Ursidae: The Undergraduate Research Journal at the University of Northern Colorado

Volume 7
Number 2 *McNair Special Issue*

Article 5

May 2019

Can Goal-Setting Improve Hospital Volunteers' Intrinsic Motivation?

Genesis Orellana
University of Northern Colorado, orel8994@bears.unco.edu

Can Goal-Setting Improve Hospital Volunteers' Intrinsic Motivation?

Genesis Orellana
Mentor: Rena Kirkland, Ph.D., Psychological Sciences

Abstract: With the objective of increasing volunteer retention, hospital administrators are interested in fostering volunteers' motivation to continue working in the departments in which they have been placed. However, there is limited research on hospital volunteers' motivation and whether setting goals affect their motivation. The purpose of my research was to examine whether hospital volunteers who set personal goals would increase their intrinsic motivation and tenure at a particular site. My research questions were: "Is there an effect on intrinsic motivation from a goal-setting intervention in hospital volunteers?" and "Will a goal-setting intervention help hospital volunteers set stronger goals?" Eight volunteer participants, 16-21 years old, were recruited from a local medical care facility. This study implemented a mixed-method wait-list design; participants completed a pre-test, a motivational intervention, and posttest. The intervention focused on assisting volunteers with goal setting and creating an action plan to achieve those goals. Intrinsic motivation was assessed using a modified Volunteer Function Inventory and the Modified Intrinsic Motivation Inventory. Participants' goals were coded and scored for specificity, measurability, and difficulty. There was not a significant difference between the intervention and control groups' intrinsic motivation.

Keywords: *goal-setting, motivation, volunteers*

Hospitals reply on volunteers for various aspects of operations. Although volunteers are an integral part of hospital procedures, valuable resources are lost from high attrition rates; therefore, retaining volunteers is a priority for hospital administrators. To justify the time and cost of training volunteers in various departments, hospital administration is concerned with return on their investment. With the objective of increasing volunteer retention, hospital administrators are interested in fostering their volunteers' motivation to continue working in the departments that they have been placed. Hence, there is a need for research to examine hospital volunteers' motivation. Some researchers have examined volunteers' motivation or goal-setting related to volunteering, but these two efforts have not been examined together. Typically, volunteers are not encouraged to set a goal, yet goal theory suggests that goal setting is a useful strategy for promoting motivation (Worth, 2005).

In most cases, volunteers' supervisors assign goals or objectives for the volunteers, rather than volunteers setting goals for themselves (Worth, 2005). When someone else assigns performance to an individual, the individual is more likely to be driven by external factors, which reduces perception of autonomy and self-determination (Deci & Ryan, 1985). My first research question was, "Is there an effect on intrinsic motivation from a goal-setting intervention in hospital volunteers?" My second research question was, "Will a goal-setting intervention help hospital volunteers set stronger goals?" I hypothesized that if hospital volunteers set strong goals, then their intrinsic motivation would increase. I also hypothesized that a goal-setting intervention would help hospital volunteers set stronger goals. The overarching purpose of this research is to examine hospital volunteers' intrinsic motivation, with the goal of increasing the likelihood that the volunteers would remain at their sites for longer lengths of time.

LITERATURE REVIEW

Motivation

Motivation is considered a driving force that initiates and sustains behavior (Latham & Locke, 2002). One popular motivation theory is self-determination theory (SDT), which purports that people are innately driven to satisfy psychological needs (Ryan & Deci, 2000). SDT distinguishes between autonomous and controlled motivation (Gagné & Deci, 2005) as well as between intrinsic and extrinsic motivation. Intrinsic motivation is

displayed when individuals engage in activities for the sake of enjoyment or other internal reasons. Extrinsic motivation is displayed when individuals engage in activities for a reward or other external reasons.

