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Comparing Americans' and Ukrainians' Allocations of Public Assistance

The Role of Affective Reactions in Helping Behavior

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In the United States, people who are personally responsible for needing assistance arouse more negative and less positive affect and are less likely to be helped than people who are not personally responsible for their plight. The authors investigated whether this finding generalized to Ukraine, a more collectivist society. American and Ukrainian participants evaluated 16 claimants who needed an organ transplant and selected up to 6 claimants to receive an organ. Claimants varied in their degree of personal responsibility, contribution to society, and need. Results revealed that personal responsibility had a stronger influence on Americans' than Ukrainians' allocations, whereas contribution to society had a stronger influence on Ukrainians' than Americans' allocations. Participants' affective reactions to claimants mediated these cross-cultural effects.

Keywords: *distributive justice; culture; resource allocation; affect; helping*

How people decide to allocate both the benefits and burdens of living in a cooperative society is a fundamental question of social life. People, regardless of political context or culture, try to construct social distributions that meet a criterion of fairness. What is defined as fair, however, may differ depending on one's cultural background. Previous research investigating the allocation of public assistance in the United States has found that

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people's willingness to help others is largely dependent on their attributions for why others need assistance, especially when resources are scarce (Weiner, 1986, 1995). For example, claimants who are judged to be personally responsible for needing assistance arouse more negative and less positive affect and are less likely to be helped than those not personally responsible for needing assistance. These results have generalized across a wide variety of resource domains in the United States, including allocating treatment to AIDS patients, providing victims of a natural disaster with flood relief funds, and providing low-income housing to the poor (Skitka, 1999; Skitka & Tetlock, 1992, 1993a, 1993b; Weiner, 1995). However, to what extent do these results generalize to explain helping behavior in a less individualist society? The goal of the current research was to explore cross-cultural differences in helping behavior by investigating Americans' and Ukrainians' allocations of organs for transplantation to claimants who varied in their relative status, need, how much they contributed to their society, and whether they were personally responsible for needing an organ transplant.

Comparing Americans' and Ukrainians' Helping Behavior

The United States is a democratic market society where the values of self-reliance, the protestant work ethic, and individualism are strongly endorsed (Greenberg, 1979; Triandis, 1995). In contrast, Ukraine, a former Communist country, is a more collectivist society, where interdependence and social duty are especially valued (Triandis, 1995). Americans' cognitions are therefore more likely than Ukrainians' to focus on personal needs, attitudes, and rights. In contrast, Ukrainians' cognitions are more likely than Americans' to emphasize fostering in-group harmony and fulfilling social norms and duties. Although Ukraine separated from the Soviet Union in 1991, there is evidence that communist values (emphasizing equality and need) are still dominant (Arts & Gijssberts, 1998). In addition, because of poor economic conditions and frequent shortages of goods, Ukrainians frequently rely on networking (i.e., trading with family members and friends) to obtain needed food and goods (Wanner, 1998). Networking, therefore, reinforces the value placed on interdependence among Ukrainians.

Given the cultural differences between the United States and Ukraine, we hypothesized that Americans and Ukrainians would adopt different approaches to helping the needy. Consistent with past research, we hypothesized that Americans would primarily rely on attributions for why others need assistance when deciding whom to help. In contrast, we hypothesized that attributions of responsibility would emerge as a less important predictor of helping behavior in Ukraine. Instead, we predicted that Ukrainians would rely more on need or contribution to society (i.e., variables that highlight the interdependence among individuals) when deciding whom to help. The theoretical rationale for these predictions is outlined below.

Culture and Preferences for Distributive Norms

People use various distributive norms when allocating resources (e.g., equity, need; Deutsch, 1975; Mikula, 1981; Törnblom & Jonsson, 1985). Which distribution norm people implement depends on the availability of resources (Greenberg, 1981) as well as

the social context of the allocation situation (Deutsch, 1975). Although people could theoretically use numerous distribution norms, the majority of distributive justice research has focused on equity, equality, and need. Equity theory predicts that outcomes should be divided according to inputs (e.g., two people who produce the same amount of widgets should be paid the same for their work; Adams, 1965). Yet equity theory cannot fully explain how people will allocate public assistance, especially when resources are scarce. What constitutes an input when allocating life-saving resources? Because of the difficult nature of answering this question, other distributive norms, such as need or efficiency, have been predicted to be more relevant than equity when allocating public assistance (Greenberg, 1981). In the present research, we investigate whether contribution to society and status (two variables that equity theory predicts could constitute relevant inputs in other decision-making contexts) influence people's distribution of life-saving resources or whether, instead, participants rely on need or personal responsibility information.

In addition to characteristics of the allocation context, other research suggests that characteristics of the allocator also influence which distribution norm people use (e.g., Rasinski, 1987). For example, relative to individualists, collectivists pay more attention to recipients' needs when allocating resources, especially among in-group members (e.g., Berman, Murphy-Berman, & Singh, 1985; Giacobbe-Miller, Miller, & Victorov, 1998; Murphy-Berman, Berman, Singh, Pachauri, & Kumar, 1984; for an exception, see Kashima, Siegal, Tanaka, & Isaka, 1988). Moreover, need is perceived to be a fairer way to allocate resources, relative to equity, by less individualistic societies (Berman & Murphy-Berman, 1996). Taken together, this research suggests that Ukrainians and Americans may employ different distributive norms when allocating public assistance.

