46.2	100.0
Total	26	100.0	100.0	

Indicate the degree to which you agree or disagree with Hospices require highly trained medical staff

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Strongly agree	5	19.2	20.0	20.0
Agree	9	34.6	36.0	56.0
Disagree	11	42.3	44.0	100.0
Total	25	96.2	100.0	
Missing System	1	3.8		
Total	26	100.0		

Indicate the degree to which you agree or disagree with The terminally ill should be left to die for they would die anyway

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Strongly agree	1	3.8	4.0	4.0
Strongly disagree	24	92.3	96.0	100.0
Total	25	96.2	100.0	
Missing System	1	3.8		
Total	26	100.0		

Indicate the degree to which you agree or disagree with The terminally ill require our compassion

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Strongly agree	20	76.9	83.3	83.3
Agree	4	15.4	16.7	100.0
Total	24	92.3	100.0	
Missing System	2	7.7		
Total	26	100.0		

Indicate the degree to which you agree or disagree with Service in hospices exposes one to unnecessary Health

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Strongly agree	1	3.8	4.0	4.0
Agree	1	3.8	4.0	8.0
Disagree	10	38.5	40.0	48.0
Strongly disagree	13	50.0	52.0	100.0
Total	25	96.2	100.0	
Missing System	1	3.8		
Total	26	100.0		

Indicate the degree to which you agree or disagree with I don't understand the role of hospices

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	1	3.8	4.0	4.0
	Disagree	13	50.0	52.0	56.0
	Strongly disagree	11	42.3	44.0	100.0
	Total	25	96.2	100.0	
Missing	System	1	3.8		
Total		26	100.0		

Indicate the degree to which you agree or disagree with Nobody has approached me to offer volunteer services

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	6	23.1	25.0	25.0
	Agree	5	19.2	20.8	45.8
	Disagree	7	26.9	29.2	75.0
	Strongly disagree	6	23.1	25.0	100.0
	Total	24	92.3	100.0	
Missing	System	2	7.7		
Total		26	100.0		

Indicate the degree to which you agree or disagree with Volunteerism is for the rich and well off

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	1	3.8	4.0	4.0
	Disagree	5	19.2	20.0	24.0
	Strongly disagree	19	73.1	76.0	100.0
	Total	25	96.2	100.0	
Missing	System	1	3.8		
Total		26	100.0		

Status

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Non-volunteers	14	100.0	100.0	100.0

Sex:

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	3	21.4	21.4	21.4
	Female	11	78.6	78.6	100.0
	Total	14	100.0	100.0	

Nationality

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Kenya	14	100.0	100.0	100.0

Religion

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	catholic	4	28.6	28.6	28.6
	Protestant	10	71.4	71.4	100.0
	Total	14	100.0	100.0	

Occupation

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Empoyees -professionals	13	92.9	92.9	92.9
	Students	1	7.1	7.1	100.0
	Total	14	100.0	100.0	

Marital status

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Single with child-children	4	28.6	28.6	28.6
	Married without child-children	1	7.1	7.1	35.7
	Divorced without child-children	8	57.1	57.1	92.9
	Widowed without child-children	1	7.1	7.1	100.0
	Total	14	100.0	100.0	

Kindly indicate the number of children you have (if any)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00	2	14.3	20.0	20.0
	2.00	4	28.6	40.0	60.0
	3.00	1	7.1	10.0	70.0
	4.00	1	7.1	10.0	80.0
	5.00	2	14.3	20.0	100.0
	Total	10	71.4	100.0	
Missing	System	4	28.6		
Total		14	100.0		

Kindly indicate No of children in age brackets Less than 15 years

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00	3	21.4	33.3	33.3
	2.00	5	35.7	55.6	88.9
	5.00	1	7.1	11.1	100.0
	Total	9	64.3	100.0	
Missing	System	5	35.7		
Total		14	100.0		

Kindly indicate No of children in age brackets 15 - 25 years

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00	1	7.1	33.3	33.3
	4.00	2	14.3	66.7	100.0
	Total	3	21.4	100.0	
Missing	System	11	78.6		
Total		14	100.0		