A substantial amount of research suggests that intrinsic motivation is associated with a higher degree of commitment and adherence to an activity compared to extrinsic motivation (Deci & Ryan, 2008; Gagné & Deci, 2005; Günter, Kals, Strubal, & Wehner, 2016). Although extrinsic motivation is less associated with self-determined behavior compared to intrinsic motivation, it is important to note there are different degrees of extrinsic motivation. According to SDT, there are three types of external regulations that promote different categories of extrinsic motivation: external regulation (involves reward and avoidance of punishment), introjected regulation (avoid feeling guilty or shame), and identified regulation (not fully integrated into one's own decision but understands the value). Externally regulated extrinsic motivation is associated with the least self-determined behaviors, whereas identified regulation is associated with more autonomous behaviors (Gagné & Deci, 2005). Individuals who volunteer based on identified regulation may have higher intrinsic motivation compared to individuals who have external regulation. For example, a teenager volunteering because he/she enjoys it but also understands volunteering could be put on a résumé.

According to SDT, individuals can either be associated with self-determined or controlled motivation. Self-determined motivation is associated with intrinsic motivation and identified regulation (i.e., not fully integrated into one's own decision but understands the value). Controlled motivation is associated with extrinsic factors and is negatively associated with self-determined behaviors (Günter, Kals, Strubal, & Wehner, 2016). Collectively, research suggests that the quality and type of motivation individuals' display is related to the long-term commitment of activities (Deci & Ryan, 2008). In my study, intrinsic motivation will be defined as activities that individuals find interesting and would do in the absence of a reward or consequence (Deci & Ryan, 2000).

Goal-Setting Theory

Research suggests that for people to feel competent they must set realistic and achievable goals, which allow them to perceive their own abilities to achieve their goals. Individuals may feel control when they are able to set clear steps to achieve their goal, rather than thinking that luck or chance will dictate their outcomes (Kober & Usher, 2012). When people set hard goals for themselves they tend to stay committed and interested in the activities that lead to their goals (Dysvik & Kuvass, 2013; Kober & Usher, 2012; Locke, 1996). In contrast, when people set easy goals for themselves they are less likely to stay committed because an easy goal does not require dedication to reach that goal (Locke, 1996). For instance, one study found that industry workers, which worked in three large Norwegian service organizations, who set mastery goals (i.e., goals that were focused on learning outcomes) were more involved and interested in tasks. In addition, results indicated they also had higher intrinsic motivation (Dysvik & Kuvass, 2013). Other studies have found that people who set strong goals (i.e., goals that are specific and difficult) perform better than people who set easy goals (Atkinson, 1958; Klein, Locke, & Mento, 1992; Locke, Chah, Harrison, & Lustgarten, 1989).

A goal needs to be specific, measurable, and difficult for an individual to feel motivated (Bandura, 1986; Chah, Harrison, Locke, & Lustgarten, 1989; Klein, Locke, & Mento, 1992). Bandura (1986) suggested that even though goal specificity does not increase performance, it does reduce the ambiguity about what needs to be attained. For instance, Mento et al. (1992) stated that when people set specific goals, their interest increases. Attainment is important in a goal because research suggests having an achievable goal is related to long-term commitments to that goal (Chah, Harrison, Locke, & Lustgarten, 1989). In addition, Mento and colleagues (1992) argued that goal setting assists people in discovering new pleasure in activities. In one

study, when undergraduate students set their own goals in a numerical counting task they tended to improve their performance more than when a supervisor set goals for them (Inashita, Matsui, & Okada, 1983). A focus for some researchers has been to investigate the impact of setting goals on motivation. For instance, Atkinson (1958) observed college men completing arithmetic problems in a certain amount of time. When the participants set moderately difficult goals they demonstrated higher levels of effort compared to the participants who set general, easy goals.

