The Role of Offering Support Online in Promoting Well-being and Action to Support Disadvantaged Others

Cassandra Barnes

Bachelor of Psychology (Honours)

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Author: Cassandra Barnes

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POSITIVE PSYCHOLOGICAL OUTCOMES OF OFFERING SUPPORT ONLINE

Abstract

People are increasingly interacting online. However, research has tended to focus on the detrimental outcomes of online activity (e.g., cyberbullying, ostracism). This thesis considers the positive psychological outcomes that may flow to people who offer support to disadvantaged others online. Specifically, I test the hypothesis that creating and sharing online messages of support (to Rwandan Genocide survivors) will promote well-being and solidarity-based collective action. I predict that these outcomes will be mediated by hope and efficacy, and develop a distinction between personal processes leading to well-being, and collective processes leading to solidarity-based collective action. The research (n=77) compared the effects of a mere information control with watching a message of hope then creating a message of support. The results of the experimental design did not produce the predicted effects. However, tests of the process involving the measured variables showed results consistent with hypotheses. Results provide an intriguing instantiation of how the strategic use of online interactive media to offer support can promote well-being, and bolster commitment to action to support disadvantaged others.

Keywords: Online prosocial behaviour, well-being, solidarity-based collective action, hope, collective hope, personal efficacy, collective efficacy.
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The Role of Offering Support Online in Promoting Well-being and Action to Support Disadvantaged Others

We live in a digital age. In this era of ‘smart’ technology and social media, online activity is at an unprecedented high. Our pervasive and habitual use of online interactive media is reflected in statistics, which demonstrate that internet-supported interactions are increasingly become a primary mode of communication (Birchmeier, Dietz-Uhler & Stasser, 2011). Most research and public discussion focuses on antisocial outcomes of internet-supported interactions. So, for example, researchers have documented the detrimental impacts of cyber-bullying, including ostracism, decreased self-esteem (Wesselmen, E., & Williams, K., 2011), and tragically, suicide (Hinduja & Patchin, 2010). However, online spaces are also being used as environments for engaging in prosocial behaviour. When evaluating the use of online cancer support groups, research has shown that one of the three most common uses of these online spaces was to offer support to others (Meier, Lyons, Frydman, Forlenza & Rimer, 2007). Similarly, Mellor and colleagues (2008) found that members of an online cancer support group were more likely to offer support than to request it. These studies highlight that, despite the antisocial consequences associated with online activity, individuals are using online spaces pro-socially, to offer support to others.

Keeping with these findings, I focus on the potential uses of new social technology as a vehicle to offer support to others, and examine the psychological outcomes of doing so. I anticipate that offering support to disadvantaged others in an online setting will facilitate two positive outcomes within the supporter: promoting personal well-being, and motivating commitment to action to improve the circumstances of disadvantaged groups.

Specifically, I propose that offering support to disadvantaged others will promote well-being and solidarity-based collective action through promoting hope and
efficacy. I make the argument that offering support to disadvantaged others online must be internalised as a meaningful act of support to imbue these positive outcomes. That is, offering support must not be experienced as incidental or trivial. Supporters must be emotionally engaged with the task, and evaluate offering support as worthwhile and enjoyable.

I test these processes in the context of offering support to Rwandan genocide survivors. 2014 commemorates 20 years since the 1994 Rwandan genocide, during which approximately one million Rwandans were killed. Despite the devastating and lasting impact of the atrocity on Rwandans, as individuals and as a nation, many Rwandans express the desire to work in unity towards a positive future, to reduce intergroup conflict, and grow as a community (Moss, 2014). This thesis leverages off the Messages of Hope project (Lala et al., 2014), where genocide survivors recorded positive messages expressing how they have rebuilt their lives, sharing their hopes and aspirations for the future. Sharing these messages of hope on social media, their messages reach both local and global audiences. The current study provides an opportunity to view two messages of hope and respond by creating and sharing an online message of support.

Figure 1 displays the conceptual framework that this thesis seeks to test. It can be seen that I propose the act of offering support online will promote well-being and commitment to solidarity-based collective action through the processes described. Onorato and Turner (2004) make a distinction between processes that occur at the personal level (things that relate ‘me’) versus processes that occur at the group level (things that relate to ‘us’). I adopt this conceptual distinction between personal processes and group processes to explore how these distinct pathways enable personal outcomes and group outcomes. I suggest that offering support will promote well-being
through personal processes, by engendering personal hope and personal efficacy. On the other hand, I propose that offering support will facilitate solidarity-based collective action through group processes, by promoting collective hope and collective efficacy.

Figure 1. Conceptual model of how offering support online will promote well-being and solidarity-based collective action through (personal and collective) hope and (personal and collective) efficacy.

I draw from recent dual pathway models of collective action, which indicate that group based emotion and group efficacy beliefs constitute two distinct yet complementary and additive pathways to collective action (Thomas, McGarty & Mavor, 2009a; van Zomeren, Spears, Leach & Fischer, 2004; van Zomeren, Postmes & Spears, 2008). Research utilising the dual pathway model has demonstrated that people are more likely to engage in collective action when they experience an action-orientated emotion, and believe that taking action can make a difference (Thomas et al., 2009a; van Zomeren et al., 2004).

I employ a dual pathway model to examine whether the same factors (hope and efficacy) predict both well-being and solidarity-based collective action, when
experienced at personal and collective levels of abstraction. The value of using a dual
pathway approach is that it provides a conceptual framework to answer two questions:
how offering support online might promote well-being, and also increase intentions to
continue prosocial behaviour through solidarity-based collective action. When
personal and collective dimensions of hope and efficacy are a product of offering
support online, I expect hope to mobilise thoughts of how personal and Rwandan
situations can improve (Snyder et al., 1991) while efficacy acts as the driving force
behind actions geared towards generating positive outcomes (Bandura, 1977).
However, before I can fully articulate the basis for why hope and efficacy should be
instrumental in promoting well-being and solidarity-based collective action, it is
necessary to describe the conceptualisation of well-being and solidarity-based
collective action in the current research.

Well-Being

The role of offering support in promoting well-being. Well-being is a state
in which an individual is able to use their cognitive and emotional capabilities,
function in society and meet the demands of everyday life, with continuous growth
(Cummins & Lau, 2005). Current theory recognises that well-being is
multidimensional (Seligman & Csikszentmihalyi, 2000), and is comprised of positive
affect and cognitive components (Schmuck & Sheldon, 2001). Well-being is
conceptually divided into hedonic and eudemonic well-being. Hedonic well-being
assesses well-being in terms of life satisfaction and positive affect, while eudemonic
well-being is derived from striving towards meaning or a purpose beyond self-
gratification, and encompasses personal growth (Ryan & Deci, 2000). The current
study conceptualises well-being as the positive appraisal of one’s circumstances and
functioning in society (Cummins & Lau, 2005). Following Schmuck and Sheldon
I argue that that well-being and a sense of meaning and purpose cannot be separated.

One way people can promote positive outcomes to their own well-being is through engaging in efforts to promote the well-being of others (Klar & Kasser, 2009). Prosocial behaviours, undertaken to benefit other individuals, and prosocial emotions experienced on behalf of others, are associated with increases to well-being (Meier & Stutzer, 2008; Mills & Smith, 2008; Piliavin, 2010; Thoits & Hewitt, 2001).

For example, activism has been linked to subjective well-being and life satisfaction. Research by Klar and Kasser (2009) demonstrated that activism, which can be conceptualised an act of support for others through advocating a political cause, is associated with higher levels of well-being. These authors demonstrated that individuals who scored higher than average on activism were more likely to experience higher well-being. Moreover, activists also reported a high ratio of positive to negative affect. Mills and Smith (2008) also found that activists were higher in well-being than non-activists, and linked activist’s increased well-being and life satisfaction to the experience of meaningfulness associated with other-focused behaviour. Supporting this finding, Klar and Kasser (2009) provided evidence that engaging in a brief act of low involvement activism resulted in improved well-being, compared to a self-orientated task. Specifically, low-risk activist behaviours (such as signing a petition) and not high-risk illegal behaviours were associated with higher levels of both hedemonic and eudemonic well-being.

Volunteering is another way in which offering support has been demonstrated to promote well-being. Volunteers provide support to others through committing time and effort to assist individuals to whom they have no familial or friendship obligations (van Willigen, 2000). Individuals who volunteer have been shown to experience
significantly greater well-being than non-volunteers (Mellor et al., 2008; Thoits & Hewitt, 2001). Volunteers report enhanced positive affect, and report feeling positively about themselves (Piliavin, 2010). Volunteering is linked to well-being through associations with greater mental health, happiness, and life satisfaction, and indirectly through reduced likelihood of depression (Meier & Stutzer, 2008; Mellor et al., 2008).

Intriguingly, studies in older adults have suggested that providing support to others may confer greater health benefits to supporters themselves than to recipients of support (Brown, Nesse, Vonokur, & Smith, 2003). Other research shows that loss of opportunities to provide support can reduce life satisfaction (Meier & Stutzer, 2008). These findings provide further support for the idea that offering support to members of a disadvantaged group will promote well-being.

Given these findings I propose that offering support to disadvantaged others will promote well-being, through the same mechanisms that prosocial behaviours are understood to promote well-being (e.g., activism, volunteering). This is theorised to be through intrinsic reward generated in a number of ways (Ryan & Deci, 2000). For instance, believing that the recipients of support will benefit and experiencing providing support as enjoyable should promote well-being, because the act of helping others and actively engaging and contributing to a good cause is intrinsically motivating and rewarding in itself (Helliwell & Putnam, 2004; Meier & Stutzer, 2008).

Despite the theoretical links between offering support and well-being, little research has explore the mechanisms. More pressingly, Wright and Li (2011) reported that prior to their study only one paper had investigated prosocial behaviour online (Wang and Wang, 2008). I am unaware of any research to date that directly explores
the link between online prosocial behaviour and enhanced well-being, or the potential for offering support online to promote well-being.

**Solidarity-based Collective Action**

The role of offering support in promoting commitment to solidarity-based collective action. Collective action describes the combined single actions undertaken by multiple individuals in effort to advance a common goal, beyond personal self-interest (Reicher & Haslam, 2010; Wright, 2009). Collective action is typically defined as strategic action intended to improve the conditions of the whole group, rather than isolated individuals (Thomas & McGarty, 2009; Wright, 2009; van Zomeren et al., 2008). Collective action can achieve goals that individual actors can not alone, and although acts can be seemingly banal (e.g., discussing the target issue with family, friends, or online), the combined actions of multiple individuals are demonstrated to have social impact (Reicher & Haslam, 2010).

