Values And Problem Behaviors In Hong Kong Adolescents

Phebe Karen Lam
Wayne State University

Follow this and additional works at: http://digitalcommons.wayne.edu/oa_dissertations
Part of the Educational Psychology Commons, and the Psychology Commons

Recommended Citation
VALUES AND PROBLEM BEHAVIORS IN HONG KONG ADOLESCENTS

by

PHEBE KAREN LAM

DISSERTATION

Submitted to the Graduate School

of Wayne State University,

Detroit, Michigan

in partial fulfillment of the requirements

for the degree of

DOCTOR OF PHILOSOPHY

2010

MAJOR: EDUCATIONAL PSYCHOLOGY

________________________________________
Advisor Date

________________________________________

________________________________________

________________________________________
DEDICATION

Lorenzo and Gianluca, this dissertation is dedicated to you, the two greatest loves of my life. Without you, my accomplishment would not have been possible. Life is full of surprises, laughter, joy, and tears; I am so blessed to be traveling on life’s journey together as a family.
ACKNOWLEDGMENTS

There are many important people I wish to acknowledge in the completion of my dissertation. First, I would like to thank Dr. Stephen Hillman for his mentorship and supervision throughout my graduate studies and in all of my endeavors at Wayne State University. Dr. Hillman has provided me with continuous support in my graduate and professional work, his expertise and insight has broadened my intellectual horizons in the area of education and psychology. Additionally, I would like to thank Drs. Barry Markman, Jina Yoon, and Ira Firestone for serving on my committee and providing me with insight, feedback, and support throughout the dissertation’s proposal and defense. I would also like to thank all the professors at Wayne State University in the Marriage and Family Psychology and the Educational Psychology programs, for forming the foundation of my professional career.

I want to sincerely thank the school administrators and all of my participants for sharing their thoughts and feelings about their journey through adolescence with me. Their contribution has enabled me to use my knowledge to facilitate and extend the literature on Chinese adolescents living in Hong Kong. Without their support, I would not have been able to complete my dissertation.

I want to thank Dr. Sylvie Naar-King, who I have worked with for the last decade. As a mentor, she has given me invaluable insight in the area of pediatric and adolescent clinical research; but more importantly, she has been an endearing friend who has watched me grow professionally and personally. I am grateful for her support and for all the opportunities that she has given me. I also want to thank Dr. Kathryn Wright; she is an inspiration to me and has taught me empathy and compassion through her work. Dr. Jill Meade has also been a great mentor, teaching me skills in clinical psychology and giving me the opportunity to serve children and
their families affected by HIV/AIDS. Lastly, I would like to thank Wayne State University’s Pediatric Prevention Research Center for their continual support in my professional endeavors.

I would like to give special thanks to Dr. Bulent Ozkan, Ms. Julie Smith, and Dr. Yan Guo for giving me the confidence and appreciation for statistical analyses. I am no longer controlled by my fear of regressions, chi square tests, t-tests, and correlations.

To my cherished friends, I am immensely grateful for your never-ending support and encouragement. Dr. Jacqueline Hui, you keep me grounded and continually remind me to believe in my abilities and encourage me to keep moving forward. Veronica Connors, my colleague and friend for the past ten years, I admire your integrity, but most importantly, you make going to work fun. Finally, Dr. Robert Kender, together, we travelled the last stretch of road towards our graduation, and finally have reached The Day. You have truly understood my frustration, my joy, and my anguish throughout these last two years. Thank you for your support and guidance, but most of all for reminding me that I am not alone in all of this…I am forever grateful.

No words can be written to convey my love and admiration for my family. Mom, Dad, you have given me unconditional love and support. You have molded me into the person I am today, instilling in me the importance of God, family, education, hard work, and believing that I can do anything. I love you deeply and am grateful for all of the sacrifices you made for me. Mom, you are the rock of our family, you constantly amaze me and I am so proud of all of your accomplishments. Dad, without many words, you have guided me to walk in the lighted and straight path. Always giving us freedom to choose our beliefs and thoughts, and also always there to support our failures.

My sisters, Sarah and Anna, you are my best friends and my love for the both of you is overwhelming. Sarah, through everything, you have always been there, in front of me, beside
me, and sometimes behind me…always there. Anna, you have given me such joy, I am proud of you always, and am so thankful that I can be myself when I am around you. My brother-in-law, Xavier, I am truly happy that you give my sister Sarah such joy and love. You have travelled with my family through some adventurous times; I am thrilled I finally have a big brother. Mark, your love for my sister Anna makes her an even more beautiful and generous person, for that, I am thankful.

My grandparents are no longer with my family today, but the memories I have of them will forever be a part of me. All four of them were particularly influential during critical periods of my development. I am most grateful for their endless efforts in passing down cultural traditions and values, all of which I hold dear in my heart and intend to pass on to my children.