Culture and Attributions of Responsibility

Weiner's (1986, 1995) attribution-affect-action model predicts that when confronted with individuals in need, people generate a causal search to explain why people need help, which leads to attributions of responsibility (internal, controllable causes) or nonresponsibility (external or uncontrollable causes). When people perceive claimants to be responsible for needing assistance, they feel anger and are less likely to help. Conversely, when people find others to be not responsible for needing assistance, they feel sympathy and are more likely to help. Research has strongly supported the connections between attributions, affect, and decisions to help or neglect across a variety of resource domains in the United States (e.g., Murphy-Berman, Berman, & Campbell, 1998; Reizenzein, 1986; Skitka & Tetlock, 1992, 1993a, 1993b; Weiner, 1986, 1995).

In addition, some research supports the notion that these effects generalize to other individualist cultures, such as Italy (Caprara, Pastorelli, & Weiner, 1997) and West Germany (Murphy-Berman & Berman, 1993). Little research, however, has tested the generalizability of Weiner's (1986, 1995) attribution-affect-action model in non-Western cultural contexts. Although there is some unpublished research conducted in Japan (Matsui & Matsuda, 1992; and Kojima, 1992, both cited in Weiner, 1995) that is consistent with the model, other research suggests that the importance of responsibility judgments is strongly influenced by one's cultural frame (for reviews, see Fiske, Kitayama, Markus, & Nisbett, 1998; Markus & Kitayama, 1991). For example, negative attitudes toward the overweight are strongly

influenced by attributions of responsibility for obesity in the United States (Crandall, 1995), whereas in Mexico, where self-reliance is not as valued, antifat attitudes are significantly less correlated with attributions of responsibility for obesity (Crandall & Martinez, 1996). In sum, personal responsibility information may be less influential in shaping people's judgments of others in more collectivist cultures.

Cultural Differences in Emotional Experience

In addition to cultural differences in the importance of attributions of responsibility, other research suggests that there are cultural differences in emotional experience (Kitayama, Mesquita, & Karasawa, 2006; Markus & Kitayama, 1994; Mesquita, 2001). For example, culture influences the types of events that elicit emotional responses (Mesquita & Ellsworth, 2001). In individualist cultures, events related to personal achievement are likely to elicit an emotional response, whereas in collectivist cultures, events that highlight the interdependence among people are more likely to elicit an emotional response (Mesquita, 2001). In addition, different appraisal dimensions may be emphasized in different cultures. For example, although control is an important appraisal dimension in independent societies, it may be considerably less important in more interdependent societies (Mesquita & Ellsworth, 2001). Taken together, this research suggests that different characteristics of claimants may be differentially likely to elicit an emotional response from Americans and Ukrainians. In particular, consistent with the emphasis on control and independence in the United States, we predicted that Americans' emotional reactions to claimants would be strongly shaped by personal responsibility information. In contrast, we predicted that Ukrainians' emotional reactions to claimants would be less influenced by personal responsibility and that Ukrainians might instead respond to claimants' degree of contribution to society or need (information that more closely maps onto interdependence). Moreover, given that people's affective reactions to claimants are the more proximal cause of helping behavior in the attribution-affect-action model relative to judgments of responsibility, cultural differences in people's emotional reactions to claimants should explain differences in their helping behavior.

In summary, research suggests that Americans and Ukrainians may (a) rely on different distributive norms when allocating resources, (b) differentially weight personal responsibility information, and (c) have different emotional reactions to claimants requiring assistance, each of which could affect helping behavior. We predicted that relative to Ukrainians, Americans' emotional reactions to claimants and allocation decisions would be more strongly influenced by attributions of responsibility. In contrast, we predicted that relative to Americans, Ukrainians' emotional reactions to claimants and allocation decisions would be more strongly influenced by contribution to society and need information. In addition, we explored whether status would influence Americans' and Ukrainians' allocations.

To test these hypotheses, we used a modified version of an established judgment and decision-making task (e.g., Skitka & Tetlock, 1992). Participants evaluated 16 claimants who needed an organ transplant and decided which claimants should receive available organs for transplantation. Participants were instructed that because of a limited amount of available organs, they could choose only 6 of the 16 claimants to receive an available organ.

Method

Participants

One hundred nine American participants (65 women) participated in the study in exchange for course credit or a candy bar. The American sample consisted of college students recruited from a large midwestern university and noncollege student adults recruited from waiting areas at an airport. American participants ranged in age from 17 to 65 ($M = 24.32$, $SD = 11.47$). Ninety-eight Ukrainian participants (64 women) participated in the study in exchange for \$5. The Ukrainian sample consisted of college students attending Ostroh Academy and noncollege student adults who were recruited from the surrounding community. Ukrainian participants ranged in age from 17 to 62 ($M = 31.43$, $SD = 12.18$).

Design

We employed a 2 (personal responsibility: responsible, not responsible) \times 2 (status: high, low) \times 2 (contribution to society: high, low) \times 2 (need: high, low) \times 2 (country: United States, Ukraine) mixed design. The first four variables were within-subject factors, and country was a between-subjects factor.