In most definitions, collective action refers to actions undertaken to promote positive outcomes for the group that the individual belongs to. However, many individuals take action on behalf of a group that they do not belong to. In the current thesis I refer to this as **solidarity-based collective action**, to refer to collective action undertaken to promote positive outcomes for a group that the individual does not belong to (Bar-Tal, 2001; Reicher & Haslam, 2010). Specifically, I consider solidarity-based collective action to promote positive outcomes for Rwandan genocide survivors, and other disadvantaged groups.

Like collective action, volunteering, and activism, offering support to members of a disadvantaged group is a form of prosocial behaviour. Research suggests that engaging in prosocial behaviour, or merely witnessing others acting pro-socially, can encourage engagement in future prosocial behaviour. For example, Klandermans
(1997) demonstrated that participating in collective action facilitated consciousness raising of issues, leading to future action through the development of new identities as participants in collective action. Indeed, attendance at collective action (e.g., a protest) as a spectator predicted engagement in future activist behaviour, regardless of prior intent to witness or engage in social action. Furthermore, recent research (Thomas, McGarty, & Mavor, 2010, 2009), suggests that collective action on behalf disadvantaged individuals leads to increased leads to future action to reduce inequality. More importantly, Gee and McGarty (2013) found that observers who voiced emotional support for a disadvantaged group (people with mental disorders) were more likely to engage in further supportive acts than those who did not offer support. In line with these findings, I suggest that offering support to disadvantaged others online will promote future solidarity-based collective action.

Creating and sharing a message of support is anticipated to be an emotional, but positive and enjoyable experience. Communicating emotional experience has been argued to play an important role in mobilising individuals to engage in social action, by creating connections between individuals and informing shared positions on issues (Kim & Kashima, 2007; Thomas et al., 2009). Wright (2009) suggests that intentions to engage in collective action might be facilitated by expectations that engaging in action will be a rewarding, positive emotional experience. Therefore, when offering support online is experienced as an enjoyable and worthwhile thing to do, I suggest that supporters will be more likely to engage in future actions intended to improve the lives of disadvantaged others.

**Hope**

**What is hope?** Hope is a positive, future orientated emotion. Hope is generated through the cognitive appraisal of a situation as personally significant, and
when the individual perceives themselves as capable of coping with the situational demands (Averill et al., 1992; Lazarus & Folkman, 1991). Hope is experienced cognitively as the desire for a positive outcome, accompanied by the expectation or belief that what is being desired is obtainable (Magaletta & Oliver, 1999). Moreover, hope consists of a positive affect component, which is attributed to the expectation of positive outcomes (Averill et al., 1992; Snyder et al., 1991). Therefore, through positive affect and belief in a favourable outcome, hope mobilises energy and generates action (Lazarus & Folkman, 1991; Reeve, 1997). Snyder and colleagues (1991) operationalise hope as comprised of the capacity of individuals to formulate plans to pursue their goals and to conceptualise alternate pathways if difficulties arise, along with the excitement and determination necessary to maintain these pathways.

I make the distinction between personal and collective hope. *Personal hope* refers to hope that an individual holds for positive outcomes in their own future (Snyder et al., 1991). At an intergroup level, *collective hope* is hope shared by a group of individuals (Bar-Tal, 2001; Braithwaite, 2004). In the context of this study, collective hope refers to hope that the future of survivors in Rwanda will improve. I argue that experiencing hope for personal or collective goals will result in different psychological outcomes. I am particularly interested in the link between personal hope and well-being, and collective hope and solidarity-based collective action.

**The role of offering support in promoting personal hope, and therefore well-being.** Early lines of hope research highlighted the connection between personal hope and well-being (Menninger, 1959). More recent research demonstrates that increases in well-being are associated with important cognitive features of hope, such as future focus, viewing current circumstances and demands in a positive light (Folkman, 2010; Magaletta & Oliver, 1999), and increasing positive outlook to above homeostatic
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levels (Cummins & Nitisco, 2002). Indeed, hope initiates ideas of how the future can be better (Braithwaite, 2004). This belief that one’s future will hold good things is important to a sense of life satisfaction (Cummins & Nitisco, 2002), which is a significant dimension of well-being (Cummins & Lau, 2005; Snyder et al., 1991). Well-being is clearly, in part, a product of cognition, and thus cognitive appraisals resulting in hope are proposed to promote well-being (Averill et al., 1992).

Research demonstrating that hope is a positive consequence of participation in volunteer opportunities suggests that offering support to others can promote hope (Zimmerman, 1990). I propose that one way offering support for the hopeful efforts of disadvantaged others will engender hope is by promoting reappraisal of personal problems or demands. Reappraisal involves reinterpreting the meaning of a situation, which in turn alters its emotional impact (Halperin & Gross, 2011). I suggest that reappraisal might lead to personal hope specifically, because hope and cognitive reappraisal share similar underlying mechanisms. Both focus on cognitively finding benefit in what might be a negative situation, resulting in the reinterpretation of personal circumstances in a more positive, constructive manner (Greenaway et al., 2014; Thoits, 1995). I suggest that this process will elicit personal hope for the supporters own ability to overcome personal challenges by promoting hope for their own future, engendering belief in their ability to achieve favourable personal outcomes (Lala et al., 2014).

One way personal hope can promote well-being is through the subjective experience of positive emotions, which are recognised as an important component of well-being (Seligman & Csikszentmihalyi, 2000). The positive affect component of hope conceptually overlaps with components of well-being; both consist of feeling optimistic, confident, and glad (Averill et al., 1992). The positive affective component
of hope theoretically provides a counter-balance to intrapersonal and interpersonal events that can negatively impact well-being. So, where hope allows individuals to have simultaneous conflicting expectations of a situation, such believing that negative outcomes may occur while still expecting the best outcome, hope can be expected to promote well-being even when negative emotions are present (Folkman, 2010). However, despite theoretical and anecdotal evidence linking hope to well-being, there is actually little research that has empirically investigated whether increasing hope can increase well-being.

**The role of offering support in promoting collective hope, and therefore commitment to solidarity-based collective action.** One way that offering support is expected to promote collective hope is through encouraging reappraisal of the situation of Rwandan survivors. I propose that offering support for Rwandan survivors will promote hopeful reappraisal, because it involves conceptualising how the future of disadvantaged individuals and groups might be better (Braithwaite, 2004), and demonstrates optimism that the situation for survivors in Rwanda can improve (Lala et al., 2014). Indeed, Halperin and Gross (2011) demonstrated that hope was promoted when Israeli participants used cognitive appraisal to regulate negative emotions (during conflicts between Palestine and Israel). Moreover, hope was associated with support for humanitarian aid to Palestinians, despite the simultaneous experience of negative, action-oriented emotions such as anger.

Research examining the factors that predict commitment to collective action have tended to focus on negatively valanced emotions, such as anger and guilt (Thomas, McGarty, & Mavor, 2009; van Zomeren et al., 2008). Until recently, little research explored the possible role of positive emotions. Since hope is recognised as an action-orientated emotion (Snyder et al., 1991) and is associated with readiness to
take action directed toward achieving a desired outcome (Averill et al., 1992),
collective hope is a promising emotion to study in terms of motivation for action to
reduce disadvantage (Greenaway et al., 2014; Thomas & McGarty, 2014). Indeed,
recent research by Greenaway and colleagues (2014) demonstrated that collective
hope mobilises advantaged group members (Caucasian Americans) to support action
to reduce inequality for disadvantaged groups (Hispanic Americans). Notably, hope
was shown to be a greater motivator than other emotions that have been implicated in
promoting collective action (e.g., anger and fear; van Zomeren et al., 2008).

I propose that experiencing collective hope will foster commitment to engage
in collective efforts to work towards positive outcomes for Rwandan survivors. This
idea is consistent with research suggesting that emotions experienced on behalf of
others, and shared by both advantaged and disadvantaged groups, are the strongest
motivators of collective action (Thomas & McGarty, 2009; Thomas et al., 2009;
that collective emotions create a psychological sense of belonging to a group, which,
along with action orientation, can facilitate commitment to act to achieve shared group
goals. Indeed, when members of advantaged groups experience prosocial emotions,
such as moral outrage and anger pertaining to issues of a disadvantaged group, it has
been shown to increase the likelihood of committing to action to promote positive
outcomes for disadvantaged groups (Thomas et al., 2009a).

**Efficacy**

**What is efficacy?** Akin to hope, efficacy involves appraisal of environmental
demands, and can be conceptualised as the belief that performing specific behaviours
will achieve a desired outcomes. Bandura (1977, 1997) characterised efficacy as the
strongest motivator of behaviour, arguing that individuals who are confident in their
capacity to attain desired objectives are more likely to follow the actions necessary to attain them.

Efficacy beliefs depend on whether an action is undertaken as an individual or as a group, and are situation specific (Bandura, 2000). Self-efficacy refers to individuals beliefs in their capability to attain a specific objective through their own actions (Bandura, 1997). However, achieving outcomes beyond an individual level requires action to be performed in coordination with others. In social psychology literature, the belief that an outcome can be achieved through the efforts of multiple individuals, acting as members of a group, is called collective efficacy (Bandura, 2000). In the context of the current research, I consider efficacy beliefs in terms of beliefs that an individual or group can successfully undertake actions that will promote positive outcomes for disadvantaged others. Specifically, beliefs that supporters can improve the situation for survivors in Rwanda.

The role of offering support in promoting personal efficacy, and therefore well-being. In socio-cognitive theory, Bandura (1977) identified that efficacy beliefs could be developed by improving emotional and physical states. Offering support to Rwandan survivors is intended to be a profound, inspiring experience that will promote positive emotions. Thus, in line with Bandura’s argument, offering support will increase efficacy. Moreover, offering support online is an act intended to contribute to positive outcomes for Rwandan survivors. Therefore, I anticipate that offering support will increase personal efficacy, through engendering supporter’s beliefs that their personal involvement will make a positive difference to the lives of survivors in Rwanda.

Perceptions of competence are recognised as providing the basis for developing and sustaining well-being (Baumeister & Leary, 1995). Thus, the belief in
being able to individually contribute to positive outcomes for disadvantaged others is one way that personal efficacy can promote well-being. Moreover, in this context, personal efficacy beliefs represent commitment to a prosocial cause. Volunteers have been shown to possess higher levels of personal (and collective) efficacy, and well-being (Helmes, 2007). As such, I propose that personal efficacy will promote increases to well-being associated with commitment to purposes outside of the self (Schmuck & Sheldon, 2001; Piliavin, 2010). Indeed, group-enhancing goals (concerned with contributing to a cause greater than the individual), have been demonstrated to be more beneficial to well-being than self-enhancing goals (Schmuck & Sheldon, 2001). In line with these findings, I suggest that offering support to Rwandan survivors will promote the belief that their personal support can make a positive difference to the lives of survivors in Rwanda, which, in turn, will lead to increased well-being.