To my mother- and father-in-law, Ma, Papá, I love you both with all of my heart. From the moment Lorenzo brought me into your family, I have felt like a daughter to you. Your unconditional acceptance and love has been a great source of happiness and joy for me. Without your support and your love for Gianluca, I would not have been able to complete my studies. I am forever grateful to you both. To my sister- and brother-in-laws, thank you for the great moments we share. Loredana and Sabrina, as sisters to Lorenzo, your respect and love for him touch my heart. To my nieces and nephews, Alessia, Nikki, Lorenzo, Matteo, Francesco, James, and Rita, I look forward to watching you grow and mature.

Finally, to my husband Lorenzo, and my son Gianluca, no words can express my love for you both. Lorenzo, you are the love of my life, you amaze me and I love you more and more as each day goes by. Your encouragement, patience, and unconditional love have made my accomplishments possible. You are truly a remarkable husband and father. After a long day at the office, you still have the energy when you come home to make dinner and spend time with
us. My son, Gianluca, we waited so patiently for you to arrive, and at the perfect moment you were there, the best Valentine’s Day gift ever. You are the sunshine of my life; your presence constantly reminds me of the miracle of life and love. I love every moment with you, from the moment you wake me up with a kiss to watching you sleep angelically at the end of the day. Thank you for patiently playing beside me while I worked endlessly on the computer. Lorenzo and Gianluca, you make me strive to become a better wife, mother, and person. I love you both, always and no matter what.
# TABLE OF CONTENTS

Dedication..........................................................................................................................ii

Acknowledgements.............................................................................................................iii

List of Tables.......................................................................................................................xi

List of Figures.....................................................................................................................xiii

CHAPTER 1  Introduction......................................................................................................1

  Statement of Problem.......................................................................................................2

  Need for Research............................................................................................................10

  Purpose of Study..............................................................................................................12

  Research Questions..........................................................................................................13

  Outline of the Study.........................................................................................................13

  Significance of the Research............................................................................................13

  Summary..........................................................................................................................14

CHAPTER 2  Theoretical Framework....................................................................................15

  Problem Behavior Theory...............................................................................................16

  The Appeal of Problem Behavior Theory......................................................................18

  The Concept of Proneness in Problem Behavior Theory..............................................18

  Psychosocial Proneness and Proximal and Distal Variables........................................20

  Theoretical Framework Revisions Since 1977...............................................................20

  Psychosocial Explanatory Systems...............................................................................22

  Covariance of Multiple Problem Behaviors.................................................................24

    Critiques of the Syndrome of Behaviors....................................................................27

  Sensation Seeking Theory..............................................................................................29
LIST OF TABLES

Table 1: Ten basic values and their central motivational goal..............................................40

Table 2: Four higher-order values and the broad motivational goal shared by the basic values they are composed of.................................................................43

Table 3: Two basic dimensions of the higher-order values..................................................44

Table 4: Basic demographics of Wong Shui Chi Secondary School and Bethel High School....71

Table 5: Frequency distribution in percentages of smoking behavior category among the total sample, and the sample by gender and school band level.................85

Table 6: Frequency distribution in percentages of alcohol use behavior category among the total sample, and the sample by gender and school band level.................86

Table 7: Descriptive statistics of the problem behavior outcome of delinquency in the total sample and differences between gender and school band level.............88

Table 8: Descriptive statistics of the individual delinquent behaviors in the total sample......89

Table 9: Crosstabulation of Age and Smoking Behavior Category......................................90

Table 10: Crosstabulation of Age and Alcohol Use Behavior Category...............................91

Table 11: One-way Analysis of Variance of Age by Delinquency.......................................92

Table 12: Crosstabulation of Country of Origin and Smoking Behavior Category................93

Table 13: Crosstabulation of Country of Origin and Alcohol Use Behavior Category .............94

Table 14: Summary of Independent-Samples t Test to Compare Delinquency by Country of Origin.................................................................................................................95

Table 15: Crosstabulation of Involvement in Extracurricular/Community Activities and Smoking Behavior Category.................................................................96

Table 16: Crosstabulation of Involvement in Extracurricular/Community Activities and Alcohol Use Behavior Category.................................................................96

Table 17: One-way Analysis of Variance of Involvement in Extracurricular/Community Activities by Delinquency.................................................................97

Table 18: Crosstabulation of Employment and Smoking Behavior Category.......................98
Table 19: Crosstabulation of Employment and Alcohol Use Behavior Category

Table 20: Summary of Independent-Samples t Test to Compare Delinquency by Employment Status

Table 21: Descriptive Statistics of Main Study Variables in the Total Sample and Differences Between Gender and School Band Level

Table 22: Intercorrelations Between Predictor Variables and Problem Behavior Outcome Variables

Table 23: Summary of Linear Regression Analysis for Variables Predicting Delinquency (N = 1236)