Materials

Sixteen target descriptions were derived by fully crossing two levels of personal responsibility, responsible (despite a doctor's repeated warnings, this person continued to smoke, eat high-cholesterol foods, and not exercise) versus not responsible (this person had a genetically defective organ), by two levels of status, high (scientist) versus low (street cleaner), by two levels of contribution to society, high (volunteers at an orphanage and assists the elderly in their community) versus low (does not volunteer in their community), by two levels of need, high (95% probability of dying before another organ becomes available) versus low (80% probability of dying before another organ becomes available). For example, the claimant who was personally responsible, high status, high in contribution to society, and low in need was described to participants as follows:

Person A: Despite a doctor's repeated warnings about the damaging effects for this person's health and the probability of severe organ damage, this person continued to eat high-cholesterol foods, smoke, and not exercise. As a result, this person now has severe organ failure. This person is a scientist. This person volunteers at an orphanage and assists the elderly. This person has an 80% probability of dying before another organ likely becomes available.

The 16 claimant descriptions were assembled into a questionnaire packet in one of two random orders and composed the stimulus materials for the experiment. All measures and stimulus materials for use in Ukraine were translated from English into Ukrainian and then back-translated to ensure that the original meaning was retained (e.g., Breslin, 1970).

Procedure

Participants' task was to decide which of 16 people who needed an organ transplant should receive one. Participants learned that although there were 16 claimants in need of a transplant, there were only six organs available for transplantation; thus, participants could choose up to 6 claimants to receive an organ transplant. Participants read descriptions of 16 people who needed an organ transplant and provided their affective reactions and their perceptions of how deserving each claimant was of receiving an organ. Participants then chose up to 6 claimants to receive assistance. After allocating the available organs, participants completed manipulation check items, demographic items, and Triandis's (1995) measure of individualism–collectivism.

Measures

Affect. Participants provided their affective reactions to each claimant (i.e., anger, sympathy, pity, compassion, disgust, distaste, admiration, and respect) on scales from 1 (*not at all*) to 7 (*extremely*). A principal components analysis (varimax rotation) of these items yielded two components, reflecting positive affect (compassion, sympathy, respect, admiration, pity; Cronbach's $\alpha = .94$) and outrage (disgust, distaste, anger; Cronbach's $\alpha = .93$). Responses to the respective items were averaged to create composite measures of positive affect and outrage.

Deservingness. Participants rated the targets in terms of how much they deserved an organ transplant on a scale from 1 (*not at all*) to 7 (*extremely*).

Individualism–collectivism. Participants completed Triandis's (1995) measure of individualism–collectivism. In particular, participants indicated the extent to which they agreed or disagreed with 16 items that tapped individualism (e.g., "When I succeed it is usually because of my abilities.") and 16 items that tapped collectivism (e.g., "I hate to disagree with others in my group.") on 9-point bipolar scales. Participants' responses to the individualism and collectivism items were averaged to create a composite index of individualism and collectivism, respectively.

Manipulation checks. Participants answered several questions designed to check our manipulations of personal responsibility, contribution to society, need, and status. Responses were provided on scales from 1 (*not at all*) to 7 (*extremely*). In particular, to check our manipulation of personal responsibility, participants were asked, (a) "To what extent is someone responsible for needing an organ transplant operation if he or she has a genetically defective organ?" and (b) "To what extent is someone responsible for needing an organ transplant if he or she continued to eat high-cholesterol foods, smoke, and not exercise despite a doctor's repeated warnings about the damaging effect for this person's health and the probability of severe organ damage?" To check our manipulation of need, participants were asked, (a) "How much in need of an organ transplant is someone who has a 95% chance of dying before another organ becomes available?" and (b) "How much in need of an organ transplant is someone who has an 80% chance of dying before another organ is

likely to become available?" To check our manipulation of status, participants were asked, (a) "To what extent is being a scientist a high-status job?" and (b) "To what extent is being a street cleaner a high-status job?" Finally, to check our manipulation of contribution to society, participants were asked, (a) "To what extent do you believe that someone who volunteers at an orphanage and assists the elderly contributes to the society in which he or she lives?" and (b) "To what extent do you believe that someone who does not volunteer at an orphanage or assist the elderly contributes to the society in which he or she lives?"

Results

Manipulation Checks¹

Personal responsibility. Results of a 2 (country: United States, Ukraine) \times 2 (personal responsibility: responsible, not responsible) ANOVA revealed that claimants who ignored their doctor's warnings and continued to eat high-cholesterol foods, smoke, and not exercise ($M = 5.46$, $SD = 1.62$) were perceived as more responsible for needing an organ transplant than claimants who had a genetically defective organ ($M = 1.91$, $SD = 1.65$), $F(1, 170) = 280.23$, $p < .001$, $\eta_p^2 = .67$. This effect, however, was qualified by a significant Country \times Personal Responsibility interaction, $F(1, 170) = 10.28$, $p < .01$, $\eta_p^2 = .07$. Although Americans ($M = 1.74$, $SD = 1.77$) and Ukrainians ($M = 2.07$, $SD = 1.59$) did not significantly differ in their perceptions of claimants who were not responsible, $F(1, 170) = 1.22$, *ns*, Americans perceived claimants who practiced poor health behaviors to be more responsible for needing assistance ($M = 5.98$, $SD = 1.29$) than did Ukrainians ($M = 4.95$, $SD = 1.67$), $F(1, 170) = 11.73$, $p < .01$. Nevertheless, both Americans and Ukrainians perceived the personally responsible target as more responsible for needing assistance than the target who was not responsible.