Kindly indicate No of children in age brackets 25 - 34 years

		Frequency	Percent
Missing	System	14	100.0

No of children Single

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00	1	7.1	11.1	11.1
	2.00	4	28.6	44.4	55.6
	3.00	1	7.1	11.1	66.7
	4.00	1	7.1	11.1	77.8
	5.00	2	14.3	22.2	100.0
	Total	9	64.3	100.0	
Missing	System	5	35.7		
Total		14	100.0		

Please indicate your own age bracket

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid 15 - 25	2	14.3	14.3	14.3
25 - 35	6	42.9	42.9	57.1
35 - 45	5	35.7	35.7	92.9
45 - 55	1	7.1	7.1	100.0
Total	14	100.0	100.0	

Please indicate your education level

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid High school graduate	3	21.4	21.4	21.4
College-University graduate	11	78.6	78.6	100.0
Total	14	100.0	100.0	

How would you describe your residence?

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Rented	10	71.4	71.4	71.4
Owned rented	3	21.4	21.4	92.9
Live with friends-relatives	1	7.1	7.1	100.0
Total	14	100.0	100.0	

Which of the following categories includes your total gross family income per month

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Less than sh 20,000	5	35.7	35.7	35.7
21,000 - 40,000	7	50.0	50.0	85.7
41,000 - 60,000	2	14.3	14.3	100.0
Total	14	100.0	100.0	

Do you attend religious functions-activities

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Yes	14	100.0	100.0	100.0

If answer is yes, indicate number of times you attend religious functions per week

	Frequency	Percent	Valid Percent	Cumulative Percent
Valid Once	5	35.7	35.7	35.7
Twice	7	50.0	50.0	85.7
More than two times	2	14.3	14.3	100.0
Total	14	100.0	100.0	

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	On sporting activities	1	7.1	7.1	7.1
	Socializing with friends-family	12	85.7	85.7	92.9
	4.00	1	7.1	7.1	100.0
	Total	14	100.0	100.0	

Do you offer any volunteer services

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Yes	3	21.4	21.4	21.4
	No	11	78.6	78.6	100.0
	Total	14	100.0	100.0	

Indicate your opinion about The suffering of others should be everyone's concern

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	9	64.3	69.2	69.2
	Agree	4	28.6	30.8	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate your opinion about the helping others should not necessarily be accompanied by economic motive

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	6	42.9	46.2	46.2
	Agree	6	42.9	46.2	92.3
	Disagree	1	7.1	7.7	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate your opinion about People should volunteer as a service to God

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	9	64.3	69.2	69.2
	Agree	3	21.4	23.1	92.3
	Disagree	1	7.1	7.7	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate your opinion about Volunteerism enhances social standing

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	2	14.3	16.7	16.7
	Agree	8	57.1	66.7	83.3
	Disagree	1	7.1	8.3	91.7
	Strongly disagree	1	7.1	8.3	100.0
	Total	12	85.7	100.0	
Missing	System	2	14.3		
Total		14	100.0		

Indicate your opinion about Volunteerism alleviates suffering

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	5	35.7	38.5	38.5
	Agree	7	50.0	53.8	92.3
	Disagree	1	7.1	7.7	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate your opinion about Volunteerism is service to mankind

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	4	28.6	30.8	30.8
	Agree	9	64.3	69.2	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate your opinion about Volunteering to charity is a good way to spend free time

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	4	28.6	30.8	30.8
	Agree	7	50.0	53.8	84.6
	Disagree	1	7.1	7.7	92.3
	Strongly disagree	1	7.1	7.7	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Agree	1	7.1	7.7	7.7
	Disagree	5	35.7	38.5	46.2
	Strongly disagree	7	50.0	53.8	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate your opinion about Lack of time is the reason for failure to volunteer

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	1	7.1	7.7	7.7
	Agree	5	35.7	38.5	46.2
	Disagree	3	21.4	23.1	69.2
	Strongly disagree	4	28.6	30.8	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate your opinion about Lack of medical skills is the reason for failure to volunteer for hospices