Table 24: Summary of Multinomial Logistic Regression Analysis for Variables Predicting Smoking Behavior (N = 1237)

Table 25: Summary of Multinomial Logistic Regression Analysis for Variables Predicting Alcohol Use (N = 1237)

Table 26: Summary of Independent-Samples t Test to Compare Delinquency by School Band Level

Table 27: Crosstabulation of Smoking by School Band Level

Table 28: Crosstabulation of Alcohol Use by School Band Level
LIST OF FIGURES

Figure 1: Relationships between conceptual domains of risk and protective mechanisms…...21

Figure 2: Theoretical model of relations among ten motivational types of values……………42

Figure 3: Problem behaviors in adolescents and the effect of risk and protective factors on these behaviors………………………………………………………………………………..65

Figure 4: Hypotheses and Statistical Analysis…………………………………………………..66
CHAPTER 1: INTRODUCTION

As estimated by the World Health Organization (WHO, 2009), one in every five people in the world fall in the age range of 10 to 19 years (1.2 billion worldwide), the developmental period called adolescence. Having survived the diseases of early childhood, adolescents are considered to be the portrait of health and life; thus death seems almost implausible. However, statistics provide evidence that many adolescents die prematurely. An estimated 1.7 million adolescents succumb to death every year. These deaths are mainly due to behaviors that contribute to unintentional injuries and violence, motor-vehicle accidents, suicide, and risk behaviors (ex., tobacco use, substance use, risky sexual activity) that are either preventable or treatable (CDC-YRBSS, 2006; WHO, 2008). The overall health during adulthood is significantly affected by the habits and lifestyle choices that begin during adolescence. The consequences of these choices account for an estimated 70% of premature deaths during adulthood. This ultimately leads to the critical question: why are youths, the portrait of health and life, at risk for life-compromising outcomes?

Engaging in risk behaviors remains a leading problem among adolescents worldwide. As reported by WHO (2009), globally, 16 million adolescent girls (15 to 19 years old) give birth each year (11% of births worldwide). Youth between the ages of 15 to 24 years account for nearly half of all new HIV infections worldwide, that is, over 7000 new infections daily (WHO, 2008; WHO-CAH, 2006b). The second leading cause of death among 15 to 19 year olds is suicide, with more than 90,000 adolescent deaths each year due to suicides and an estimated 4 million reported attempts (WHO, 2008; WHO-CAH, 2006b). In numerous countries, the leading cause of death among boys is road traffic accidents. Early initiation of alcohol use during adolescence increases the chances of developing alcohol dependence by four times as an adult.

Risk behavior is defined socially as a problem, and is undesirable by societal norms and conventions; thus their occurrence elicits negative social sanctions (Jessor, 1998). Problem behavior includes delinquency, drug use, alcohol abuse, tobacco use, early sexual activity, and risky driving. Recent investigations into problem behavior also include behavior that compromise health development, these include inadequate social role performance (ex., poor school progress), psychopathology (ex., depression), and health-compromising behaviors (ex., poor dietary practices or insufficient exercise).

**Statement of the Problem**

As adolescents make their journey to adulthood, they will endure the normative physical, cognitive, and social transitions that are saturated with confusion and chaos. Maneuvering through this challenging time period places them at higher risk for negative outcomes as compared to other developmental periods in their lives. Adolescents are astonished by the increased amount of freedom and privileges that the transition to adulthood brings, but unfortunately are seemingly oblivious to the also increasing level of expectation, obligation and responsibility that this new found autonomy brings (Steinberg, 2008). Since the biological changes of puberty usually occurs about a year before the start of the cognitive changes, adult society may naturally place more expectations on the adolescent due to their mature physical stature (Steinberg, 2008). They assume that adolescents have superb ability in exercising their autonomy, through responsible decision-making in matters such as sexual relationships, alcohol, tobacco, and illicit drug use. Unfortunately, most adolescents are not developmentally prepared
to evaluate the consequences of engaging in these risk behaviors. Furthermore, there are insufficient guidance and support in helping them acquire these vital skills necessary to make informed and responsible life decisions.

These real life decisions involve daily choices between behaviors that are healthy and unhealthy. Many of the choices encountered such as drug use, alcohol consumption, cigarette smoking, weapon carrying, and violence, are problem behaviors. Furthermore, these problem behaviors are associated with one another, resulting in multiplication of risk rather than simply additional hazard (Griffiths et al., 2006; Kahn, Kaplowitz, Goodman, & Emans, 2002; Maxwell, 2002).