Contribution to society. Results of a 2 (country: United States, Ukraine) \times 2 (contribution to society: high, low) ANOVA revealed that claimants who volunteered in their community were perceived to contribute more to society ($M = 5.70$, $SD = 1.24$) than claimants who did not volunteer in their community ($M = 3.22$, $SD = 1.43$), $F(1, 172) = 528.83$, $p < .001$, $\eta_p^2 = .64$. No other effects were significant.

Need. Results of a 2 (country: United States, Ukraine) \times 2 (need: high, low) ANOVA revealed that claimants with a 95% chance of dying before another organ became available were perceived to be more needy ($M = 6.35$, $SD = 1.14$) than claimants with an 80% chance of dying before another organ became available ($M = 5.66$, $SD = 0.97$), $F(1, 175) = 105.01$, $p < .001$, $\eta_p^2 = .38$. No other effects were significant.

Status. The status manipulation was effective in both countries. However, status had no significant effects on any of the dependent measures and was therefore dropped from all analyses.

Cross-cultural differences in individualism and collectivism. Separate one-way ANOVAs compared Americans' and Ukrainians' aggregate mean scores for the Individualism and Collectivism subscales. As predicted, Ukrainians ($M = 7.22$, $SD = 0.87$) were significantly

more collectivistic than Americans ($M = 6.48$, $SD = 0.86$), $F(1, 170) = 23.71$, $p < .001$. Conversely, Americans were significantly more individualistic ($M = 6.33$, $SD = 0.97$) than Ukrainians ($M = 5.54$, $SD = 1.03$), $F(1, 170) = 17.47$, $p < .001$.

Cross-Cultural Differences in Helping Behavior

A 2 (personal responsibility: responsible, not responsible) \times 2 (contribution to society: high, low) \times 2 (need: high, low) \times 2 (country: United States, Ukraine) \times 2 (order of stimulus materials: Version 1, Version 2) mixed ANOVA with commitment of resources as the dependent variable examined cross-cultural differences in helping behavior. Supporting our hypotheses, results revealed that Americans' allocation decisions were primarily influenced by attributions of responsibility, followed by contribution to society and need. In contrast, Ukrainians' allocation decisions were primarily influenced by contribution to society, followed by attributions of responsibility and need. Order of claimant presentation produced no main or interactive effects. Therefore, all subsequent analyses were collapsed across order. In addition, age and gender were not significant covariates for any of the effects.

Results revealed significant main effects for personal responsibility, $F(1, 204) = 375.95$, $p < .01$, $\eta_p^2 = .65$; need, $F(1, 204) = 90.67$, $p < .01$, $\eta_p^2 = .31$; and contribution to society, $F(1, 204) = 443.64$, $p < .01$, $\eta_p^2 = .69$, on people's allocations. Claimants who were not personally responsible for needing an organ transplant were helped more than claimants who were personally responsible for needing assistance. Moreover, needier claimants were helped more than less needy claimants. Finally, claimants who volunteered in their community were helped more than claimants who did not do volunteer work. These main effects, however, were qualified by several higher order interactions that revealed differences as a function of country in how people allocated resources as well as differences in the relative influence of personal responsibility, need, and contribution to society.

The Differential Impact of Personal Responsibility for Americans and Ukrainians

We predicted that personal responsibility would act as a stronger winnowing factor for Americans than for Ukrainians. This hypothesis was supported: There was a significant Country \times Personal Responsibility interaction on people's allocations, $F(1, 204) = 35.11$, $p < .01$, $\eta_p^2 = .15$ (see Table 1).² Follow-up analyses revealed that Americans were significantly less likely to help personally responsible claimants than were Ukrainians, $F(1, 204) = 27.97$, $p < .001$, $\eta_p^2 = .12$. In contrast, Americans were significantly more likely to help claimants who were not responsible than were Ukrainians, $F(1, 204) = 39.06$, $p < .001$, $\eta_p^2 = .16$. Thus, personal responsibility information had a stronger effect on Americans' than Ukrainians' allocation decisions.

Moreover, as predicted, differences in Americans' and Ukrainians' affective reactions to claimants mediated the observed cultural differences in the influence of personal responsibility on people's willingness to help others. To demonstrate mediation, we followed the criteria established by Baron and Kenny (1986).³ First, results of a 2 (personal responsibility: responsible, not responsible) \times 2 (country: United States, Ukraine) ANOVA with participants' outrage as the dependent variable revealed a significant Country \times Personal Responsibility interaction, $F(1, 204) = 58.99$, $p < .001$, $\eta_p^2 = .23$ (see Table 1). Americans and Ukrainians did not differ

Table 1
Means and Standard Deviations for the Average Number of
Claimants Helped, Perceived Deservingness, and Affective Reactions to
Claimants as a Function of Country and Personal Responsibility

Variable	Country			
	Americans		Ukrainians	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Number of claimants helped				
Responsible	1.08	1.24	1.89	0.88
Not responsible	4.86	1.22	3.90	0.95
Deservingness				
Responsible	4.54	1.32	4.79	1.09
Not responsible	5.81	0.86	5.55	0.92
Outrage				
Responsible	2.93	1.46	1.62	0.75
Not responsible	1.30	0.64	1.30	0.44
Positive affect				
Responsible	3.75	1.38	3.92	1.05
Not responsible	5.11	1.28	4.60	1.13

Note: Number of claimants helped could range from zero to six. Affect and deservingness ratings ranged from 1 (*not at all*) to 7 (*extremely*).

in their outrage when claimants were not personally responsible for needing an organ transplant, $F(1, 204) < 1$, *ns*. In contrast, Americans reported more outrage in response to personally responsible claimants than Ukrainians, $F(1, 204) = 51.17$, $p < .001$.