The role of offering support in promoting collective efficacy, and therefore commitment to solidarity-based collective action. Bandura (1977) argued that efficacy could be developed through social modelling (demonstrating that other individuals similar to themselves can perform the behaviour). Moreover, awareness that others are engaging in action has been demonstrated to promote feelings of collective efficacy (van Zomeren et al., 2004, 2008). Supporters will be aware that others recruited from the same population are taking action by offering support, and that the disadvantaged group themselves are acting to create a positive future. I propose that offering support will engender collective efficacy through beliefs that, knowing that others are also offering their support, combined efforts can achieve the shared goal of a positive future for Rwandan survivors.

Bandura (2000) suggested that one way behaviour could be changed is through increasing efficacy. Efficacy is recognised as a predictor of behavioural
intention, which in turn predicts behaviour (Smith, 2000). I therefore expect that the belief in the capacity of combined efforts of supporters to improve the situation for Rwandan survivors will be an important mobiliser of action towards those outcomes. An established body of research demonstrates the importance of collective efficacy beliefs in motivating individuals to achieve shared goals through participating in collective action (Thomas et al., 2009; van Zomeren et al., 2004, 2008). The belief that individual’s combined actions can advance group goals is a key predictor of intentions to undertake, and participation in, collective action (Klandermans, 1997; Thomas & McGarty, 2009; van Zomeren et al., 2008). I suggest that supporters with strong collective efficacy beliefs are motivated to engage in collective action because they believe that their action will make a difference, and that, together with others, they can achieve positive social change (van Zomeren, Saguy & Schellhaas, 2012).

The Current Research

I aim to explore the potential benefits arising from the strategic use of online media to offer support to geographically distant disadvantaged others. Specifically, I investigate the positive outcomes to well-being that flow to individuals who use technology to offer support to Rwandan genocide survivors, by creating and sharing support messages online. Furthermore, I suggest that benefits may flow to others and broader society, through commitment to improving the situations of disadvantaged groups by engaging in solidarity-based collective action.

Figure 1 presented the conceptual model of the process that this thesis tests. Specifically, the hypothesis that the act of creating and sharing support online will facilitate well-being and solidarity-based collective action, through engendering hope and efficacy beliefs. In line with empirical and theoretical evidence covered in the literature review, I further hypothesised that well-being would be promoted through
positive processes, through feeling personal hope and personal efficacy. On the other hand, I made the prediction that experiencing collective level hope and collective efficacy will promote intent to continue supporting survivors, through solidarity-based collective action.

The current study is the first to utilise the dual pathway model as a conceptual framework to measure how hope and efficacy beliefs mediate the relationship between offering support and well-being, and collective action outcomes. This study aims to expand current areas of research to explore and compare how hope and efficacy (experienced both at a personal and collective level) impact on personal and group level outcomes. Thus, this thesis aims to contribute to knowledge on the pathways by which prosocial actions (such as offering support online), positive emotions, and efficacy beliefs contribute to well-being and commitment to future action.

In order to test my argument, I position participants as active providers of support to a disadvantaged population. Participants watched two messages of hope from Rwandan genocide survivors, describing their own everyday efforts to overcome adversity and their hopeful feelings for their own and their country’s future. They then created a message of support addressing survivors, to be shared on the social media platform Youtube. As such, the messages of support framework is analogous to how individuals use online interactive media. I employed a three cell between-groups design to separate the effects of viewing messages of hope (MoH condition) compared to creating a message of support (MoH+MoS condition), relative to a control baseline who only read information about Rwanda and genocide survivors.

Research has linked personal hope and personal efficacy with well-being (Baumeister & Leary, 1995; Magaletta & Oliver, 1999), and collective hope and collective efficacy with solidarity-based collective action (Greenaway et al., 2014; van
Zomeren et al., 2004). Furthermore, evidence has linked offering support to hope (Lala et al., 2014) and efficacy (Helmes, 2007). Extending from these findings, I propose that actively providing support, by creating an online message of support for Rwandan survivors, will lead to positive outcomes to well-being and solidarity-based collective action. I propose that increases to well-being and solidarity-based collective action will be mediated feelings of personal and collective hope, and through beliefs that participants’ own support along with the support of others can make a positive difference to the lives of Rwandan survivors.

Method

Design

This study utilised a quasi-experimental counter-balanced design. Comparing the effects included collection of baseline measures of key mediating (personal and collective hope, personal and collective efficacy) and dependent variables (well-being and commitment to solidarity-based collective action), and measurement of differences between accessing and creating messages. The design ensured all participants had the opportunity to create support messages.

Participants

Seventy seven participants completed the study (4 were excluded due to large amounts of missing data on key measures). Sixty nine of the participants were aged between 15 and 25, and 12 were aged between 26 and 55. Forty nine females and 24 males participated, eight did not indicate gender. Participants were recruited from three sources: a local high school, the university, and the university’s Equity and Social Inclusion services. University students volunteered in response to a notice placed on a Psychology department website and posters displayed on campus (Appendix A). High school students received a print invitation, and students using
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Equity services received an invitation to participate via email (Appendix B). Other participants were recruited via snowballing. Participants were reimbursed with $10, $15 or partial course credit in exchange for participation.

Procedure

Six iPads, set up by researchers and connected to an external web server, were used to complete surveys, view messages of hope and to record support messages. Participants completed two surveys: Survey 1 assessed the immediate effects of providing support on dependent variables (well-being and solidarity-based collective action), and mediating variables (personal and collective hope, personal and collective efficacy), compared to the effects of reading Rwanda information, or watching messages of hope. Survey 2 was administered after message creation, and captured the experience of creating a support message. Participants created an individual identification code, which allowed researchers to match responses in survey 1 to those provided in survey 2. Surveys were administered electronically via a secure server. Appendix C (surveys 1 and 2) shows that there were further measures than those described here, that are beyond the scope of the current thesis.

Participation occurred in groups of one, two or three, with participants randomly allocated to experimental conditions. Prior to testing, participants read a brief information form detailing the study and participation requirements (Appendix D) and were assured of confidentiality. Participants were then informed that the study was interested in participant’s responses to positive messages of survival, and that their message would be made available online, for Rwandan survivors and the international community.

After providing informed consent (Appendix E), all participants read an information sheet providing information about Rwanda, brief details about the 1994
Rwandan genocide, and an outline of the Messages of Hope project (Lala et al., 2014) (Appendix F). Control participants then completed survey 1 (Appendix G). All conditions then viewed two pre-recorded messages of hope from Rwandan survivors (one male; one female). Each video featured a Rwandan genocide survivor speaking about their positive stories of survival and growth following the 1994 genocide. Survivors expressed their hope and efforts towards generating a positive future, for themselves and for their nation. These survivors emphasised themes such as the importance of accepting the past and overcoming misfortune, the importance of contributing to the development of their country, the need to find strength in solidarity through sharing their experiences, and the importance of seeking support and supporting others. The first video was 2:51 minutes long, and the second video was 3:52 minutes long. (Messages of hope, and support messages, can be viewed at http://www.youtube.com/sppru). After viewing messages, participants randomly assigned to the MoH condition completed survey 1.

Next, all participants were instructed that they would be left alone in a cubicle to record a message of support for Rwandan survivors. Participants were given pen and paper to write notes. Instructions on content were intentionally kept brief (i.e., pertaining to content and length) in order to encourage autonomy and creativity in style and content. Participants took between five and 60 minutes to record support messages. After completing the support message, participants in the MoH+MoS condition then completed survey 1. Finally, all conditions completed survey 2. Participants were verbally debriefed at the conclusion of the study. For detailed research procedure, research protocol has been included (Appendix H).
Materials

**Survey 1.** All items (except the Personal Wellbeing Scale) were presented using a likert-type response scale that ranged from strongly disagree (1) to strongly agree (7).

**Well-being.** Well-being was measured using Cummins and Lau’s (2005) Personal Well-being Index scale. Six items assessed different quality of life domains. The items were prefixed with “I am satisfied with my”: standard of living, health, achieving in life, relationships, safety, community-connectedness, and future security. Participants responded using a likert-type response scale that ranged from very unsatisfied (1) to very satisfied (7). The scale demonstrated good internal reliability ($\alpha = .74$).

**Commitment to solidarity-based collective action.** Participants were asked to indicate their intentions to engage in six actions to reduce Rwandan disadvantage, adapted from Thomas and McGarty (2014). For example, ‘I intend to support survivors in Rwanda by doing some fundraising’, and ‘I intend to read and research more about supporting survivors in Rwanda’. Action intent is recognised as a reliable predictor of future engagement in action (Smith, 2000). This scale had very good reliability ($\alpha = .88$).

**Personal hope.** Personal hope was measured using seven items from the Snyder Hope Scale (Snyder et al., 1991). An example is, ‘I meet the goals that I set for myself’. The scale had good internal reliability ($\alpha = .75$).

**Collective hope.** Four items measured collective hope for the attainability of positive outcomes for Rwandan survivors, for example ‘I am hopeful that the situation for survivors in Rwanda can improve’, and ‘I am hopeful for the future of survivors in Rwanda’. The scale had acceptable internal reliability ($\alpha = .66$).
Personal efficacy. Personal efficacy was measured with three items. An example is ‘my personal support can improve things for survivors in Rwanda’ and ‘my personal support can make a positive difference to the lives of survivors in Rwanda’. This scale had good reliability (α=.77).

Collective efficacy. Collective efficacy was measured with three items adapted from Thomas & McGarty (2009). These included ‘together supporters can improve things for survivors of Rwanda’. This scale had good reliability (α=.70).

Survey 2.

Task engagement. Seven items were used to measure engagement with the message creation task, measuring if participants found the task enjoyable, challenging, worthwhile, beneficial, and whether they would like to participate in similar activities. For example ‘My support message will make a positive difference’ and ‘it was difficult to create my support message.’

Results

Preliminary Analysis

Data Screening. Little’s MCaR was performed and demonstrated that the small amount of missing data was missing at random, \( \chi^2(72, N=77) = 56.54, p = .90 \). No variables were found to have 1% or more missing values. Expectation maximisation was employed to substitute missing values.