One area that has been examined in relation to goal-theory is the importance of feedback. Feedback helps people moderate their performance based on the goals they set for themselves (Kreen, Würth, & Hergovich, 2013; Latham & Locke, 2002; Locke, 1996). Bandura (1986) suggested that people who set goals to improve their past performance, and then received negative feedback, experienced doubt about their ability. Kreen, Würth, and Hergorich, (2013) had participants watch a 1,941ms sport video and asked how many athletes were in the video. Participants in the positive feedback condition were told that they scored average on their recall. When participants received positive feedback, they had trouble maintaining their performance, whereas when participants received negative feedback they maintained the same level on the task that they are doing. Therefore, the feedback that people receive can impact how they view their goals and whether or not they still want to achieve their goals. Bobko, Locke, and Motowidlo (1986) examined goal performance based on positive and negative feedback in industrial and organizational workers. The results showed that when people received negative feedback, they tended to increase their effort on the tasks toward their goals. In another study, Krenn and colleagues (2013) examined the relationships among goal-setting, performance, and the type of feedback participants received. Participants who received negative feedback (told they scored below average) set stronger goals and increased performance. When participants received positive feedback (told that they did above average) they also set stronger goals, but there was no change in performance (Kreen, Würth, & Hergovich, 2013). Another researcher examined task performance and feedback, and results indicated that individuals who received negative feedback on task performance set higher goals (Erez, 1977).

Locke and Latham (2002) suggested that goals affect performance through four mechanisms. The first mechanism is that goals are a directive function, which means people will put their attention and effort into activities related to their goals. The second mechanism is that goals serve to energize and direct behavior. Locke and Latham (2002) supposed this function is related to the relationship between challenging goals and goal attainment. In other words, individuals who set challenging goals tend to experience goal attainment because they are committed to their goal. The third mechanism is persistence, which allows people to control the timeline of their goal. LaPorte and Nath (1976) found that when people are able to control the timeline of their goal they tend not to put in a lot of effort into long-term goals. The fourth mechanism is that goals indirectly lead to the arousal, discovery, and use of task-relevant knowledge and strategies (Wood & Locke, 1990).

Goal-Setting Intervention

In light of the evidence regarding the impact of goal setting on performance and achievement outcomes, some researchers have examined whether goal-setting interventions can be beneficial to helping people set goals. The intention of providing a goal-setting intervention is to help individuals develop a sense of autonomy as well as teach them how to develop steps to achieve their goal (Gollwiter, 1999). Goal-setting interventions have been shown to help individuals (i.e., students, athletes, and volunteers) set specific, difficult goals and make a plan to achieve their goals (Coates, Hetherton, & MacLeod, 2008; Gollwitzer, Sheeran, & Webb, 2005). Research suggests that when individuals attend Goal-Setting and Planning (GAP) workshops they tend to report higher levels of

well-being and life satisfaction (Coates, Hethertion, & MacLeod, 2008). Furthermore, Gollwitzer, Sheeran, and Webb (2005) described the importance of implementation intentions, which involves specifying the behavior to be performed in the service of the goal and the situational context that will enact it. Implementation intentions are thought only to affect behavior when someone has a strong goal (Gollwitzer, Sheeran, & Webb, 2005).

Gollwaitzer et al. (2005) described that goal-setting interventions have two processes. First, a specific goal becomes highly important when implemented intentions are placed. Second, a goal-setting intervention should construct a plan to initiate behavior. According to Friedman and Scholnick (1993), plans allow individuals to construct steps to reach a goal based on the resources they have available to them. Setting and planning goals are cognitively based processes, which allow individuals to have control over their goals (Coates et al., 2007). In one study, researchers investigated a goal-setting intervention with a female basketball team (Bloom, Loughhead, & Senécal, 2008). Results indicated that the players demonstrated an increase in perception of cohesion after the intervention, and the goal-setting intervention was effective for team-building outcomes as measured by a pre/post-test self-report assessment on cohesion.

Research on Volunteers' Motivation

In contrast to middle aged and older adults, young adult hospital volunteers are motivated to a larger degree by extrinsic factors, such as career interests, compared to intrinsic factors (Braneen & Ibrahim, 2008; Ferreria, Proença, & Proença, 2012; Ghose & Kassam, 2014). In one study, hospital volunteers were asked about their motivation in four categories: development and learning, altruism, career recognition, and belonging and protection. Results indicated that younger volunteers were mostly motivated by career recognition (Ferreria, Proença, & Proença, 2012).