Second, we correlated participants' outrage with their perceptions of claimant deservingness. There was a significant negative correlation between outrage and the perceived deservingness of personally responsible claimants, $r(206) = -.20$, $p < .01$. In contrast, there was not a significant correlation between outrage and the perceived deservingness of claimants who were not personally responsible for needing assistance, $r(206) = -.13$, $p = .08$. This was expected, because very little outrage was aroused in response to claimants who were not responsible.

Finally, we entered participants' outrage in response to claimants who were responsible and not responsible as a covariate in a 2 (country: United States, Ukraine) \times 2 (personal responsibility: responsible, not responsible) ANCOVA with deservingness ratings as the dependent variable. Controlling for outrage reduced the previously observed Country \times Personal Responsibility interaction from $F(1, 204) = 12.84$, $p < .001$, to nonsignificance, $F(1, 202) = 2.10$, $p = .15$. Thus, differences between Americans' and Ukrainians' outrage in response to personally responsible claimants accounted for the differential impact of personal responsibility on Americans' and Ukrainians' willingness to help others.

Analysis also indicated that differences in Americans' and Ukrainians' positive affective reactions to claimants as a function of personal responsibility mediated these results. For brevity, these analyses are not reported. Table 1 displays the means and standard deviations for participants' positive affective reactions to claimants as a function of country and personal responsibility.

Table 2
Means and Standard Deviations for the Average Number of
Claimants Helped, Perceived Deservingness, and Affective Reactions to
Claimants as a Function of Country and Contribution to Society

Variable	Country			
	Americans		Ukrainians	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Number of claimants helped				
High contribution	3.92	0.97	4.88	1.11
Low contribution	2.04	1.00	0.91	1.02
Deservingness				
High contribution	5.46	0.88	5.87	0.76
Low contribution	4.87	1.06	4.47	1.21
Outrage				
High contribution	1.99	0.80	1.33	0.36
Low contribution	2.15	0.86	1.74	0.93
Positive affect				
High contribution	4.59	1.17	4.62	1.16
Low contribution	3.92	1.11	2.81	0.88

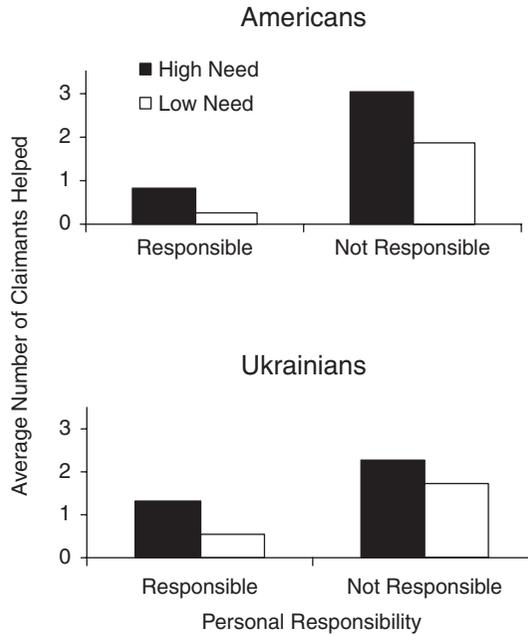
Note: Number of claimants helped could range from zero to six. Affect and deservingness ratings ranged from 1 (*not at all*) to 7 (*extremely*).

The Differential Impact of Contribution to Society for Americans and Ukrainians

We predicted that Ukrainians would be more influenced by contribution to society information than would Americans. This hypothesis was supported: Results revealed a significant Country \times Contribution to Society interaction on people's allocations, $F(1, 204) = 57.22, p < .01, \eta_p^2 = .22$ (see Table 2). Follow-up analyses revealed that Ukrainians were significantly more likely than Americans to help claimants who volunteered in their community, $F(1, 204) = 44.68, p < .001, \eta_p^2 = .18$. In contrast, Ukrainians were significantly less likely than Americans to help claimants who did not volunteer in their community, $F(1, 204) = 64.21, p < .001, \eta_p^2 = .24$. Thus, contribution to society had a stronger effect for Ukrainians than Americans.