The means and standard deviations for each of the variables are displayed in Table 1. They show that, overall, participants showed scores around the mid-to-high point of the seven point scale for solidarity-based collective action, personal hope and personal efficacy. Moderately high collective efficacy scores were observed, while well-being and collective hope scores were at the high end of the scale across all conditions.
A precondition for the framework is that the task engagement is seen as a legitimate and validating instantiation of the message creation task. That is, participants must experience meaningful engagement with creating a support message, and perceive offering support as enjoyable, and not stressful. The results showed that the experience of creating a support message was perceived to be a challenging, enjoyable and worthwhile activity, which would benefit Rwandan survivors. The overall means were significantly higher than the scale mid-point (4.0), $t(76) = 16.91, p < .001$, and ranged from 4.52 (MoH+MoS) to 5.04 (MoH).

Table 1

*Descriptive Statistics for Variables in Each Condition*

<table>
<thead>
<tr>
<th></th>
<th>Control ($n=28$)</th>
<th>MoH ($n=22$)</th>
<th>MoH + MoS ($n=27$)</th>
<th>Overall ($n=77$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Task Engagement</td>
<td>4.73 (0.87)</td>
<td>5.04 (1.06)</td>
<td>4.52 (0.94)</td>
<td>4.76 (0.96)</td>
</tr>
<tr>
<td>Well-being</td>
<td>6.68 (1.04)</td>
<td>6.50 (0.90)</td>
<td>6.33 (0.59)</td>
<td>6.50 (0.94)</td>
</tr>
<tr>
<td>Solidarity-based</td>
<td>4.16 (1.04)</td>
<td>4.25 (1.30)</td>
<td>4.15 (1.09)</td>
<td>4.18 (1.12)</td>
</tr>
<tr>
<td>Collective Action</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal Hope</td>
<td>5.55 (0.80)</td>
<td>5.47 (0.66)</td>
<td>5.51 (0.59)</td>
<td>5.51 (0.69)</td>
</tr>
<tr>
<td>Collective Hope</td>
<td>6.15 (0.67)</td>
<td>6.27 (0.80)</td>
<td>6.15 (0.78)</td>
<td>6.19 (0.74)</td>
</tr>
<tr>
<td>Personal Efficacy</td>
<td>4.45 (0.92)</td>
<td>5.52 (1.22)</td>
<td>4.76 (1.13)</td>
<td>4.86 (1.29)</td>
</tr>
<tr>
<td>Collective Efficacy</td>
<td>5.97 (0.92)</td>
<td>6.32 (0.85)</td>
<td>4.52 (0.94)</td>
<td>6.09 (0.84)</td>
</tr>
</tbody>
</table>
Main Analyses

Testing hypotheses using manipulated independent variables. A core prediction of the current thesis is that creating and sharing a message of support will promote hope and efficacy, which will in turn promote well-being and solidarity-based collective action. This process was tested in a number of ways. First, a series of one-way ANOVAs were conducted to compare the means between MoH, MoH+MoS and mere-information control conditions.

There were significant differences between conditions in personal efficacy ($F(2, 74) = 3.90$, $p = .025$, $\eta^2_p = .101$). Planned contrasts revealed that, contrary to hypotheses, creating a message of support did not significantly increase personal efficacy compared to the control condition $t(63) = .87$, $p = .388$. However, watching messages of hope significantly increased personal efficacy compared to creating the message of support $t(63) = -1.98$, $p = .052$. There was also difference in personal efficacy between individuals who watched messages of hope and the mere-information control $t(63) = 2.75$, $p = .008$. This suggests that watching messages of hope, but not creating a support message, increased personal efficacy.

Contrary to expectations, there were no significant differences on well-being ($F(2, 74) = .93$ $p = .398$), collective action ($F(2, 74) = .06$, $p = .945$), personal hope ($F(2, 74) = .08$, $p = .926$), collective hope ($F(2, 74) = .17$, $p = .843$), collective efficacy ($F(2, 74) = 1.10$, $p = .340$). These results provide little support for the idea that offering support online for disadvantaged others’ promotes well-being, solidarity-based action, collective and personal hope, and collective efficacy.

The means displayed in Table 1 suggest potential ceiling effects on a number of variables. These may be obscuring detection of condition differences, because the means were high to start with. Indeed, the data were highly negatively skewed on
well-being (-.893, SE .27), personal hope (-.1.398, SE .27), collective hope (-.927, SE .281), and collective efficacy (-1.22, SE .283). Following the recommendations of Tabachnick and Fidell (2007), I conducted log transformations to address the negative skew. The transformations were successful. However, one way ANOVAs using log transformed data revealed no significant differences between conditions, all p’s > .10. I conclude that these data are homogenous with regards to experimental condition, and provide little experimental support for my hypotheses.

A major assumption of the conceptual framework is that creating a support message promotes positive effects on dependent and mediating variables because offering support to disadvantaged others is experienced as an enjoyable, validating and worthwhile online activity. Therefore, I used task engagement as a measured variable (rather than a manipulated variable) test of my hypothesis.

Testing hypotheses using the measured independent variable. I conducted multiple regression testing individual differences in task engagement and their effect on the dependent and mediating variables, collapsing the data across all conditions.

Table 3 displays the correlations between the key independent (task engagement), mediating (personal hope, collective hope, personal efficacy and collective efficacy) and dependent (well-being and solidarity-based collective action) variables. It can be seen that there were significant positive correlations between task engagement and well-being (p = .012), and task engagement and solidarity-based collective action (p < .001), indicating that the more an individual reported engaging with the task the more likely they were to report higher well-being and intention to engage in solidarity-based collective action. This provides preliminary support for the idea that enjoying creating the support message, and internalizing the task as worthwhile and effective, is associated with key dependent variable outcome
measures. Furthermore, task engagement correlated significantly with mediating variables personal efficacy ($p = .001$), and collective efficacy ($p = .028$). Well-being had a significant positive relationship with personal hope ($p < .001$), and personal efficacy ($p = .009$), while collective action intention correlated with both personal efficacy ($p < .001$) and collective efficacy ($p < .001$). These relationships provide some correlational support for hypotheses.

Table 3

*Correlation (r Values) Between Variables*

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Task</td>
<td>1</td>
<td>0.285*</td>
<td>0.382**</td>
<td>0.001</td>
<td>-0.095</td>
<td>0.407**</td>
</tr>
<tr>
<td></td>
<td>Engagement</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td>Well-being</td>
<td>1</td>
<td>0.036</td>
<td>0.413**</td>
<td>0.043</td>
<td>0.320**</td>
<td>0.188</td>
</tr>
<tr>
<td>3.</td>
<td>Collective Action Intention</td>
<td>1</td>
<td>0.003</td>
<td>-0.015</td>
<td>0.420**</td>
<td>0.472**</td>
<td></td>
</tr>
<tr>
<td>4.</td>
<td>Personal Hope</td>
<td>1</td>
<td>-0.039</td>
<td>-0.038</td>
<td>0.130</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td>Collective Hope</td>
<td>1</td>
<td>0.122</td>
<td>0.134</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td>Personal Efficacy</td>
<td>1</td>
<td>0.445**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7.</td>
<td>Collective Efficacy</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note: *$p < .05$, **$p < .01$*

One potential criticism of the methods employed in this study is the potential conceptual overlap between personal and collective hope, and personal and collective efficacy. However, Table 3 shows that personal and collective hope are uncorrelated. Thus, they are unique constructs. In the case of efficacy, there were high correlations between personal and collective efficacy ($p < .001$). However, the pattern of
correlations with other variables provides good discriminatory validity. For example, personal efficacy is associated with well-being \((p = .009)\), while collective efficacy is not.

As a full test of the conceptual Figure 1, I conducted mediation using hierarchical regression. Specifically, I conducted two sets of regression exploring 1) well-being as the dependent variable with personal hope and self-efficacy as predictors; 2) solidarity-based action as the dependent variable with collective hope and group efficacy as predictors.

Hierarchical analysis was conducted to determine if the effect of task engagement on well-being was mediated by personal hope and personal efficacy. Figure 2 shows that task engagement produced greater personal hope and personal efficacy and predicted well-being. Figure 3 shows that task engagement produced greater collective hope and collective efficacy and predicted commitment to solidarity-based collective action. Analyses followed the steps outlined by Baron and Kenny (1986); Figure 2 displays the beta weights and significance levels for each of the pathways. In the first step, task engagement significantly predicted well-being. Personal hope and personal efficacy were added in the next step and were found to be significant predictors. However, adding personal hope and efficacy also attenuated the connection between task engagement and well-being (which became non-significant). This pattern of results provides good evidence of mediation, although Figure 2 shows that task engagement did not predict hope. Since bootstrapping is a more reliable test of indirect effects with smaller sample sizes, I utilized the bootstrapping methods of Preacher and Hayes (2008) to test the indirect effect of task engagement on well-being through personal hope and personal efficacy. The indirect effect \((IE)\) was significant for personal efficacy \((IE = .11, SE = .05, 95\% CI = -.02, .24)\) and the 95% confidence
interval did not include zero. However for personal hope it did \((IE = .01, SE = .04, 95\% CI = -.07, .10)\). This provides good evidence that the effect of task enjoyment (independent variable) on well-being (dependent variable) is mediated by increased feelings of personal efficacy. However findings are more mixed in relation to personal hope, as task enjoyment was not associated with personal hope.

Note: \(* p < .05, **p < .01\)

Figure 2. The effect of task engagement on well-being is mediated by personal hope and personal efficacy.

I conducted a similar set of analyses to determine if the effect of task engagement on solidarity-based collective action was mediated by collective hope and collective efficacy. Figure 3 displays beta weights and significance levels. Firstly, task engagement was a significant predictor of solidarity-based collective action. Collective hope and collective efficacy were added at step 2, however only collective efficacy predicted commitment to solidarity-based action. When the two proposed mediators were entered together, the effect of collective hope became non-significant (at \(p = .09\); Figure 1 values to the right of the backslash) while collective efficacy remained significant, and the effect of task engagement was fully mediated. I utilized the
bootstrapping methods of Preacher and Hayes (2008) to test the indirect effect of task engagement on commitment to solidarity-based collective action through collective hope and collective efficacy. Bootstrapping, consistent with mediation, is more reliable in smaller samples (Preacher & Hayes, 2008) and was consistent with both collective hope ($IE = .09, SE = .05, 95\% CI = .01, .21$) and collective efficacy being mediators ($IE = .12, SE = .07, 95\% CI = .00, .30$). The 95% confidence interval did not include zero.