Other studies have also found that young adult volunteers are motivated by extrinsic factors. Ghose and Kassam (2014) asked college students who volunteered in India about their values and attitudes that dealt with volunteering. Findings suggested that college-student volunteers were mostly interested in social connections and career interest. Both of these reasons are extrinsic factors since they are related to rewards the college students gained from volunteering. In another study, Worth (2005) indicated that young adult volunteers tended to be more understanding motivated (i.e., gain knowledge, skills, and abilities) than older volunteers. Collectively, the findings that young adults tend to be more extrinsically motivated point to a potential reason why there are high attrition rates in young adult hospital volunteers. That is, SDT posits that intrinsic motivation is associated with commitment and autonomous self-determination, yet previous findings indicate that young adult hospital volunteers are more motivated by extrinsic compared to intrinsic factors. Therefore, one potential way to improve young adult hospital volunteers' long-term commitment could be through an intervention aimed at increasing intrinsic motivation and/or the degree to which the volunteers feel autonomous.

Few studies, however, have found instances when young adults have displayed motives associated with autonomy and self-determination (Beehr, Blowing, LeGro, Porter, & Swader, 2010; Brannen & Ibrahim, 2008; Clary et al., 1998). Clary and colleagues (1998) found that psychology college students who volunteered rated values as more important compared to social motives. As stated earlier, behaviors that are associated with personal values are considered to be the most self-regulated type of extrinsic motivation. Furthermore, this internalized extrinsic motivation (i.e., identified regulation) is associated with autonomous behaviors (Gagné & Deci, 2005). Therefore, there are instances when extrinsic motivation is related to self-determined behavior—provided that individuals identify with the values of the extrinsic incentives. However, when individuals do not feel they have choice in

their behaviors, such as when volunteering is required, then motivation and commitment are compromised. For instance, college students who were required to volunteer as part of their class requirement had lower intrinsic motivation and reported feeling more time demands than students who were not required to volunteer (Beehr et al., 2010). In contrast, college students who volunteered on their own volition were more likely to show higher levels of intrinsic motivation than students who were required to volunteer. A study found that young adult female hospital volunteers were more intrinsically and personally focused compared to young adult male hospital volunteers who were more extrinsically and occupationally focused (Brannen & Ibrahim, 2008).

Goal-Setting Research on Volunteering

A few researchers have examined how goal setting can be incorporated into volunteers' motivation. In one study, AIDS and hospice volunteers completed a series of self-report measures including a survey on values, community concerns, understanding, personal development, and esteem enhancement as well as open-ended questions on goals. Results indicated that the volunteers were more likely to have approach goals (reaching or maintaining a desired outcome) compared to avoidance goals (avoiding or eliminating undesired outcome), and more abstract goals than concrete goals. In the same study, volunteers reported that value motives were endorsed the most and esteem enhancement was endorsed the least (Worth, 2005). These results indicate that the volunteers were more intrinsically than extrinsically motived.

In summary, a substantial amount of research suggests that intrinsic motivation is related to strong commitment to goals as well as higher goal attainment compared to extrinsic motivation. In addition, goal theory provides a framework for examining how different types of goals impact the effort and success that people achieve. Goal-setting interventions have been found to be associated with autonomous behaviors and perceptions as well as well-being and life satisfaction (Coates, Hetherton, & MacLeod, 2008; Gollwizter, 1999; Gollwitzer, Sheeran, & Webb, 2005). However, there is a dearth of research examining whether goal setting impacts hospital volunteers' intrinsic motivation. In the current study, I set out to examine the hypothesis that a goal-setting intervention would help hospital volunteers set strong goals. Additionally, I hypothesized that goal setting would have a positive impact on hospital volunteers' intrinsic motivation.

METHOD

Participants

Eight volunteers (6 females) were recruited from a local medical care facility in Colorado. The volunteer service director asked volunteers in different departments whether they wanted to participate in this study. If volunteers were interested, then the director sent their contact information to me, and I followed up with them. The age range of the participants was from 16 to 21 years old.

Procedure

This study was a wait-list design, and all the volunteers were exposed to the intervention. I met with the volunteers twice. In the first meeting, all volunteers completed two inventories measuring intrinsic motivation and answered open-ended questions relating to setting a goal. Half of the volunteers were exposed to a goal-setting intervention during the first meeting, and the other half of the volunteers were exposed to the intervention during the second meeting. In this way, all the participants had the opportunity to benefit from the goal-setting intervention. I interviewed half of the volunteers during the first meeting to ensure that they made a stronger goal. That goal was then compared to the goal they made during the second meeting by answering the open-ended questions.