Adolescent development is universal. Whether an adolescent lives in North America, Africa or China, this transition to adulthood is inevitable. Chinese adolescents living in Hong Kong, as with all adolescents in the world, are not immune to the risk of engaging in health compromising behaviors. Although engagement in problem behaviors among Hong Kong adolescents is low compared to their Western counterparts (Le, Goebert, & Wallen, 2009; Lee et al., 2005; Lee & Tsang, 2004; Lee et al., 2009; Lo & Globetti, 1999), there has been an increase in that past 10 years. Data from the Hong Kong Police Force (2009) shows an increase in the number of arrests from 2009 (January to June) to the same period in 2008. Furthermore, there has been a rise in juvenile and young persons arrests from 2002 to 2008. The statistics from the Hong Kong Police will be further discussed in Chapter 2. Since 1999, the Centre for Health Education and Health Promotion at The Chinese University of Hong Kong has been administering the CDC’s Youth Risk Behaviors Survey (YRBS) to a sample of Hong Kong adolescents to monitor the trend of youth health risk behaviors. Lee et al. (2009) published results from 2003-2004 (most current statistics) showing that 11.1% felt sad/hopeless, 12.2%
engaged in physical fights (one or more in the past year), 3.6% of adolescents (approximately 11 to 18 years old) were heavy smokers (more than 20 cigarettes in the past month), 7.4% were binge drinkers (5 or more drinks of alcohol at one time in the past month), 4.1% used illicit drugs, 5.9% had early sexual experiences, and 25.1% had suicide ideation or behavior (4.2% attempting suicide).

Suicide remains the leading cause of death among adolescents in Hong Kong (Chan et al., 2009; Lam et al., 2004a; 2004b; Lee et al., 2009; Yip & Chiu, 1998; Yip et al., 2004). In several Hong Kong studies, adolescent problem behaviors, such as heavy smoking, use of substances (alcohol and drugs), early sexual experience, internalizing problem behaviors (depressive and withdrawn symptoms), and externalizing problem behaviors (school problems and aggressive behavior) were all significant risk factors in suicidal thoughts and attempts (Chan et al., 2009; Ho, Leung, Hung, Lee, & Tang, 2000; Lam et al., 2004b; Lee et al., 2009; Wong et al., 2008; Wong, Stewart, Ho, & Lam, 2007; Wong, Stewart, Ho, Rao, & Lam, 2005; Yip et al., 2004). In a study comparing problem behaviors of adolescents in seven countries (including the U.S.A. and Hong Kong), problem behaviors were measured by the Youth Self-Report, and included categories of behavior such as: internalizing, externalizing, withdrawn, somatic complaints, anxious/depressed, social problems, thought problems, attention problems, delinquent behavior, and aggressive behavior (Verhulst et al., 2003). Hong Kong adolescents scored higher than the U.S. adolescents in internalizing, withdrawn, somatic complaints, anxious/depressed, social problems, attention problems, and aggressive behavior, and scored lower than U.S. adolescents in externalizing and delinquent behaviors.

Arnett and Jensen’s (1994) model of health risk behavior showed that there were differences in engagement in health-endangering behaviors between Western and non-Western
adolescents. They proposed that socialization interacts with developmental characteristics in adolescence to affect the types and rates of problem behaviors within certain cultures (Arnett, 1999; Arnett & Jensen, 1994). In Western culture, where individualism and self-expressiveness are valued, it promotes a less restrictive society thus adolescents tend to engage in more problem behaviors. In cultures where obedience, conformity, and adherence to social standards are emphasized (as in Hong Kong), adolescents tend to engage in less problem behaviors because deviance from expected norms (e.g., academic achievement) is less tolerated (Feldman & Rosenthal, 1991; Stewart et al., 1998).

The low frequency of problem behaviors reported in Hong Kong raises the possibility that such behaviors indicate deviance more reliably than in the West (Lam, Stewart, & Ho, 2001a; Lam, Stewart, Ho, & Youth Sexuality Study Task Force, 2001b; Lo & Globetti, 1999). In Western cultures, experimentation with certain problem behaviors are considered to be normative and an essential part of development during adolescence (Baumrind, 1991); however, in the Chinese culture, adolescent problem behaviors are not considered normative, and is considered a source of shame for the family (Stigler, Smith, & Mao, 1985). When you take into account the Chinese cultural norms, those who participate in problem behaviors are considered deviants and thus more seriously violate the normative behavior that is expected from adolescents. This disparity in the way the culture sends messages to the adolescents, and the normative urge to participate in risky behavior to express an adolescent’s autonomy will cause some adolescents turmoil.

Although there exists, a low incidence of problem behaviors in adolescents in Hong Kong, these adolescents are not immune to the need or desire to engage in risky behaviors. Zuckerman (2007) gives an excellent explanation for why individuals engage in problem
behaviors. To varying degrees, individuals pursue activities that offer novelty, variety, and intensity. While some people find that everyday pace of life provides adequate variety, others desire stimulation to such a degree that they seek out deviant activities that are not sanctioned by societal norms and potentially have deleterious consequences. All individuals have a need to maintain an optimal state of arousal in the reticular activating system (located in the core of the brain stem) and select activities or situations in order to meet that need. For high sensation-seekers, the types of activities that meet this need are often inherently risky. Although the biological basis for sensation seeking is strong, researchers have cautioned the underestimation of the influence of the social environment and other psychological influences on an individual’s need for novelty or sensation.