I considered that collective hope and efficacy might be contributing overlapping variability, despite not being correlated. I explored whether collective hope plays a role when considered independently from efficacy. I tested them independently and found better evidence for collective hope when modelled separately. When entered into the model independently, collective hope was found to have a significant indirect effect on solidarity-based collective action (at $p = .24$; Figure 3 values to the right of the backslash). This provides good evidence that the effect of task enjoyment (independent variable) on solidarity-based collective action (dependent variable) is mediated by increased feelings of collective efficacy. However findings were again more mixed in relation to collective hope, as collective hope was not a unique predictor when considered alongside collective efficacy.
POSITIVE PSYCHOLOGICAL OUTCOMES OF OFFERING SUPPORT ONLINE

Figure 3. The effect of task engagement on collective action intention is mediated by collective hope and collective efficacy.

Overall, I found little support for hypotheses in terms of manipulated effects, however ceiling effects may have obscured my ability to detect effects on some variables. Therefore I tested my hypothesis using the measured independent variable, task engagement, as an analogue of having a meaningful supporter experience. Overall the results are consistent with the process anticipated in Figure 1. Individuals who reported creating a support message as a worthwhile and enjoyable experienced increased well-being, through mediating variables personal efficacy and (more tentatively) personal hope. Similarly, the effect of task engagement on increasing commitment to solidarity-based collective action was mediated by collective efficacy and (more tentatively) collective hope; hope was not a unique predictor of action when considered alongside efficacy.

Discussion

The current research sought to consider the positive psychological outcomes of using online spaces to offer support to disadvantaged others. Based on research suggesting that helping others can lead to increased well-being (Klar & Kasser, 2009;
Magaletta & Oliver, 1999), I examined the primary hypothesis that offering support online will promote well-being and commitment to solidarity-based collective action. Furthermore, I examined whether offering support promotes well-being and solidarity-based action through engendering hope and efficacy. Specifically, I made the distinction between personal processes leading to well-being, and collective processes leading to solidarity-based collective action. I also expected that experiencing offering support online as impactful and meaningful would be associated with hope and efficacy, and thus in turn promote these positive psychological outcomes.

Contrary to hypotheses, there were no significant differences between conditions. This suggests that the act of viewing a message of hope and creating a support message did not promote well-being or solidarity-based collective action, above a mere information control. I therefore collapsed my data across conditions and tested my hypothesis using the measured independent variable, task engagement.

I made the conceptual distinction between individual and collective processes as distinct pathways to outcomes of well-being and solidarity-based collective action, and found excellent support for this. I also found good evidence that offering support online, and engaging with the task as a meaningful and worthwhile experience, promotes well-being through personal efficacy and (more tentatively) personal hope. I found good support for the idea that feelings of validation around offering support promoted commitment to solidarity-based collective action, and that the drivers of this were the emergence of collective efficacy and (more tentatively) collective hope.

Together, these forms of creation and engagement lead participants to conceptualise positive futures for themselves and Rwandan survivors (hope), and engendered beliefs that their own actions, and the combined efforts of supporters, could make a positive difference to the lives of Rwandan genocide survivors.
(efficacy). Experiencing hope and efficacy lead to increased life satisfaction, while also mobilising participants to be responsive to the demands of reducing inequality.

**Theoretical Implications**

Separate lines of research have explored factors that lead to well-being (Seligman & Csikszentmihalyi, 2000), and factors leading to collective action (Thomas et al., 2009a; van Zomeren et al., 2008). The current thesis is innovative in that it is the first piece of research to consider well-being and (solidarity-based) collective action within one conceptual framework, testing theoretically relevant mediators. Traditionally, researchers consider well-being and collective action separately.

In keeping with findings by Thomas and colleagues (2009a) and van Zomeren et al. (2004, 2008), results provided empirical support for the dual pathway model to collective action, which identifies collective emotion and collective efficacy processes as precursors to action intended to generate social change. Adapting the collective action dual pathway model, I created a unique conceptual model which extended consideration to outcomes of well-being. Specifically, the current findings demonstrated that the same factors (hope and efficacy) predict both outcomes, when experienced at personal and collective levels of abstraction (Onorato & Turner, 2004). Demonstrating these processes provides a powerful experimental analogue of the personal dynamics that underpin well-being, and the collective dynamics that underpin commitment to solidarity-based collective action.

Although research has focused on the benefits received by recipients of support (Hobfoll et al., 2007), little research has focused on how offering support can promote positive outcomes amongst supporters themselves. The current thesis demonstrated that offering support to disadvantaged others online is associated with increased well-
being. These findings resonate with literature linking prosocial behaviour to well-being, while providing insights to the mechanisms of this relationship. Although research on prosocial behaviour has consistently revealed positive effects on well-being (e.g., Klar & Kasser, 2009; van Willigen, 2000), the processes underpinning this relationship have been unclear (Mellor et al., 2008). By demonstrating that the more supporters experienced offering support as meaningful the more their well-being increased, the current results are consistent with the theory that prosocial behaviour promotes well-being because acting pro-socially is experienced as intrinsically rewarding and meaningful (Helliwell & Putnam, 2004; Meier & Stutzer, 2008; Ryan & Deci, 2000).

By demonstrating that acting to promote positive outcomes to others in turn promotes positive personal outcomes, results of this study add support to a growing body of literature identifying the importance of social factors to well-being (Helliwell & Putnam, 2004). Moreover, empirically validating personal hope and personal efficacy as mediators of the relationship between offering support and increased well-being contributes to the understanding of the context and precursors of when other-focused behaviours will result in benefits to well-being.

In terms of personal hope, this study validates theoretical assumptions linking hope to well-being (Folkman, 2010), by providing strong correlational support that confidence in the ability to achieve positive outcomes in one’s own future enhances life satisfaction. As such, this thesis makes a contribution to positive psychology, which is interested in developing interventions that facilitate positive emotions and increase well-being in non-clinical populations (Seligman & Csikszentmihalyi, 2000).

The current research also contributes insight into another socially significant problem: understanding what motivates people from advantaged groups to engage in
action to reduce inequality for disadvantaged groups. The findings show that, under the right conditions, a brief act of prosocial behaviour in an experimental setting (offering support online) can evoke support for broad forms of solidarity-based collective action. Importantly, this design contributes that support for disadvantaged others can be mobilised through online activity.

Unexpectedly, the only mean level difference was found for personal efficacy, which was significantly higher in participants who completed measures after watching the messages of hope. This was contrary to the hypothesis that personal efficacy would be promoted by creating a support message. A possible explanation is that personal efficacy was not increased by offering support due to performance aspects of providing support online (e.g., performance anxiety; please see ‘limitations and future research). However, as no other significant effects were found, one possibility is that this significant effect was a product of chance variation. That is, this finding might reflect a type 1 error (rejecting a true null hypothesis), since there was no Bonferroni correction used to control for family-wise error (Tabachnick & Fidell, 2007).

This study demonstrated collective hope findings inconsistent with hypothesised patterns, and counter to existing literature. Experiencing offering support as meaningful was not correlated with feelings of collective hope, or personal hope. Interestingly, the results are inconsistent with emerging collective action literature (Greenaway et al., 2014; Thomas & McGarty, 2014). For example, recent findings by Greenaway and colleagues (2014) demonstrated that collective hope acted as a greater motivator for collective action (i.e., support for social change) than other emotions. However, in the current thesis, collective hope was not a unique predictor of solidarity-based collective action when considered alongside collective efficacy. This suggests that hope is not as strong a predictor as other emotions previously implicated
in desire to help others, such as guilt or moral outrage (Thomas et al., 2009a; van Zomeren et al., 2008). One potential reason for inconsistent findings is that collective hope was conceptualised and measured differently. Greenaway and colleagues (2014) conceptualised collective hope in terms of hope for improved relations between advantaged and disadvantaged groups. Conversely, I measured hope that the situation for Rwandan survivors can improve.

Interestingly, the weaker role of collective hope in motivating action provides support for Bandura’s (1997) hypothesis that efficacy beliefs are more predictive of outcomes than outcome expectations (such as hope). That is, people can believe that positive outcomes are attainable (feeling hopeful for the future of Rwandan survivors), but might not act if they do not believe that they can execute the necessary actions to achieve those outcomes. This pattern is also consistent with theorising that efficacy is the proximal driver of action intent (Bandura, 1997), and mediates a more distal impact of collective positive emotion.

Alternatively, unexpected results for personal and collective hope might be attributed to the experience of negative emotions. After viewing messages of hope and creating a message of support, participants may have experienced a sense of existential guilt, arising from the appraisal of their own unearned privilege relative to Rwandan survivors’ disadvantage (Thomas & McGarty, 2014). Indeed, many participants verbally reported feelings of existential guilt, such as guilt for being concerned over their comparatively ‘insignificant’ personal issues. The experience of negative emotions may have undermined anticipated effects on hope. Hope is based on appraisal and cognition, and therefore can be impeded by guilt (Bar-Tal, 2001).

Negative affect might also arise from the performative aspects of creating a support message using online media. Addressing unknown others online is a
significant challenge, and requires courage and creativity. Creating a support message requires supporters to conceptualise the expectations of Rwandan survivors and global audience, while deliberating how to represent themselves as contributors of valuable support to a community who have overcome trauma. Supporters are required to make numerous choices about language, content, and presentation at the point of utterance. Moreover, many participants reported feeling self-conscious while recording their support message on the iPads (participants could see their own faces), which may have distracted from the other-focused task. While creating and sharing a support message is intended to be a positive challenge, potential exists for supporters to experience creating a message as stressful.

These issues exemplify the complexity of the performance aspects of offering support online. Future research might include further measures (such as performance anxiety) to disentangle the negative and positive challenging aspects of providing support online. This will enable identification of the aspects of offering support that promote validation and satisfaction, and those that result in negative affect. Doing so will assist creation of support opportunities that promote engagement, hope, and efficacy, while reducing negative affect and distraction, in order to facilitate positive outcomes.

**Practical Implications**

The current findings support existing research identifying online spaces as environments for prosocial behaviour (Mellor et al., 2008; Wright and Li, 2011). Moreover, findings are consistent with the idea that online spaces can be used as behavioural settings to promote positive personal outcomes (well-being), as well as promoting positive outcomes to disadvantaged others (through commitment to solidarity-based collective action). Therefore, findings have implications in terms of
two domains of practice: using online spaces to promote well-being, and, using online spaces to promote commitment to solidarity-based collective action.