I needed IRB approval because I surveyed and interviewed hospital volunteers for my data collection. The consent process included explaining to the hospital volunteers that they could stop the study whenever they wanted to, and

that their participation is completely voluntary. They were informed that their information would be kept confidential, and that they would be identified with a numeric identifier for further protection of their identity. After I finished verbally explaining the study, participants read and signed a consent form to participate. Volunteers who were minors were required to have their parents sign a consent form, and the minor signed below the parent signature. I kept the consent and assent forms in a locked cabinet. My research mentor and I were the only people who had access to those files. To analyze the interview data, I transcribed the interviews.

I started the data collection process in mid-February. Participants completed the survey then went through the interview process. After 6 to 8 weeks they completed the survey again.

Goal-Setting Intervention

The intervention included an interview to help the volunteers set individual goals. During this interview, I focused on assisting volunteers with goal setting in addition to creating an action plan of steps to achieve those goals. The open-ended questions included asking volunteers what they wanted to achieve while they volunteered, what steps they would take, and when they would know when they have achieved their goal. I interviewed the volunteers at the hospital computer lab or a seating area near a coffee shop for about 15 min, and the interviews were audio recorded. After the volunteers completed the inventories and 10 open-ended questions, they read an educational passage about goal setting. Three weeks after the intervention, I emailed the volunteers to check on the progress of their goal. I did not collect data from these check-in emails. The email asked the participants how far they processed with their goal, and whether they thought they need to make any changes. All the interviews were transcribed and coded by two researchers to find themes and subthemes within the interviews.

Measures

Participants completed the Modified Intrinsic Motivation Inventory (MIMI; Deci, Eghrari, Patrick, & Leone, 1994) and the Volunteer Functions Inventory (VFI; Clary et al., 1998). The MIMI and VFI were both developed through the lens of SDT. The volunteers completed the MIMI and VFI and open-ended questions before the interview, then again 6 to 8 weeks after the first session.

Volunteer Function Inventory (VFI)

I used the VFI to measure intrinsic motivation (Clary et al., 1998). This scale includes 30 items, and assesses reasons participants volunteer based on six different functional motives: career, enhancement (to help ego grow and develop), protective, social, understanding (as a way to gain knowledge) and value. The categories that include self-determined motives are understanding ($\propto = .79$) and values ($\propto = .12$), and the categories that include the controlled motives are enhancement ($\propto = .91$), protective ($\propto = .89$), social ($\propto = .69$), and career ($\propto = .66$). Response choices include, "not at all accurate," "not too accurate," "somewhat accurate," and "very accurate." Sample questions that are on the inventory are, "My friends volunteer," "By volunteering I feel less lonely," "I feel it is important to help others," and "Volunteering makes me feel needed."

Modified Intrinsic Motivation Inventory (MIMI)

I used the MIMI (Deci, Patrick, & Leone, 1994) to measure the volunteers' intrinsic motivation. This scale includes 38 items with four-response choices (i.e., not at all true, somewhat true, usually true, and very true). Sample questions are, "I enjoy volunteering very much," "I put in a lot of effort into volunteering," "I do not feel nervous while volunteering," and "I try very hard while volunteering." The reliability on the Volunteer Function Inventory was $\alpha = .81$.

Scoring Goals

The volunteers were assigned numerical identifiers for the purpose of matching their responses before and after the intervention. High scores on the inventories mean the volunteers have high intrinsic motivation. The goals that the volunteers set were also scored using a rubric that I developed with the help of a McNair Scholar.

Participants received scores ranging from 0 to 2 on the three criteria: a) how specific the outcome is described; b) whether the goal is measurable; and c) how difficult the goal is. Therefore, the goal scores ranged from 0 to 6, with higher scores indicating stronger goals. Two coders (myself and an undergraduate assistant) scored all the participants' goals. Due to a small sample size, a Cohen's Kappa was not used and the two inter-raters came to an agreement on the measures of the goals.