We tested whether differences in participants' positive affective reactions to claimants as a function of contribution to society mediated the cross-cultural differences in people's willingness to help. Results of a 2 (contribution to society: high, low) \times 2 (country: United States, Ukraine) ANOVA revealed a significant Country \times Contribution to Society interaction on people's positive affective reactions to claimants, $F(1, 204) = 75.11, p < .001, \eta_p^2 = .27$ (see Table 2). Follow-up analyses revealed that Americans and Ukrainians did not differ in their positive affective reactions to claimants who contributed to their society, $F(1, 204) < 1$. In contrast, Ukrainians felt significantly less positive affect for claimants who did not volunteer in their community relative to Americans, $F(1, 204) = 55.88, p < .001$. In addition, there was a significant positive correlation between the perceived deservingness of claimants and positive affect,

Figure 1
Average Number of Claimants Helped as a Function of Need and Personal Responsibility for Americans (top figure) and Ukrainians (bottom figure)



$r(206) = .40, p < .001$. Claimants who elicited more positive affect were perceived to be more deserving of receiving assistance.

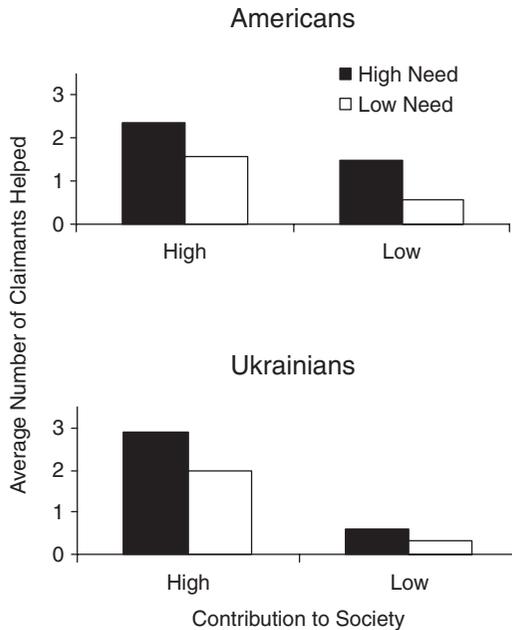
Finally, we entered positive affect as a covariate in a 2 (contribution to society: high, low) \times 2 (country: United States, Ukraine) ANCOVA with deservingness ratings as the dependent variable. Controlling for positive affect reduced the previously observed Country \times Contribution to Society interaction from $F(1, 204) = 52.22, p < .001$, to non-significance, $F(1, 202) = 2.22, p = .14$. Thus, cross-cultural differences in positive affective reactions to claimants mediated the Country \times Contribution to Society interaction on people's willingness to help.⁴

The Influence of Need and Personal Responsibility on Americans' and Ukrainians' Allocations

Analysis also revealed two higher order interactions involving need that qualified the two-way interactions reported earlier. In particular, results revealed a significant Country \times Personal Responsibility \times Need interaction on people's allocations, $F(1, 204) = 21.21, p < .01, \eta_p^2 = .09$. This three-way interaction can be understood in terms of the simple interaction between personal responsibility and need for each country.⁵

Americans. Analysis revealed that need and personal responsibility significantly interacted to influence Americans' allocations, $F(1, 204) = 5.80, p < .05, \eta_p^2 = .15$. As can be

Figure 2
Average Number of Claimants Helped as a Function of Need and Contribution to Society for Americans (top figure) and Ukrainians (bottom figure)



seen in Figure 1, need was a more important winnowing criteria when Americans decided which claimants who were not responsible should be helped, $F(1, 204) = 33.33, p < .01, \eta_p^2 = .34$, than when they decided which responsible claimants should be helped, $F(1, 204) = 5.60, p < .05, \eta_p^2 = .16$. In short, Americans were not likely to help claimants who were personally responsible for needing a transplant regardless of their level of need. However, need had a larger influence on Americans' allocations to claimants who were not personally responsible for needing assistance: needier claimants who were not responsible were helped more than less needy claimants.

Ukrainians. In contrast, analysis indicated there was not a significant simple interaction between personal responsibility and need for Ukrainians' allocations, $F(1, 204) < 1$ (see Figure 1). Thus, need was an equally important consideration in Ukrainians' allocation decisions, regardless of whether a claimant was personally responsible for needing an organ transplant.

The Influence of Need and Contribution to Society on Americans' and Ukrainians' Allocations

Need also interacted with contribution to society and country to affect allocation decisions, $F(1, 204) = 13.08, p < .01, \eta_p^2 = .06$. This three-way interaction can be understood in terms of the simple interaction between contribution to society and need for each country.⁶

Americans. Analysis indicated there was not a significant simple interaction between contribution to society and need for Americans' allocations, $F(1, 204) < 1$, *ns* (see Figure 2). Rather, the effects of contribution to society and need on Americans' allocation decisions simply reflected the main effects for these variables.

Ukrainians. In contrast, results revealed a significant simple interaction between contribution to society and need for Ukrainians' allocations, $F(1, 204) = 4.27$, $p < .05$. As can be seen in Figure 2, Ukrainians were relatively unwilling to help claimants who did not volunteer in their community irrespective of their level of need, $F(1, 204) = 1.93$, *ns*. However, need did influence Ukrainians' allocations to claimants who volunteered in their community: Ukrainians' helped needier claimants who contributed to their community more than less needy claimants, $F(1, 204) = 18.60$, $p < .01$, $\eta_p^2 = .24$.

Does Individualism and Collectivism Account for Cross-Cultural Differences in Allocations?