An overriding implication is that, in order to boost well-being and promote solidarity-based collective action, it is not enough to merely offer support online. Having identified the critical mediating processes through which offering support online promotes well-being and commitment to solidarity-based collective action, the current findings suggest that the context for offering support needs to be structured. Offering support needs to facilitate the specific individual and personal processes demonstrated, in order to lead to these specific positive personal and collective psychological outcomes. Thus, if online spaces are created (or adapted) to promote well-being, and/or action to reduce inequality for disadvantaged groups, the opportunity to offer support must be strategically designed to foster personal and collective hope and efficacy.

Importantly, online platforms dedicated to improving wellbeing and promoting collective action through creating and sharing support content need to be designed to foster task engagement. In practical terms, this means that supporters must believe that the act of offering support was worthwhile, and will make a positive difference. Creating a support message should be an enjoyable challenge. To reduce negative affect, clear directions and task specificity should be provided, and the process of creating and sharing messages should be uninterrupted by technical issues. Otherwise, offering support may not result in positive psychological outcomes.

In order to support specific outcomes to well-being, the context for offering support must facilitate the conceptualisation of a positive future for supporters themselves, and the belief that their support will make a positive difference. Likewise, in order to promote commitment to action to reduce disadvantage, online opportunities
to offer support need to promote the appraisal that the situation for disadvantaged others can change for the better, and promote the belief that the joint efforts of supporters can improve the situation for the disadvantaged group. One suggestion would be to publicly share positive outcomes and situational improvements through the online platform. Building from the one-way interaction demonstrated in this thesis, future directions could involve a more interactive experience. This could include dialogic exchange between advantaged and disadvantaged groups through ongoing creation and sharing of hope and support messages, which could encourage hope and efficacy, and bolster connections between advantaged and disadvantaged communities.

Although well-being and solidarity-based collective action are considered as separate outcome variables, research suggests that increasing well-being and solidarity-based collective action might have a recursive relationship. Individuals with higher well-being are more likely to engage in prosocial behaviour, because lower (self-focused) needs have been satisfied (Thoits & Hewitt, 2001). Additionally, engaging in action to support disadvantaged others should have beneficial effects on well-being associated with prosocial behaviour (Mellor et al., 2008). Theoretically, the current findings indicate the potential for offering support to disadvantaged others online to have perpetuated effects on promoting well-being, and sustained commitment to collective action. In future research, a longitudinal design would allow examination of whether offering support online promotes this continued pattern of positive psychological outcomes.

Moreover, research has highlighted an association between online prosocial behaviour and offline prosocial behaviour (Wright & Li, 2011). Thus, offering support online might also generalise to promote other forms of prosocial behaviour, offline as
well as online. Due to high levels of online activity, it might be easier to engage people to use online spaces to offer support, with the intention of promoting offline prosocial behaviour and positive personal benefits. This is a promising implication for institutions interested in promoting commitment to collective action and prosocial behaviour (e.g., social movement organisations, schools) and bolstering well-being (e.g., support services). Future research might determine the best way to attract and engage supporters (e.g., compulsory participation, financial reimbursement, self-selection) and how method of engagement effects positive outcomes.

It is important to consider that the positive psychological outcomes of messages of support may extend further than message creators. According to Klandermans’ (1997) observation that witnessing collective action predicts engagement in action, people who view messages of support on social media will be more likely to participate in action to promote positive outcomes for disadvantaged groups. Therefore, creating and circulating support messages in public domains has implications for Rwandan survivors. Viewing support messages may further mobilise support and solidarity amongst global audiences connected by social media, thereby exerting positive effects on a wide audience. Future research might examine the potential positive outcomes of watching support messages.

**Limitations and Future Research**

One potential criticism is the use of action intentions instead of actual behaviour to measure commitment to solidarity-based collective action. However, as action to reduce disadvantage is difficult to observe and measure in a laboratory setting, the majority of collective action research uses action intentions as a proxy for actual behaviour (van Zomeren et al., 2004). Past research shows that action intentions act as a reliable approximation of actual action, as intentions are shown to be reliable
predictors of behaviour (Smith, 2000). The current paradigm did not offer participants the opportunity to take actual solidarity-based collective action after creating a support message. Ideally, future research could include suitable alternatives, to act as a measure of actual behaviour.

Methodological issues mean that the baseline control could have been confounded by sampling and self-selection effects. For example, individuals already engaging in prosocial behaviours (e.g., activism; volunteering), might be more likely to participate, and due to intrinsic motivation, may have been more likely to receive greater benefits to well-being. This speculation is supported by previous findings that intrinsically-oriented volunteers receive greater benefits to well-being than volunteers motivated by financial or personal gain (Meier & Stutzer, 2008).

Moreover, many participants verbally reported that they had researched the Rwandan genocide and discussed the issue with others before participation. It seems that merely signing up to participate raised awareness and mobilised forms of solidarity-based collective action. Despite being a positive instantiation of the framework mobilising forms of collective action, this may have obscured detection of condition differences due to offering support. Furthermore, although control participants completed measures before creating a support message, merely enrolling in the study evidences participants’ intentions to offer support. These prosocial intentions may have promoted well-being prior to creating a support message (Ryan & Deci, 2000). Ideally, the baseline control would involve individuals who were not offering support.

A potential avenue for future research would be to test the current framework in a less confronting context, by offering support for individuals from an alternative disadvantaged group (e.g, domains of mental health or homelessness). Although
supporting Rwandan survivors provides an opportunity to perform a meaningful act of support, the context of trauma and violence may be too overtly confronting, thus arousing negative affect. Importantly, testing the framework in other areas of disadvantage would assess whether positive outcomes are generalisable to offering support to other domains of vulnerability and disadvantage.

Future research might also consider whether offering support to disadvantaged others online promotes greater benefits within different populations of supporters. For example, research could determine whether offering support online promotes greater benefits amongst youth, compared to older adults. Older adults find meaning in person-to-person support (Brown et al., 2003). In line with research demonstrating that different populations find meaning in different contexts of prosocial behaviour (van Willigen, 2000), youth may find offering support online more meaningful. Studies demonstrate a generational decline in concern for reducing other’s disadvantage (Twenge, Freeman & Campbell, 2012), along with high levels of youth online activity. Considering that creating and sharing content is analogous to how young people interact online, findings suggest that online spaces might be an engaging and meaningful way for youth to offer support. Therefore, by providing a meaningful way for youth to offer support, online spaces can promote benefits to well-being while increasing commitment to improve situations for disadvantaged others.

Furthermore, future research could investigate whether hypotheses would better supported in a vulnerable or clinical population. The current study found no significant increases in well-being due to condition. Recruiting participants who have low baseline well-being would distinguish whether offering support to disadvantaged others online significantly increases well-being, by avoiding ceiling effects. This would facilitate discrimination between the effects of watching messages of hope
compared to creating support messages on well-being. Furthermore, incorporating vulnerable populations, who are traditionally recipients of support and might experience reduced opportunities to offer support to others, would improve well-being in people who would benefit from it the most (Folkman, 2010).

**Concluding comments**

Online spaces can indeed function as behavioural settings to facilitate prosocial behaviour, where people can offer support and create collective visions of positive futures for disadvantaged communities. The benefits of doing so are personal, collective, and potentially global. As people encounter online media created by others that shares positive messages about vulnerable groups, in interactive online contexts, it can foster imaginative capacities for positive outcomes, and bolster commitment to positive social change action to bring about a better future.

…I have had my own emotional trauma… to be perfectly honest this last week hasn’t been that great… but these people have been through this huge traumatic event and they’re not going to let that get them down. So, you know what? I’m not going to let my stuff get me down either. I’m going to have hope for the future. I’m going to have hope for the future for myself, I’m going to have hope for the future for you guys. So, thanks. I wish you the best of luck. I can’t wait to help and support the project, and help you guys make your lives better.

-MESSAGE OF SUPPORT, SUSAN
Reference


Magaletta, P. & Oliver, J. (1999). The hope construct, will, and ways: Their relations with self-efficacy, optimism, and general well-being. *Journal of*
Clinical Psychology, 55, 539-551. doi 10.1002/(SICI)1097-4679(199905)55:5<539::AID-JCLP2>3.0.CO;2-G.


Appendix A – Recruitment Poster

School of Psychology and Exercise Science

Messages of Support Research Project

This year the world commemorates the 20th anniversary of the 1994 Rwandan genocide. Would you like your voice to be heard?

We are looking for students aged 18-25 who would like to create a message of support for survivors of the Rwandan genocide!

Are you interested? Then we want you to take part in this project exploring how people respond to positive stories of survival from Rwandans who lived through the genocide.

If you choose to participate you will watch two short ‘messages of hope’ from genocide survivors, complete two brief on-line surveys, and record your own video message in support of Rwandan survivors, using an iPad. Your support message will be displayed on YouTube and a dedicated support website.

Your own recording will be very brief – between 30 seconds and one minute long. You’ll have time to practice, and record multiple versions so you can pick the one you like best to go online. You can also choose to remain anonymous.

In return for about 1 hour of your time, we will reimburse you $15 or 1.5 subject pool hours for Psychology students.

If you are interested in taking part, or want more information:

Email Cassie.murdochscot@gmail.com or phone 0425223110

This study has been approved by the Murdoch University Human Research Ethics Committee (Approval 2015/01).
Appendix B – Invitation to Participate

Messages of Support Research Project

You are invited to participate in this important research!

Research has shown that feelings of hope play an important role in our well-being, and our capacity to overcome adversity. The Messages of Support project explores how new information technologies can be used to provide a creative outlet to allow people to support others who have survived a traumatic life experience. We are also interested in your experience of feeling hope for the future of people who have overcome traumatic life experiences. In particular, we are interested in learning about your feelings of hope for the future of people who have survived the 1994 Rwandan genocide, and if you have feelings of solidarity (unity and connectedness) with these individuals who have also overcome adversity. You can help our project by consenting to take part!

Participants will watch two short ‘messages of hope’ from survivors of the 1994 genocide in Rwanda. These messages share the hopefulness the survivors feel for their future, and outline the positive steps that they have taken to rebuild their lives after surviving trauma. You yourself will then record a brief (e.g., one minute long) video message supporting Rwandan survivors. Your support messages will be uploaded to a curated YouTube channel and a project website, for others including survivors from Rwanda and members of the public, to view.

After creating your message of support you will be asked to complete a brief survey. This survey has two parts. The first part will ask you questions about your own feelings of connectedness and well-being. In the second part you will read a brief blurb about the 1994 Rwandan genocide and answer some questions about your feelings of hope for these survivors and their futures. Viewing and recording of the messages and completion of the survey will take place on iPads at Murdoch University.