RESULTS

Intrinsic Motivation Theory (MIMI)

The intrinsic motivation gain scores (pretest-protest) were analyzed in a one-way analysis of variance with intervention group (intervention vs. control) as the independent variable. There was no significant change in scores between the intervention group (M= 7.75, SE= 6.14) and the wait-list control group (M= 5.0, SE= 3.3), $F(1,6) = .187$, $p > .0005$.

Volunteer Function Inventory (VFI)

Descriptive statistics were used to analyze the Volunteer Function Inventory due to the small sample size (See Table 1). The intervention group had similar value factor scores for pretest (3.85) and posttest (3.9) with similar standard deviation (0.19 and 0.20). The control group scored higher on the value factor on the pretest with a mean of 3.85 than posttest with a mean of 3.45. The intervention group scored similar to the career factor for the pretest with a mean of 3.8 than the posttest with a mean of 3.85. There was a decrease in the control group for the understanding factor for the pretest (3.75) to posttest (3.6). The intervention group had a similar score on the enhancement factor in the pretest (3.3) and the posttest (3.2). The control group score the same on the pretest (3.45) and posttest (3.45) with a standard deviation (0.62 and 0.85).

Scores on Goals

A descriptive statistic was used to analyze the hospital volunteers' goals due to a small sample size. The intervention group scored higher on the pretest (5.75) than the wait-listed control group (1.00). In the posttest, the intervention group (2.75) scored lower than the wait-listed control group (4.75).

Qualitative Data

The themes from the interviews were that participants were volunteering for the following reasons: career focused, communication, and the need for support. Many volunteers mentioned that volunteering would help them figure out if they would want to get into the medical field as a career. Participant 0011 said, "I'm a birth coach on the weekends when I'm not here and a lot about being a midwife is having a lot of breastfeeding knowledge so this really helps," which shows that volunteering helped participant 0011 enhance their knowledge in their future career. Subthemes based on the career focused theme were shadowing a nurse or physician to gain knowledge and exploring different departments. When participant 0015 was asked why they volunteer, their response was "So, if I get to know the nurses, get to know the doctors through them (volunteer services). That would be great, and I know other volunteers here who have also shadowed." Participant 0017 mentioned that they would like to volunteer in different departments in the hospital, especially the sleep and pulmonary lab, to gain more knowledge on the medical field. When volunteers discussed exploring different hospital departments they also mentioned that they would like the volunteer staff to help them get a position in different departments.

Communication with medical staff and patients was discussed by many of the participants. Many volunteers described either increasing their communication with staff members or wanting to learn how to start conversations with staff members. Participant 0016 said, "… most of the nurses are busy you know they're back and forth, so I like to make small talk," when asked about what they wanted their goal to be.

A few volunteers discussed the need for support from the volunteering staff and other

volunteers, such as help with conservation starters with staff, patients, and guests. Participant 0013 said many of the volunteers pointed out that they would like to talk to another volunteer in their department to get some conversion tips on communicating with staff and patients. Participant 0015 discussed they knew other volunteers that had shadowed and wanted to form relationships with other volunteers.

DISCUSSION

The results indicated there was not an increase in intrinsic motivation when volunteers received a goal-setting intervention, and there was not a significant difference in the volunteers' scores after the goal-setting intervention. Due to a small sample statistical analysis could not be done for the Volunteer Function Inventory. Previous research has shown that goal-setting interventions help individuals set stronger goals by creating an action plan (Coaster et al., 2008), but the results in the current study showed that the goal-setting intervention did not help the intervention group make strong goals on the posttest. However, a limitation of the current study was a small sample size.

The three mains themes that appeared when interviewing the volunteers were career focused, communication, and the need of support from staff and follow volunteers arise. Many volunteers talked about how volunteering will help them know what part of the medical field they want to pursue. Along with wanting to volunteer for future career reasons, volunteers expressed that they wanted to increase their communication with other volunteers and medical staff. Volunteers expressed that they needed more support from other volunteers and staff to help with communication skills to interact with medical staff.