We tested whether differences in individualism and collectivism accounted for our observed cross-cultural differences in people's willingness to help. We entered participants' scores on the Individualism and Collectivism subscales as covariates in a 2 (personal responsibility: responsible, not responsible) \times 2 (contribution to society: high, low) \times 2 (need: high, low) \times 2 (country: United States, Ukraine) ANCOVA with participants' helping decisions as the dependent measure. Results revealed that collectivism was a significant covariate, $F(1, 170) = 5.47$, $p < .02$, whereas individualism was not a significant covariate, $F(1, 170) < 1$. More important, controlling for participants' individualism and collectivism scores did not eliminate any of the previously observed cross-cultural differences in helping behavior (i.e., all the reported interactions involving country remained significant, $p < .01$ for all).

Discussion

This study uncovered important similarities and differences in how Americans and Ukrainians allocate scarce resources. Both Americans' and Ukrainians' helping decisions were influenced by claimants' degree of personal responsibility for needing assistance, contribution to society, and relative need. Cross-cultural differences in allocation behavior emerged, however, in the relative importance that Americans and Ukrainians attached to personal responsibility and contribution-to-society information when making their allocation decisions. Consistent with our hypotheses, personal responsibility had a stronger influence on Americans' than on Ukrainians' affective reactions, deservingness judgments, and helping behavior, whereas contribution to society had a stronger influence on Ukrainians' than on Americans' affective reactions, deservingness judgments, and helping behavior.

Cross-Cultural Differences in Attributions of Responsibility

Our finding that attributions of responsibility were less influential in Ukrainians' allocation decisions relative to Americans is consistent with research demonstrating cultural differences in the types of attributions people make for events. In general, whereas individualists

have a tendency to explain behaviors in terms of an actor's personal characteristics (i.e., the so-called fundamental attribution error; Ross, 1977), collectivists are more inclined to explain behaviors in terms of situational factors (for a review, see Choi, Nisbett, & Norenzayan, 1999). Thus, one explanation for our results is that although Ukrainians recognized that claimants who practiced poor health behaviors were personally responsible for needing assistance, they nevertheless may have also considered situational explanations for why claimants needed help. Therefore, personal responsibility information was simply not as influential when they decided whom to help. Alternatively, Ukrainians may not have perceived personal responsibility to be as relevant of a criterion to use when deciding whom to help. Consistent with this notion, we found that Ukrainians were not as angered by personally responsible claimants relative to Americans. In summary, our results suggest that attributions of personal responsibility are less influential in shaping people's reactions to others in more collectivist relative to individualist societies.

Cross-Cultural Differences in the Influence of Contribution to Society

Our finding that Ukrainians were more likely to rely on contribution to society information than were Americans is consistent with the stronger norm of interdependence found in Ukraine than in the United States. In addition, economic differences between Ukraine and the United States help to explain why Ukrainians may have particularly valued claimants who contributed to their community and devalued those who did not contribute. At the time data were collected, the economic situation in Ukraine was so poor that 75% of the population relied on growing food on their own small plots of land to survive (Golovakha & Panina, 1997), and most Ukrainians relied on trading with family members and friends for needed goods (Wanner, 1998). Therefore, the poor economic conditions as well as the perpetuation of communist values in Ukraine (Miller, Reisinger, & Helsi, 1996) may explain why Ukrainians particularly valued community members who contributed to their society and felt relatively little sympathy for claimants who did not volunteer in their community. On the one hand, Ukrainians may believe that helping those who help others is a form of quid pro quo. On the other hand, Ukrainians may believe that helping those who help others is an important investment in the continued strength of the community.

Although we observed differences in the relative strength of personal responsibility and contribution to society on Americans' and Ukrainians' helping behavior, it is important to note that participants' affective reactions to claimants predicted helping decisions in both countries. Although what most strongly elicits sympathy (or a lack thereof) may be culturally variable, the connection between sympathy and helping was constant across the cultural contexts studied here. In short, people were especially likely to help when a claimant's behavior elicited sympathy and especially unlikely to help when a claimant's behavior did not produce sympathy, regardless of cultural context. It is also interesting to note that differences in outrage mediated the observed cross-cultural differences in helping behavior as a function of personal responsibility. Americans were angered by those who were personally responsible for needing assistance, whereas Ukrainians consistently reported feeling little anger in response to claimants irrespective of personal responsibility or contribution-to-society information (means for Ukrainian outrage were always below 1.75 on our scale from 1, *not at all*, to 7, *extremely*).

Thus, although Ukrainians felt relatively little sympathy for claimants who did not volunteer in their community, they did not report feeling much outrage in response to those same claimants. These results are consistent with the notion that anger may be less important and less likely to be expressed in more collectivist societies (Mesquita & Ellsworth, 2001; Kitayama et al., 2006). Taken together, our results suggest that people's affective reactions to claimants are important determinants of their helping behavior, and future research should continue to explore the relationships between culture, emotion, and allocation decisions.