Studies on adolescent smoking, drinking and delinquency have empirically supported its relationship with underlying adolescent psychological problem behavior. These studies have focused mainly on two broadband psychological syndromes of behaviors that have the propensity to occur together (Wicks-Nelson & Israel, 2003). The first group is the externalizing syndrome of behaviors (e.g., rule-breaking behavior, aggressive behavior, etc), which are manifested in an adolescent’s outward behavior and reflect the adolescent negatively acting on the external environment (Achenbach & Rescorla, 2001; Wicks-Nelson & Israel, 2003). The second group is the internalizing syndrome of behaviors (e.g., anxious/depressed, withdrawn/depressed, somatic complaints, etc), behaviors that more centrally affect the adolescent’s internal psychological environment rather than the external world (Achenbach & Rescorla, 2001; Wicks-Nelson & Israel, 2003). When the general public thinks of adolescent behavioral problems, they tend to focus on externalizing behaviors. Possible reasons for this are that many adolescents become involved in some level of antisocial behavior during the course of
their adolescence, and that externalizing problem behavior is more visible, and has more direct negative consequence for individuals and for the community (Moffit, 1993; Resnick & Burt, 1996). In contrast, symptoms of internalizing problems, though also fairly common among adolescents (depression affects between 7% and 33% of adolescents), often remain undetected by adolescents’ social environment (Petersen, Richmond, & Leffert, 1993). The consequences of internalizing problems are also hardly less important: Depression is a strong predictor of suicidal ideation (CDC, 2007; WHO, 2008; WHO-CAH, 2006a). Thus, this study focuses on both psychological syndromes of problem behavior as predictors of problem behavior outcomes. In the literature, there is evidence that early internalizing problem behaviors (e.g., depressive symptoms), attention problems, and rule-breaking and aggressive behavior (e.g., Conduct Disorder or Oppositional Defiant Disorder symptoms) predict smoking, alcohol use, and delinquent behaviors (Burke, Loeber, White, Stouthammer-Loeber, & Pardini, 2007; Clark, Parker, & Lynch, 1999; Hall, Degenhardt, & Teesson, 2009; Henry et al., 1993; Hunt & Hopko, 2009; Kaplow, Curran, Angold, & Costello, 2001; Mason & Windle, 2002; Molina & Pelham, 2003; Owens & Shippee, 2009; Pardini, Lochman, & Wells, 2004; Pardini, White, & Stouthammer-Loeber, 2007; Prinstein & La Greca, 2009; Saraceno, Munafò, Heron, Craddock, & van den Bree, 2009; Skeer, McCormick, Normand, Buka, & Gilman, 2009; Sung, Erkanli, Angold, & Costello, 2004; Tillfors, El-Khoury, Stein, & Trost, 2009; Weinberg, Rahdert, Colliver, & Myer, 1998). Both sensation seeking and psychological problem behavior and its relationship with adolescent problem behavior have been extensively studied in the literature. Specifically, having elevated sensation seeking levels and a propensity to psychological problem behaviors has empirically exposed its deleterious effects on adolescent behavior.

Problem Behavior Theory (Donovan, Jessor, & Costa, 1991) presents a notable
theoretical framework that accounts for variation in adolescent involvement in an array of problem behaviors as well as conventional behaviors. This framework links risk and protective factors in a single model to different risk behaviors (Jessor, 1998). There are five systems of risk and protective factors (i.e., biological/genetic, social environment, perceived environment, personality, and behavior) that influence the manifestation of risk behaviors and consequently lead to health-life compromising outcomes. These risk and protective factors described in Jessor’s Problem Behavior Theory place an adolescent at risk for problem behaviors, but more importantly, have the same effect on an adolescent regardless of the adolescent’s sex, social class, or ethnicity (Peterson, Hawkins, Abbott, & Catalano, 1994).

What leads an individual to succumb to risk factors or to heed to protective factors? What are the internal mechanisms that adolescents use to guide them as they make their decisions whether to engage in risky behaviors or not? To answer these questions, it is important to look at risk and protective factors and an individual’s value orientation and how they are incorporated into an individual’s manner of processing during behavioral decision-making.