Completing this study will take you about 1 hour, plus a short follow up survey that will be sent to you via email.

It is important that you understand that your involvement in this study is completely voluntary and we respect your right to decline. You can decide at any time to withdraw your consent to participate in this research. However, since the questionnaire is anonymous it will not be possible to withdraw your responses once you have submitted your questionnaire.

Once we have analysed the information from this study, we will post a summary of our findings on our website: http://www.psychology.murdoch.edu.au/researchresults/research_results.html. You can expect to receive this feedback in January 2013.

Happy to Go Ahead?
If you are happy to go ahead and participate, please contact us to arrange a time. Please let us know if there is anything we can do to accommodate your participation.
Contact: Emma.Thomas@murdoch.edu.au | Phone: 08 9360 7105

Thank you in advance for your help with this important research project.

Regards,
Emma Thomas | Cassandra Barnes
Senior Lecturer | Honours student
School of Psychology | School of Psychology
& Exercise Science | & Exercise Science

This study has been approved by the Murdoch University Human Research Ethics Committee (Approval 2013/21). If you have any reservation or complaint about the ethical conduct of this research, and wish to talk with an independent person, you may contact Murdoch University’s Research Ethics Office (Tel. 08 9360 6177 or e-mail ethics@murdoch.edu.au).
Any issues you raise will be treated in confidence and investigated fully, and you will be informed of the outcome.
Survey 1.

Before you start this survey, we would like you to enter a user code to help us compare answers between surveys.

Your user code is:

- the first two letters of your mother's first name
- followed by the first two numbers of your birth date
- followed by the first two letters of the town you were born in

For example, if your mother’s first name was Susan and you were born on 5 November in Perth, you would enter su05pe.

1. Please enter your user code below:

2. The statements below reflect how satisfied you are with certain aspects of your life. How satisfied are you with:

   - Your standard of living?
   - Your health?
   - What you are achieving in life?
   - Your personal relationships?
   - How safe you feel?
   - Feeling part of your community?
3. Below are statements about how you feel about yourself, and your feelings of hope for the future. Please rate how much you agree or disagree with each statement.

- Your future security?

<table>
<thead>
<tr>
<th>Strongly Disagree</th>
<th>Disagree</th>
<th>Somewhat Disagree</th>
<th>Neither Agree nor Disagree</th>
<th>Somewhat Agree</th>
<th>Agree</th>
<th>Strongly Agree</th>
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</tbody>
</table>

- If I should find myself in a jam, I can think of many ways to get out of it
- At this time I energetically pursue my goals
- There are lots of ways around any problem that I facing right now
- I can think of many ways to get the things in life that are most important to me
- Even when others get discouraged, I know I can find a way to solve the problem
- My past experiences have prepared me well for my future

4. The following questions ask about your feelings of hope for survivors of the Rwandan genocide.

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Somewhat disagree</th>
<th>Neither disagree nor agree</th>
<th>Somewhat agree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Don’t know</th>
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<td>7</td>
<td>8</td>
</tr>
</tbody>
</table>
I am hopeful that the situation for survivors in Rwanda can improve
I am optimistic that the situation for survivors in Rwanda can change for the better
I am hopeful for the future of survivors in Rwanda
I feel positive about the future of survivors in Rwanda

5. Please rate how strongly you agree or disagree with each statement.

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Somewhat disagree</th>
<th>Neither disagree nor agree</th>
<th>Somewhat agree</th>
<th>Agree</th>
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</table>

I intend to discuss supporting survivors in Rwanda with my friends and family
I intend to support survivors in Rwanda by doing some fundraising
I intend to support survivors in Rwanda by organizing an event at my school
I intend to support survivors in Rwanda by writing a letter to the government
I intend to read and research more about supporting survivors in Rwanda
I intend to post information to Facebook or another social network about supporting survivors in Rwanda
POSITIVE PSYCHOLOGICAL OUTCOMES OF OFFERING SUPPORT ONLINE

6. Please rate how much you agree/disagree with each statement by selecting the appropriate option.

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Somewhat disagree</th>
<th>Neither disagree nor agree</th>
<th>Somewhat agree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Don’t know</th>
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</table>

- Together supporters can improve things for survivors of Rwanda
- Together supporters can make a positive difference to the lives of survivors in Rwanda
- Supporting survivors in Rwanda is a waste of everyone’s time, effort and money

7. The following questions ask how much you feel that your own support can make a difference.

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Somewhat disagree</th>
<th>Neither disagree nor agree</th>
<th>Somewhat agree</th>
<th>Agree</th>
<th>Strongly agree</th>
<th>Don’t know</th>
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</table>

- My personal support can make a positive difference to the lives of survivors in Rwanda
- Supporting survivors in Rwanda is a waste of my own time, effort and money
- My personal support can improve things for survivors in Rwanda
8. When things aren't going well for you, or when you're having problems, how confident or certain are you that you can do the following:

<table>
<thead>
<tr>
<th>Can not do</th>
<th>Moderately certain can do</th>
<th>Certain can do</th>
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</tbody>
</table>

- Talk positively to yourself
- Make a plan and follow it when confronted with a problem
- Look for something good in a negative situation
- Try other solutions to your problems if your first solutions don't work

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

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Somewhat disagree</th>
<th>Neither disagree nor agree</th>
<th>Somewhat agree</th>
<th>Agree</th>
<th>Strongly agree</th>
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<td>7</td>
</tr>
</tbody>
</table>

- My life has a clear sense of purpose
- I have a good sense of what makes my life meaningful
- At this time, I have energy and spirit
- I have a deep inner strength
The statements below reflect different opinions and points of view. Please rate how strongly you agree or disagree with each statement. There are no right or wrong answers, the best answer is your opinion.

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Somewhat disagree</th>
<th>Neither disagree nor agree</th>
<th>Somewhat agree</th>
<th>Agree</th>
<th>Strongly agree</th>
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<td>5</td>
<td>6</td>
<td>7</td>
</tr>
</tbody>
</table>

- I think that most people around the world get what they are entitled to have
- It is OK if some people in the world have more opportunities than others
- I think that people around the world get the rewards and punishments they deserve
- I think that many people around the world are poor because they do not work hard enough
- The world is generally a fair place
- In the future I would like to do volunteer work to help individuals and communities abroad
- In the future I would like to participate in events or activities in support of a global cause
- In the future I would like to get involved with an international humanitarian organization or project
- In the future I would like to sign a petition in favour of international support for survivors in Rwanda
- In the future I would like to make a donation to a global charity
I feel comfortable about giving my views on global issues in front of a group of people

I am confident that I can get other people to care about global problems that concern me

11. The following questions ask you about your identification with others who support the Rwandan survivors.

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Somewhat disagree</th>
<th>Don’t know</th>
<th>Somewhat agree</th>
<th>Agree</th>
<th>Strongly agree</th>
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</tbody>
</table>

- I feel a bond with other people who want to help create a positive future for Rwandan survivors
- I feel committed to other people who want to help create a positive future for Rwandan survivors
- I am glad to be someone who wants to help create a positive future for Rwandan survivors
- I think that other people who want to help create a positive future for Rwandan survivors have a lot to be proud of
- Being someone who wants to help create a positive future for Rwandan survivors gives me a good feeling
- I have a lot in common with other people who want to help create a positive future for Rwandan survivors
• I am similar to other people who want to help create a positive future for Rwandan survivors

• Other people who want to help create a positive future for Rwandan survivors have a lot in common with each other

• Other people who want to help create a positive future for Rwandan survivors are very similar to each other

12. These next questions ask you about your identification with Rwandan survivors.

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Somewhat disagree</th>
<th>Don’t know</th>
<th>Somewhat agree</th>
<th>Agree</th>
<th>Strongly agree</th>
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</table>

• I feel a sense of closeness to Rwandan survivors

• I feel a bond with Rwandan survivors

13. The following questions ask you about how you feel about the networks that you have around you.

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Somewhat disagree</th>
<th>Neither agree or disagree</th>
<th>Somewhat agree</th>
<th>Agree</th>
<th>Strongly agree</th>
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<td>7</td>
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</tbody>
</table>
I see myself as part of Murdoch University

I am pleased to be a member of Murdoch University

I feel strong ties with other members of Murdoch University

I identify with other people who are members of Murdoch University

14. The following question asks you about your relationships and the level of support you receive.

<table>
<thead>
<tr>
<th>No</th>
<th>Not sure</th>
<th>Yes</th>
</tr>
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</tbody>
</table>

Are there people in your life that you can depend on to help you, if you really need it?

15. How often have you:

- Expressed interest and concern in the well-being of others?
- Received interest and concern from others in your well-being?
16. Each of the options below shows two circles on a line. The circles are different lengths apart in each of the options – for example, the circles in option 1 are further apart than the circles in option 2. The smaller circle on the left is you and the larger circle on the right are other people who want to help create a positive future for Rwandan survivors. The distance between the circles represents closeness between you and other people who want to help – the closer the circles, the closer you are to the other people. Please select the option that best shows how close you are to other people who want to help create a positive future for Rwandan survivors:
17. Gender
   - Female
   - Male
   - Other

18. Age
Survey 2.

1. Please enter your user code below:

[Blank Box]

2. Please indicate how much you felt the following emotions while you were creating your message of support:

<table>
<thead>
<tr>
<th>Extremely</th>
<th>Quite a Bit</th>
<th>Moderately</th>
<th>A Little</th>
<th>Not at All</th>
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<tbody>
<tr>
<td>Irritable</td>
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<tr>
<td>Jittery</td>
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<tr>
<td>Strong</td>
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<tr>
<td>Nervous</td>
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<tr>
<td>Interested</td>
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<tr>
<td>Determined</td>
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<tr>
<td>Upset</td>
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<tr>
<td>Enthusiastic</td>
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<tr>
<td>Active</td>
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<tr>
<td>Afraid</td>
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<tr>
<td>Excited</td>
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<td>Attentive</td>
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<td>Hostile</td>
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<td>Alert</td>
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<td>Guilty</td>
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<tr>
<td>Ashamed</td>
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<tr>
<td>Inspired</td>
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<tr>
<td>Scared</td>
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<tr>
<td>Distressed</td>
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<tr>
<td>Proud</td>
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<td></td>
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</tbody>
</table>
3. How much do you agree or disagree with the following statements?