Finally, in addition to advancing our understanding of how Americans and Ukrainians allocate scarce resources, the present research also advanced our understanding of the influence of personal responsibility information relative to other variants of the equity norm (e.g., contribution to society, status) on people's allocation decisions. Although research supports the notion that attributions of responsibility are a more important criterion for allocating resources than distributive norms, such as need and efficiency, in the United States (e.g., Skitka & Tetlock, 1992), to our knowledge, no research has compared the influence of attributions of responsibility relative to contribution to society and status. Equity theory predicts that outcomes should be distributed according to inputs (Adams, 1965), and both status and contribution to society could be viewed as relevant input when allocating resources. Therefore, equity theory might predict that the more one contributes to one's community, the more likely one is to receive a resource when in need. Although this was true in Ukraine, contribution to society did not emerge as the primary determinant of helping behavior in the United States. Thus, our results extend past research by demonstrating that Americans rely more on attributions of personal responsibility than possible equity considerations, specifically, contribution to society or status when allocating scarce public resources.

As with all research, there were a number of limitations to the current study. For example, we investigated allocation behavior in a single domain (i.e., organs for transplantation) and used only one operationalization of each of our independent variables. Future research could address some concerns with the generalizability of the current findings by using different manipulations of the same variables and investigating allocation behavior in different domains. For example, one could assess whether contribution to society would have been more important than need in Ukrainians' allocation decisions had a stronger manipulation of need been used. Relatively high levels of need were chosen for both the high- and low-need manipulations for this study, because claimants on a waiting list to receive an organ for transplantation are all relatively needy. However, this could be seen as a limitation of the study, because the contrast evoked between claimants who had a 95% versus an 80% chance of dying before another organ becomes available may not have been as strong as the contrasts evoked between high and low contributors or between responsible claimants and those who were not responsible.

The current research advances our understanding of cultural differences in resource allocation in important ways and extends cross-cultural investigations of helping behavior to Ukraine, where little cross-cultural research has been conducted. Our results suggest that the tendency to deny help to others who are responsible for needing assistance when resources are scarce may be more of a Western than a universal phenomenon. Thus, current Western models of helping and allocation behavior may not adequately capture the variables that affect helping behavior in other cultures. However, our results also revealed one important similarity in what predicts helping behavior across cultural contexts, specifically, the similar

role that people's affective reactions to claimants played in helping decisions. Although the factors that elicit feelings of sympathy may vary across cultures, feeling sympathy appears to be consistently associated with increased helping regardless of cultural context.

Notes

1. Alpha was set at .01 for all analyses. In addition, data collection for the nonstudent portion of the American sample occurred at an airport (prior to 2001), where time to complete the survey was a consideration. Thus, to shorten the survey, we omitted the manipulation checks and the Triandis (1995) measure for these participants. The degrees of freedom for the manipulation check analyses and analyses using individualism and collectivism scores are therefore smaller than for the analyses of cross-cultural differences in helping behavior.

2. To ensure that this interaction was not a result of differences in the way Ukrainians and Americans perceived the personally responsible claimant on the manipulation check items, a subsample of Ukrainians ($n = 54$) was selected who scored similar to Americans on the manipulation checks for personal responsibility. A 2 (personal responsibility: high, low) \times 2 (group: Americans, Ukrainians with high-responsibility manipulation checks) ANOVA with commitment of resources as the dependent variable revealed that the Country \times Personal Responsibility interaction remained significant, $F(1, 161) = 22.66, p < .01, \omega^2 = .12$, and the pattern of results was similar. Therefore, the Personal Responsibility \times Country interaction was not merely caused by differences in how Ukrainians and Americans perceived the personally responsible claimants.

3. It was necessary to use participants' deservingness ratings as the dependent variable for the mediation analyses to allow for adequate variation in the dependent measure. For brevity, all the analyses using participants' deservingness ratings as the dependent variable were not reported, but the means and standard deviations for participants' deservingness ratings are reported in Tables 1 and 2. The overall analyses using deservingness ratings yielded very similar results compared to the analyses with choice as the dependent measure.

4. Analysis revealed that participants' outrage did not mediate the Country \times Contribution to Society interaction. For brevity, these analyses are not reported. Table 2 displays the means and standard deviations for participants' outrage as a function of country and contribution to society.

5. One could also break down this three-way interaction by examining the effects of country and need at each level of personal responsibility. Analysis indicated that there was not a significant Country \times Need interaction when claimants were personally responsible for needing assistance, $F(1, 204) < 1, ns$. In contrast, analysis revealed there was a significant Country \times Need interaction when claimants were not responsible for needing assistance, $F(1, 204) = 5.52, p < .025$. Follow-up analysis indicated that when claimants were not personally responsible for needing assistance, Americans helped claimants who were high in need more than Ukrainians did, $F(1, 204) = 15.32, p < .001$. In contrast, there was not a significant difference in Americans' and Ukrainians' willingness to help claimants who were not responsible and also low in need, $F(1, 204) < 1, ns$.

6. This three-way interaction can also be understood in terms of the simple interaction between country and need at each level of contribution to society. Analysis indicated that there was not a significant Country \times Need interaction when claimants contributed to their community, $F(1, 204) < 1$. In contrast, there was a significant Country \times Need interaction when claimants did not volunteer in their community, $F(1, 204) = 3.99, p < .05$. Follow-up analyses revealed that when claimants were low in contribution to society, Americans helped claimants who were also high in need more than Ukrainians did, $F(1, 204) = 16.36, p < .001$. In contrast, there was not a significant difference between Americans' and Ukrainians' willingness to help claimants who were low in need and who did not volunteer in their community, $F(1, 204) = 1.47, ns$.

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