There were a few limitations in this study such as a small sample size, a low reliability on the value factor subscale on the Volunteer Function Inventory, and participant bias. Due to the small sample size, a statistical analyze was not run examining the Volunteer Function Inventory or the scores on the hospital volunteers' goals. It was difficult recruiting hospital volunteers because they could have stopped volunteering at any time during the study and no longer participant in this study. Instead descriptive statistics were reported for the Volunteer Function Inventory and the goals scores. There may have been some participant bias when participants self-reported their intrinsic motivation.

Future research should examine structures that hospital volunteering staff could put in place to help increase intrinsic motivation, such as increasing awareness of opportunities at orientation, have volunteers make a goal at orientation, and develop a better support system for volunteers. Based on the qualitative findings in the current study, volunteering staff can develop a better support system by having the volunteers communicate with each (i.e., current volunteers help train future volunteers) and give volunteers advice on how to communicate with staff members. Looking to the future, a larger sample size should be implemented and examining different volunteer age groups would be beneficial. Further exploration on hospital volunteer work is needed to better understand their motivation. Locke's (1996) study concluded that when people set easy goals they are less likely to stay committed to the goal. Future research could also examine the relations between goal difficulty and goal commitment.

REFERENCES

Atkinson, J. (1958). Toward experimental analysis of human motivation in terms of motives, expectancies, and incentives. In J. Atkinson (Ed.) *Motives in fantasy, action and society* (pp.288-305). Princeton, NJ: Van Nostrand.

Bandura, A. (1986). *Social foundations of thought and action: A social cognitive theory*. Englewood Cliffs: Prentice Hall.

Beehr, T. A., Bowling, N. A., LeGro, K., Porter, K., & Swader, W. M. (2010). Required volunteers: Community volunteerism among students in college classes. *Teaching of Psychology, 37*, 276-280. doi: 10.108/00986282.2010.510965.

Bloom, G. A., Loughead, T. M., & Senécal, J. (2008). A season-long team-building intervention: Examining the effects of team goal setting in cohesion. *Journal of Sport & Exercise Psychology, 30.* 186-199. doi: http://dx.doi.org/10.1123/jsep.30.2.186

Brannen, D. E. & Ibrahim, N. A., (2008). Implications of gender differences on the motivation to volunteers in hospitals. *Journal of Social Science Research, 33*, 1-8. doi: 10.1300/J079v22n0401

Clary, E. G., Copeland, J., Haugen, J., Miene. P., Ridge, R. D., Stukas. A. A.,…Snyder. M., et al. (1998). Understanding and assessing the motivations of volunteers a functional approach. *American Psychological Association, 77*, 1516-1530. Retrieved from psychnet.apa.org/journal/psp/74/6/1516

Coates, E., Hetherton, J., & MacLeod, A. K. (2008). Increasing well-being through teaching goal-setting and planning skills: Results of a brief intervention. *Journal of Happiness Studies, 9*. 185-196. doi:10.1007/s10902-007-9057-2.

Deci, E. L., Eghrari, H., Patrick, B. C., & Leone, D. (1994). Facilitating internalization: The self-determination theory perspective. *Journal of Personality, 62*, 119-142. doi:10.1111/j.1467-6494.tb00797.x

Deci, E. L. & Ryan, R. M. (1985). *Intrinsic motivation and self-determination in human behavior*. New York: Plenum.

Deci, E. L. & Ryan, R. M. (2000). The "what" and "why" of goal pursuit: human needs and the self-determination. *Psychological Inquiry, 11*, 227-268. doi:10.1207/S15327965PLI1104_01

Deci, E. L. & Ryan, R. M. (2008). Facilitating optimal motivation and psychological well-being across life domains. *Canadian Psychology, 49*(1), 4-23. doi:10.1037/0708-5591.49.1.14.