Researchers have identified certain value orientations and value hierarchies as important change agents in decreasing engagement in risk behaviors. These studies suggest that a value priority, focusing on the future and societal view of life, can be associated with protective factors and less health comprising in adolescents (Dubow, Arnett, Smith, & Ippolito, 2001). Values systems are a central concept in understanding and predicting human behavior. Value differences have been shown to predict important attitudes relating to social, environmental, and behavioral attitudes (Rokeach, 2003). Values orientation research has been conducted to identify predictors of drug use and abuse and to develop prevention interventions (Nagel, Mayton, & Walner, 1995). Researchers have compared the value orientations of drug users and non-users. Toler (1975)
found that non-users have higher values placed upon societal goals (e.g., world peace, equality, freedom, and national security) compared to drug users whose values emphasized more personalized goals (e.g., exciting life, inner harmony, mature love, and wisdom). Other researchers reported that a more present-oriented view of life has been associated with individuals with an increased incidence of drug use or risk taking behaviors. Those not engaging in risk taking behaviors were more future-oriented (Jones, 1973).

According to Schwartz’s Values Theory, values are conceptions of desirable goals that are prioritized and guide the way an individual selects or evaluates actions, policies, people and events (Schwartz, 1992). This theoretical model consisting of 10 basic values (Power, Self-Direction, Achievement, Hedonism, Stimulation, Universalism, Benevolence, Tradition, Conformity, and Security) has been empirically established in the psychology of values as a comprehensive, cross-culturally stable model that can predict a series of external constructs. This comprehensive set of core values is recognized in cultures around the world (validated in more than 67 nations). People within and between cultures differ with regard to the importance they attribute to a specific value (Schwartz & Bardi, 2001).

Schwartz’ Values Theory has been applied to behavioral research in areas such as prosocial, antisocial, environmental, political, consumer, and intellectual behaviors (Schwartz & Bardi, 2001). More specifically, researchers have examined the correlation between value-prioritization and specific “real-life” behaviors, including university course selection (Feather, 1988), voting (Schwartz, 1996), willingness to interact with members of an opposing sociopolitical group (Gandel, Sagiv, & Wrzesniewshki, 2005), and substance use behaviors (Dollinger & Kobayashi, 2003). A study conducted among male college students found that heavy drinkers compared to light drinkers/abstainers were more likely to endorse Hedonism and Stimulation
(Dollinger & Kobayashi, 2003). These results suggest that values may play a role predicting engagement in problem behaviors.

**Need for Research**

Substantial and growing research supports the concept of universally recognized values and their general relationship with behavior. However, the research has focused primarily on emerging adults (ages 18 to 22) and adults, rather than adolescents (Arnett, 2000; Steinberg, 2008). Given that the adolescent years (13-18) provide the first opportunities for most children to choose between risk and protective behaviors, the values-behavior relationship becomes of particular importance to examine during this developmental period. To date, the research regarding values has not explored a wide range of risk and protective factors and problem behaviors. Moreover, even if values are shown to be associated with increased or decreased likelihood of involvement in problem behaviors, the relative contribution of values against the backdrop of other risk and protective factors is of importance.

Substantial research literature establishes the covariance among problem behaviors (Jessor & Jessor, 1977; Donovan, Jessor, & Costa, 1988); that is if an individual is engaging in one problem behavior, they are more likely to engage in another problem behavior. Further, prior experience in a problem behavior is a strong predictor of future intention to be involved in that problem behavior. Research has consistently found that early onset of alcohol and drug use in adolescence has been linked to adult substance use disorders (Zucker et al., 2006). Moreover, the early use of alcohol adversely affects academic achievement and school behaviors (Crum et al., 2006). Finally, although the Portrait Values Questionnaire and the value constructs reflected therein have been assessed in East-Asian countries (i.e., Hong Kong, China, Singapore, and Taiwan); they have not been used to explain adolescent problems behaviors in these countries.
Although several local studies in the past decade have demonstrated that students in Hong Kong high schools, engage in problem behaviors (Goldberg, 2003; Lam, Chung, Betson, Wong, & Hedley, 1998; Lam et al., 2001a; 2001b; Lam et al., 2004a; 2004b; Lo & Globetti, 1999; Shek, 1997a; 1997b; 1997c; Shek, 2004a; 2004b; 2004c; 2007), there are no comprehensive data focusing on risk factors specifically in adolescents attending schools with students of differing academic abilities. The majority of resources and attention in an achievement-oriented culture (as in Hong Kong) is given to high achieving adolescents (i.e., band one or two schools) who society views as the hope for their future, and for those adolescents who are low-achievers (band three schools) and especially those who also engage in problem behaviors, they are ostracized and isolated from society.

One study in particular examined national achievement tests in 484 Hong Kong high school students, and found that highly curious students who had higher test scores (when compared to less curious peers) were also students who perceived their school environment as academically challenging (Kashdan & Yuen, 2007). Just being academically curious does not predict higher grades or test scores. These individuals with high levels of curiosity tend to be attracted to experiences that are novel and challenging; but more importantly, their environment needs to also be supportive of this value priority. If not, these individuals may quickly lose their motivation to succeed, which is especially detrimental in a competitive and success driven culture such as Hong Kong. Academic failure not only brings shame to themselves and their family, but may have deleterious effects on their actual career endeavors. Now, consider the uphill battle that adolescents who attend a lower ability level school must face: an academically less challenging school environment, and also the stigma of being underachievers and a failure.