<table>
<thead>
<tr>
<th>Strongly disagree</th>
<th>Disagree</th>
<th>Somewhat disagree</th>
<th>Neither disagree nor agree</th>
<th>Somewhat agree</th>
<th>Agree</th>
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</tbody>
</table>

- Creating my support message was worthwhile
- My support message will make a positive difference
- I would like to participate in this type of project again
- Creating my support message was challenging
- It was difficult to create my support message
- Creating my support message was satisfying
- I enjoyed creating my support message

4. If you would like to make any other comments about this project please enter them below:
5. What is your age in years?

6. What is your gender?
   - Female
   - Male
   - Other

7. What is your highest educational level?
   - Did not complete Secondary School
   - Vocational Training (part or completed)
   - Undergraduate Diploma (part or completed)
   - Bachelor Degree (part or completed)
   - Higher Degree (e.g., PhD, Masters) (part or completed)
   - Other, please specify

8. What country were you born in?

9. What State or Territory do you reside in?
10. Are you an Aboriginal and/or Torres Strait Islander person?
   - Yes
   - No

11. What is your ancestry? (For example: Anglo-Saxon, European, Italian, Chinese, Hmong, Kurdish, Maori.)

12. What is your current marital status?

13. What is your current employment status?

14. What is the total of all wages/salaries, government benefits, pensions, allowances and other income you usually receive?
15. Are your parents:

- Married
- Living together in a marriage-like relationship
- Separated
- Single/sole parent (never married)
- Widow/Widower (parent passed away)
- Other, please specify

16. If your father is currently employed, what is his job?


17. If your mother is currently employed, what is her job?


Appendix D – Participant Information Sheet

Messages of Support project – Murdoch University
Participant Information Page

Dear Participant,

The purpose of this project is to investigate how people respond to stories of survivors from Rwanda who lived through the 1994 genocide. You can help our project by volunteering to participate.

The study involves two separate sessions. The first session takes about one hour during which you will watch two pre-recorded messages from survivors of the 1994 genocide in Rwanda. You will then record a brief (e.g., approximately one minute long) video message supporting Rwandan survivors. Your message will be uploaded to YouTube and shared with the project website for others, including survivors from Rwanda and members of the public, to view. You will also complete two short surveys containing questions about your general wellbeing and your feelings about your participation. The second session takes place one month after you have recorded your messages and answered the first survey, and involves completing a brief follow-up survey online.

Participation in this research is completely voluntary and we require your written consent before you can take part. Participation in the surveys will be confidential, and personal information and responses will only be made available to the researchers. Your video message is posted to YouTube and the project website will be identified by your first name or a nickname of your choice on those websites.

If you do agree to take part you will be free to withdraw from the project at any stage, and you will be able to request the removal of your video message from the project website at any time (note that when video messages are displayed on the project website they can be downloaded by anyone who views them).

Data from the project will be stored securely and on password-protected computers at Murdoch University and will only be accessible by research officers. The project findings will be reported in academic journals and a summary can be available on request.

If you have any questions about the project, please feel free to contact Dr Emma Thomas on 9300 7209 at Murdoch University. She will be happy to discuss the project with you, or answer any of your questions.

If you would like to participate, please complete the attached Participant Consent Form.

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Dr Emma Thomas
Chief investigator, Messages of support project
School of Psychology
Murdoch University

Cassandra Barnes
Honours student
School of Psychology
Murdoch University

This study has been approved by the Murdoch University Human Research Ethics Committee (Approval 2010/16). If you have any questions or concern about the ethical conduct of this research, and wish to talk with an independent party, you may contact Murdoch University’s Research Ethics Office (Tel: 9300 3707 or email: ethics@murdoch.edu.au). Any issues you have will be treated in confidence and investigated fully, and you will be informed of the outcome.

Crested Pigeon Cred: 181016
AM 41 83 360 311
Appendix E – Participant Consent Form

I understand the information that has been provided to me about the project. Any questions I have asked have been answered to my satisfaction. I agree to take part in this project, and know that I may change my mind and stop at any time, without providing any reason. I am also aware that I may skip any survey questions that I do not feel comfortable answering.

I, __________________________

(Awrite your name)

Agree to participate in the Messages of Support research project.

I give permission for:
- the video message I record to be posted on youtube and the project website
- my first name or alias to appear on youtube and the project website
- my contribution to this research to be published in a journal, provided that my individual survey responses are not identified in any way

I understand that I can request a summary of findings once the research has been completed.

Signed: __________________________

Today’s Date: __________________________

Your Date of Birth: __________________________

School of Psychology and Exercise Science

South Street, Murdoch
Western Australia 6150
Telephone: (08) 9300 2300
Fax: (08) 9300 2305
murdochhp@murdoch.edu.au
Appendix F - Rwanda Information Form

Messages of Support Project:

Rwanda

Rwanda is a land-locked country (i.e., it has no ocean borders) in central Africa with a land area of about 26,350 square kilometres (nearly 100 times smaller than Western Australia). The countryside is mostly savannah grassland, but also has many hills and mountains, and numerous lakes. The climate is relatively mild, with two rainy seasons every year. Rwanda has nearly 12 million people who mainly live in rural areas. Its main industries are farming and mining. Tourism is also growing - Rwanda is one of very few countries where tourists can visit mountain gorillas in their natural habitat.

Rwanda is a Republic and gained independence from Belgium in 1962. Like Australia, it is also part of the Commonwealth, having joined in 1966. Most of the people in Rwanda are Christian (about 97%), and it has three official languages - Kinyarwanda, French, and English. Rwanda's capital city is Kigali, which is in the centre of the country. Kigali has a population of around one million people. Nearly 41% of the people in Rwanda are under 15 years old (in Australia around 19% of people are aged under 15). There are two main ethnic groups in Rwanda - Hutu, who make up about 80% of the population, and Tutsi, who compose about 15% of the population.

The 1994 Genocide

The United Nations defines genocide as “the deliberate destruction of a national, ethnic, racial or religious group, in part or in whole”. The cause of the Rwandan genocide are very complex. Although there has been a long history of disagreements and tensions between the Hutu and Tutsi peoples in Rwanda, there has also been cooperation and good will (for example, Hutu and Tutsi often married each other). However, after Rwanda was colonized in the early 1900s, conflict between Hutu and Tutsi intensified. There were a number of violent episodes in the years leading to the genocide, with peoples from both communities suffering the effects. These growing tensions culminated in 1994, when approximately one million Rwandans were killed over a three-month period. Although most of the people who were killed were Hutu, many tens of thousands of Hutu also lost their lives.

Hope for the Future

Since the genocide, Rwanda is gradually healing and rebuilding. Although many tensions still exist and the consequences of the genocide continue to affect almost everyone in the country, many people in Rwanda are trying to rebuild their lives and live positively to the future – both for themselves and for other Rwandans. One way this is happening is through initiatives like the 100 Messages of Hope project in Rwanda. The project records positive messages from survivors of the genocide speaking about how they have rebuilt their lives, and their own hopes and aspirations for the future. Projects like 100 Messages of Hope do not seek to diminish or displace the terrible events that took place during the 1994 genocide – those events should never be forgotten. Instead, these projects help to bring about a recovery from trauma and finding a balance between suffering and hope. Positive messages from survivors themselves can act as examples and help the repair damage to individuals and to society by creating spaces of hope for the community and for younger generations. Messages of support can reinforce that idea by demonstrating to survivors that they are not alone in their struggle, and that others care about their experiences and believe in their ability to heal and grow.
Appendix G – Research Protocol

Research Protocol

Prior to commencing research:

- Ensure that participants have been randomly assigned to a cohort.
- Ensure that parental consent is acquired if participant is under 18.
- Ensure iPad, participation information, consent, and Rwanda information forms are set out.

Running Sessions.

Introduction (15mins).

- Welcome participant and thank them for their participation.
- Ask participants to review participant information form.
- Before participants sign consent, verbally explain the purpose and key points of the study:
  - The purpose of this study is to investigate how people respond to positive stories of survival.
  - This session will take about one hour during which you will watch two pre-recorded messages from Rwandan survivors. You will then record a video message supporting Rwandan survivors. Your support message will be uploaded to Youtube and a project website for others, including Rwandan survivors and the general public, to view.
  - You will also complete two short surveys containing questions about your general well-being and your feelings about participation
  - The study doesn’t involve any deception. The support video you create will be uploaded to a live Youtube channel and will be available for other people to look at.
- Ask participants to complete and sign consent form, and collect forms.
- Explain the purpose of the Rwanda information sheet and allow participants a couple of minutes to read through it.
  - Most people have heard about the genocide in Rwanda, but people have different levels of knowledge about what happened. This information page provides some general knowledge about Rwanda, talks a little bit about the genocide, and gives you a bit of background to this project. We provide this information so that everyone is starting off with a similar level of knowledge about Rwanda and the project.
- Ask if participants have any questions

Procedure.

Cohort 1 (control – Rwanda information only) (45 minutes)

- Ask participants to complete survey 1.
Explain that they will now be viewing two messages of hope from Rwandan survivors, then recording their message of support. (Review operation of iPad, how to view messages of hope, and how to record message).

Participants watch messages of hope.

Inform participants they will now be left alone to record their message of support. Ask if they have any questions. If not, advise that they will have about 15-20 mins and leave them to record their message.

Ask participants to complete survey 2.

Participant debrief. Ask if participants would be willing to answer a few general questions about participation.

Cohort 2 (MoH) (45 minutes)

Explain that they will now be viewing two messages of hope from Rwandan survivors, then recording their message of support. (Review operation of iPad, how to view messages, and how to record message).

Participants watch messages of hope.

Ask participants to complete survey 1.

Inform participants they will now be left alone to record their message of support. Ask if they have any questions. If not, advise that they will have about 15-20 mins and leave them to record their message.

Ask participants to complete survey 2.

Participant debrief. Ask if participants would be willing to answer a few general questions about participation.

Cohort 3 (MoH+MoS) (45 minutes)

Explain that they will now be viewing two messages of hope from Rwandan survivors, then recording their message of support. (Review operation of iPad, how to view messages, and how to record message).

Participants watch messages of hope.

Inform participants they will now be left alone to record their message of support. Ask if they have any questions. If not, advise that they will have about 15-20 mins and leave them to record their message.

Ask participants to complete survey 1.

Ask participants to complete survey 2.

Participant debrief. Ask if participants would be willing to answer a few general questions about participation.

Questions about participation included:

- How did you feel when you were creating your message?
- Do you think your support message would have any value to Rwandan survivors?
- Do you think your support message would have any value to other people who view it?
- Would other people benefit from creating a message of support?