Dysvik, A. & Kuvass, B. (2013). Intrinsic and extrinsic motivation as predictors of work effort: the moderating role of achievement goals. *British Journal of Social Psychology, 52*, 412-430. doi:10.1111/j.2044-8309.2011.02090.x

Erez, M. (1977). Feedback: A necessary condition for the goal setting-performance relationship. *Journal of Applied Psychology, 62*(5), 624-627. doi:10.1037/0021-9010.62.5.624

Ferreria, M., Proença, J. F., & Proença, T. (2012). Motivation among hospital volunteers: an Empirical analysis in Portugal. *International Review on Public and Nonprofit Marketing, 9*, 137-152. doi: 10.1007/s12208-012-0083-3

Gagné, M. & Deci, E. L. (2005). Self-determination theory and work motivation. *Journal of Organizational Behavior, 26*, 331-362. doi:10.1002/job.322

Ghose, T. & Kassam, M. (2014). Motivations to volunteer among college students in India. *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations, 25*(1), 28- 45. doi:10.1007/s11266-012-9327-4

Gollwitzer, P. M. (1999). Implementation intentions: Strong effects of simple plans. *American Psychology, 54*, 493-503. doi:10.1037/0003-066X.54.7.493.

Gollwitzer, P. M., Sheeran, P., & Webb, T. L., (2005). The interplay between goal intensions and implementation intentions. *Society for Personality and Social Psychology, 31*(1), 87-98. doi:10.1177/0146167204271308.

Güntert, S. T., Kals, E., Strubel, I. T., & Wehner, T. (2016). The quality of volunteers' motives: Integrating the theory. *The Journal of Social Psychology, 156*, 310-324. doi:10/1080/00224545.2015.1135864

Kober, N. & Usher, A. (2012). Can goals motivate students? *Center on Education Policy.* Retrieved from: https://eric.ed.gov/?id=ED532668

Krenn, B., Würth, S., & Hergovich, A. (2013). The impact of feedback on goal setting and task performance: Testing the feedback

intervention theory. *Swiss Journal of Psychology/Schweizerische Zeitschrift Für Psychologie/Revue Suisse De Psychologie, 72*(2), 79-89. doi:10.1024/1421-0185/a000101.

Latham, G. P. & Locke, E. A., (2002). Building a practically useful theory of goal-setting and task motivation: A 35-year odyssey. *American Psychological Association, 57*(9), 705-717. doi:10.1037//0003-066X.57.9.705

LaPorte, R. & Nath, R. (1976). Role of performance goals in prose learning. *Journal of Educational Psychology, 68,* 260-264. doi:10.1037/0022-0663.68.3.260.

Locke, E. A., Chah, D., Harrison, S., & Lustgarten, N. (1989). Separating the effects of goal specificity from goal level. *Organizational Behavior and Human Performance, 43,* 270-287. doi:10.1016/0749-5978(89)90053-8.

Locke, E. A. (1996). Motivation through conscious goal setting. *Applied & Prevention Psychology, 5*, 117-124. doi:10.1016/S0962-1849(96)80005-9.

Matsui, T., Okada, A., & Inoshita, O. (1983). Mechanism of feedback affecting task performance. *Organizational Behavior of Human Performance, 31,* 114-122. doi:10.1016/0030-5073(83)90115-0

Mento, A., Locke, E., & Klein, H. (1992). Relationship of goal level to valence and instrumentality. *Journal of Applied Psychology, 77,* 395-405. In B. Staw &L. Cummings (Eds.) *Research in Organizational Behavior* (Vol. 12, pp. 73-109). Greenwich: JAI Press.

Scholnick, E. K. & Friedman, S. L. (1993). Planning in context: Developmental and situational considerations. *International Journal of Behavioral Development, 16,* 145-167. doi:10.1177/016502549301600204

Tschirhart, M., Mesch, D. J., Perry, J. L., Miller, T. K., & Lee, G. (2001). Stipended volunteers: Their goals, experiences, satisfaction, and likelihood of future service. *Nonprofit and Voluntary Sector Quarterly, 30*(3), 422-443. doi:10.1177/0899764001303002.

Wood, R., & Locke, E. (1990). Goal setting and strategy effects on complex task. *Research in Organizational Behavior, 12,* 73-109. Retrieved from: https://www.researchgate.net/publication/285274405_Goal_setting_and_strategy_effects_on_complex_tasks

Worth, K. A. (2005). The role of goals and motives in understanding the processes of volunteerism. (Doctoral dissertation) Retrieved from ProQuest Dissertation and Thesis. (UMI NO.3194345)