Another study found that adolescents who viewed their future, school, and work
opportunities as negative or hopeless are more likely to engage in drug use and have teenage pregnancies than those who had a positive outlook on their future (Trad, 1993). The health/life-compromising consequences of engaging in problem behaviors can control the future of the adolescent; thus there needs to be research on factors that may lead adolescents to engage in problem behaviors. We need to ensure that no adolescents are “left behind” and permanently labeled as “deviants”, with no hope for the future.

The future of society is at-risk because these adolescents are considered “lost” and interventions are not tailored to the specific needs of these adolescents. These adolescents are marginalized and thus isolated from the adult culture/institutions. Furthermore, there is a need to modify current models to fit the culture in the study; due to the modernization of the current Chinese culture and the influence of the West, current beliefs on Chinese adolescents need to be reviewed to account for Western influences (more permissive attitudes towards problem behaviors).

**Purpose of Study**

There is mounting evidence that individual-level characteristics and also contextual factors interact to influence an adolescent’s susceptibility to engage in problem behaviors. This interrelated construct of problem behavior includes: smoking, drinking, and delinquency. Therefore, the purpose of this study is threefold. The first purpose is to examine the prevalence of problem behaviors among a cross-sectional sample Hong Kong adolescents studying in high school. The second purpose is to explore the relationship between the predictive variables and problem behavior outcomes. These associations are theoretically based on Jessor’s Problem Behavior Theory (1998), Sensation Seeking Theory (Zuckerman, 2007), and Schwartz’ Values Theory (1992). The final purpose is to evaluate the relationship between enrollment in different
ability level high school in Hong Kong and the problem behavior outcomes among these adolescents.

**Research Questions**

This study asks the following research questions: (1) What is the prevalence of problem behaviors in Chinese adolescents living in Hong Kong? (2) What is the relation between demographic factors, predictive variables, and problem behavior outcomes among these adolescents? (3) What is the relation between enrollment in different ability level high schools in Hong Kong and problem behavior outcomes?

**Outline of the Study**

The current study examined a selection of variables and problem behaviors from a representative sample of Chinese adolescents living in Hong Kong from two high schools with students of differing academic ability levels (i.e., band one & three). Sensation seeking, psychological problem behavior, value orientations, and various other factors were examined in this sample in relation to the propensity to engage in problem behaviors. Using secondary analysis of the data, the research questions and the hypothesized relationships were tested. The data used for the current study was completed by anonymous data collection. Data was gathered through the administration of the survey questionnaire to adolescents attending two high schools in Hong Kong from Form 2 to Form 7 (ages 13 to 18).

**Significance of the Research**

Researchers must possess appropriate and comprehensive data in relation to the specific behaviors being examined to be able to develop appropriate preventative and therapeutic interventions. Historically, the responsibility of the initial development of interventions has been placed on researchers. Gathering information on the prevalence of certain behaviors and its affect
on an individual and their context are prerequisites to the development of developmentally and culturally competent interventions.

This study will significantly contribute to the body of knowledge on the prevalence of Chinese adolescent problem behaviors in Hong Kong. The association between specific risk factors and problem behaviors was reviewed; thereby contributing to a predictive model of problem behaviors. Although research has indicated that values orientation can predict whether a person will participate in certain problem behaviors, such as tobacco and alcohol use (Lewis, Phillippi, & Neighbors, 2007; Toler, 1975), the relationship of values orientation to those, and other types of problem behaviors has not yet been reported in adolescents in Hong Kong.

This ability to examine a deviant or problem behavior within the larger framework of associated behaviors is an important factor in the current researcher’s decision to use the theory of problem behavior as a base for a model. The findings may identify factors specific to Hong Kong adolescents that will enable the development of preventive interventions designed to promote early identification of youths at high-risk. Furthermore, the development of therapeutic interventions may alter adolescent risk variables; thereby changing the trajectories which lead an adolescent to the initiation of or continued health risk behaviors in adulthood

Summary

This introductory chapter has defined the current state of the problem, and has explained the need and purpose of this study. A brief overview of the research questions, along with outline of the study has also been presented. And finally, the significance to society and education has been delineated. In the next chapter, there will be a review of the guiding frameworks used for the theoretical basis of this research: Problem Behavior Theory (Jessor, 1998), Sensation Seeking Theory (Zuckerman, 2007), and the Schwartz Values Theory (1992).
Chapter 2: Theoretical Framework for Research

Rationale behind an adolescents’ enhanced risk for engaging in deviant behaviors has been studied extensively by psychologists. Problem Behavior Theory and Sensation Seeking Theory of risk behavior have become widely accepted in the psychological literature. Additionally, in recent years, Values System Theory has emerged as a validated framework for understanding human behavior. These three theoretical foundations will provide the underpinning for the model of problem behavior proposed in this study. This study will integrate components of the these three theories to enhance our current understanding of the mechanisms through which adolescents of Chinese background living in Hong Kong become involved in problem behavior.