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	1	7.1	7.7	7.7
	Disagree	9	64.3	69.2	76.9
	Strongly disagree	3	21.4	23.1	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate the degree to which you agree or disagree with Hospices require highly trained medical staff

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	2	14.3	15.4	15.4
	Agree	3	21.4	23.1	38.5
	Disagree	8	57.1	61.5	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate the degree to which you agree or disagree with The terminally ill should be left to die for they would die

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly disagree	12	85.7	100.0	100.0
Missing	System	2	14.3		
Total		14	100.0		

Indicate the degree to which you agree or disagree with The terminally ill require our compassion

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	12	85.7	92.3	92.3
	Disagree	1	7.1	7.7	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate the degree to which you agree or disagree with Service in hospices exposes one to unnecessary Health d

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Disagree	8	57.1	61.5	61.5
	Strongly disagree	5	35.7	38.5	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate the degree to which you agree or disagree with I don't understand the role of hospices

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	1	7.1	7.7	7.7
	Agree	2	14.3	15.4	23.1
	Disagree	7	50.0	53.8	76.9
	Strongly disagree	3	21.4	23.1	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate the degree to which you agree or disagree with Nobody has approached me to offer volunteer services

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Strongly agree	1	7.1	7.7	7.7
	Agree	7	50.0	53.8	61.5
	Disagree	3	21.4	23.1	84.6
	Strongly disagree	2	14.3	15.4	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

Indicate the degree to which you agree or disagree with Volunteerism is for the rich and well off

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Disagree	4	28.6	30.8	30.8
	Strongly disagree	9	64.3	69.2	100.0
	Total	13	92.9	100.0	
Missing	System	1	7.1		
Total		14	100.0		

		t-test for Equality of Means			
		t	df	Sig. (2-tailed)	Mean Difference
Indicate your opinion about The suffering of others should be everyone's	Equal variances assumed	-.301	37	.765	-7.6923E-02
	Equal variances not assumed	-.360	36.315	.721	-7.6923E-02
Indicate your opinion about the helping others should not necessarily be	Equal variances assumed	.359	37	.722	.1154
	Equal variances not assumed	.377	27.466	.709	.1154
Indicate your opinion about People should volunteer as a service to God	Equal variances assumed	-.798	36	.430	-.2585
	Equal variances not assumed	-.827	28.953	.415	-.2585
Indicate your opinion about Volunteerism enhances social standing	Equal variances assumed	.230	36	.819	9.615E-02
	Equal variances not assumed	.236	22.974	.815	9.615E-02
Indicate your opinion about Volunteerism alleviates suffering	Equal variances assumed	-.677	36	.503	-.2708
	Equal variances not assumed	-.777	34.301	.443	-.2708
Indicate your opinion about Volunteerism is service to mankind	Equal variances assumed	1.059	37	.297	.2308
	Equal variances not assumed	1.201	33.283	.238	.2308
Indicate your opinion about Volunteering to charity is a good way to spend free time	Equal variances assumed	1.107	37	.275	.4231
	Equal variances not assumed	1.077	22.396	.293	.4231
Indicate your opinion about Volunteering is not important	Equal variances assumed	2.092	37	.043	.4231
	Equal variances not assumed	1.667	14.620	.117	.4231
Indicate your opinion about Lack of time is the reason for failure to volunteer	Equal variances assumed	1.490	37	.145	.6538
	Equal variances not assumed	1.377	19.769	.184	.6538
Indicate your opinion about Lack of medical skills is the reason for failure to	Equal variances assumed	1.134	37	.264	.3462
	Equal variances not assumed	1.071	20.840	.296	.3462
Indicate the degree to which you agree or disagree with Hosnices	Equal variances assumed	-.928	36	.360	-.3969
	Equal variances not assumed	-.926	24.306	.364	-.3969
Indicate the degree to which you agree or disagree with The	Equal variances assumed	-.688	35	.496	-.1600
	Equal variances not assumed	-1.000	24.000	.327	-.1600
Indicate the degree to which you agree or disagree with The	Equal variances assumed	.323	35	.749	6.410E-02
	Equal variances not assumed	.263	14.777	.796	6.410E-02
Indicate the degree to which you agree or disagree with Service in	Equal variances assumed	-.220	36	.827	-6.4615E-02
	Equal variances not assumed	-.266	35.999	.791	-6.4615E-02
Indicate the degree to which you agree or disagree with I don't	Equal variances assumed	1.830	36	.075	.6277
	Equal variances not assumed	1.624	17.974	.122	.6277
Indicate the degree to which you agree or disagree with Nobody has	Equal variances assumed	.451	35	.655	.2372
	Equal variances not assumed	.477	28.853	.637	.2372
Indicate the degree to which you agree or disagree with Volunteerism	Equal variances assumed	-.203	36	.841	-5.2308E-02
	Equal variances not assumed	-.240	35.722	.811	-5.2308E-02

		t-test for Equality of Means		
		Std. Error Difference	95% Confidence Interval of the Difference	
			Lower	Upper
Indicate your opinion about the suffering of others should be everyone's	Equal variances assumed	.2554	-.5945	.4406
	Equal variances not assumed	.2137	-.5103	.3564
Indicate your opinion about the helping others should not necessarily be	Equal variances assumed	.3214	-.5357	.7665
	Equal variances not assumed	.3061	-.5121	.7429
Indicate your opinion about People should volunteer as a service to God	Equal variances assumed	.3237	-.9150	.3981
	Equal variances not assumed	.3124	-.8994	.3825
Indicate your opinion about Volunteerism enhances social standing	Equal variances assumed	.4180	-.7515	.9438
	Equal variances not assumed	.4068	-.7454	.9377
Indicate your opinion about Volunteerism alleviates suffering	Equal variances assumed	.4000	-1.0820	.5405
	Equal variances not assumed	.3486	-.9790	.4374
Indicate your opinion about Volunteerism is service to mankind	Equal variances assumed	.2179	-.2108	.6724
	Equal variances not assumed	.1922	-.1600	.6216
Indicate your opinion about Volunteering to charity is a good way to spend free	Equal variances assumed	.3821	-.3511	1.1972
	Equal variances not assumed	.3930	-.3911	1.2373
Indicate your opinion about Volunteering is not important	Equal variances assumed	.2022	1.330E-02	.8329
	Equal variances not assumed	.2538	-.1190	.9652
Indicate your opinion about Lack of time is the reason for failure to volunteer	Equal variances assumed	.4388	-.2352	1.5429
	Equal variances not assumed	.4747	-.3372	1.6449
Indicate your opinion about Lack of medical skills is the reason for failure to	Equal variances assumed	.3053	-.2724	.9647
	Equal variances not assumed	.3232	-.3262	1.0185
Indicate the degree to which you agree or disagree with Hospices	Equal variances assumed	.4279	-1.2647	.4708
	Equal variances not assumed	.4286	-1.2809	.4871
Indicate the degree to which you agree or disagree with The	Equal variances assumed	.2326	-.6323	.3123
	Equal variances not assumed	.1600	-.4902	.1702
Indicate the degree to which you agree or disagree with The	Equal variances assumed	.1986	-.3391	.4673
	Equal variances not assumed	.2435	-.4556	.5838
Indicate the degree to which you agree or disagree with Service In	Equal variances assumed	.2935	-.6598	.5306
	Equal variances not assumed	.2425	-.5564	.4271
Indicate the degree to which you agree or disagree with I don't	Equal variances assumed	.3429	-6.78E-02	1.3232
	Equal variances not assumed	.3865	-.1844	1.4398
Indicate the degree to which you agree or disagree with Nobody has	Equal variances assumed	.5256	-.8298	1.3042
	Equal variances not assumed	.4974	-.7804	1.2548
Indicate the degree to which you agree or disagree with Volunteerism	Equal variances assumed	.2582	-.5760	.4714
	Equal variances not assumed	.2176	-.4937	.3891

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