The time period during which a child becomes transformed into an adult is known as adolescence (Steinberg, 2008). Research on adolescent development has consistently established that this is a period of biological, cognitive, and social change. During this transition, adolescents become more susceptible to physical, psychological, and emotional vulnerabilities. This state of heightened vulnerability increases the chance that an adolescent will engage in problem behaviors. The development of problem behaviors is complex, dynamic, and changes across development. Whether the adolescent opposes or accepts the path towards deviance, this is largely affected by risk and protective factors. Risk factors and protective factors belonging to a range of biological, psychological, behavioral, and social domains create forces pushing the adolescent towards and pulling them away from engagement in problem behavior. Thus, one can say that risk factors set tumultuous obstructions while protective factors shield the adolescent from harm.
**Problem Behavior Theory**

The conceptual framework of Problem Behavior Theory (PBT; Jessor & Jessor, 1977) is essentially based on the principle that learned behavior is purposeful and essential in attaining a desired goal. An adolescent’s social culture provides the standards and expectations of behavior; this, in combination with the adolescent’s personal experiences forms their values (Jessor & Jessor, 1977; Jessor, 1987; Jessor, 1998). The initial model of problem behavior (Jessor, Graves, & Hanson, 1968) was based on the social learning theory of values and expectations (Rotter, 1960) and the study of anomie, deviant behavior resulting from the discrepancy between social goals and the means to attain this goal (Merton, 1957). From these theoretical viewpoints, Jessor R. and Jessor S. L. (1977) developed the Problem Behavior Theory (PBT); a psychosocial model of adolescent risk behavior. Problem Behavior Theory (Jessor & Jessor, 1977) states that adolescent risk behavior is a product of the interaction of risk factors arising from the personality, perceived environment, and behavior domains of personal interaction. Demographic variables such as age and gender were only important insofar as they are mediated by other psychosocial variables. The over arching thesis of the PBT is that behaviors are goal directed, and to obtain those goals, an individual must act in either a conforming or a deviant manner.

In 1977, a five year longitudinal research study by Jessor and Jessor (the second phase of the 1968 cross-sectional study) tested the model of problem behavior. Behaviors of drug use, sexual activity, alcohol use/misuse, activism and protest (common in the 1970s), and general deviance (i.e., stealing, lying, and aggression) were assessed in 400 high school and 200 college students, age ranging from 12 to 22 years. Significant results indicated that the interrelationships between these behaviors and certain psychosocial aspects of adolescent development could be explained by PBT. That is, approximately 50% of the variance in the composite measure of
adolescent problem behavior was accounted for by PBT. These deviant behaviors were therein identified as “problem behaviors”: a constellation of the culturally salient behaviors identified as socially problematic based on current and prevailing sociocultural norms (legal or personal in nature).

Jessor’s Problem Behavior Theory (1992) was further developed to incorporate some aspects of an ecological approach that follows the socioecological theory originally proposed by Bronfenbrenner (1979). Thus in examining adolescent behaviors, one must encompass the multifaceted areas of an adolescent’s everyday life, particularly within the contexts of peers, family, school, and neighborhood (Donovan & Jessor, 1985; Jessor, 1992; 1998). In essence, an individual's experiences are influenced and shaped by their environment; additionally, individuals will also shape the environment in which they interact. Problem Behavior Theory is considered to be a comprehensive framework (Jessor, Donovan, & Costa, 1991) that incorporates both individual differences (i.e., attitudes, values, and beliefs) and various social contexts that are most significant to the adolescent (i.e., peers, family, school, and neighborhood). Jessor, Van Den Bos, Vanderryn, Costa, and Turbin (1995), for example, formulated a socioecological model to predict problem behaviors which included contextual risk factors such as peers’ engagement in problem behavior, as well as individual factors, such as the adolescent’s low expectations for success. Results from their study and from other studies (Costa, Jessor, Donovan, & Fortenberry, 1995; Costa, Jessor, & Turbin, 2007; Donovan et al., 1991; Fortenberry, Costa, Jessor, & Donovan, 1997; Jessor, Donovan, & Costa, 1986; Jessor, Turbin, & Costa, 1997; Jessor, Van Den Bos, Vanderryn, Costa, & Turbin, 1997) showed that not only individual risk and protective factors contributed to variations in behavioral outcome, but contextual (i.e., environmental) factors also.
Jessor and Jessor (1977) defined problem behavior as behavior that incurs control or sanction from the society in which it occurs. Although potentially dangerous, engaging in problem behavior may not be pathological ( Shedler & Block, 1990). An adolescent’s normative need for social redefinition may lead them to have sex or to drink alcohol; in so doing, they are essentially announcing their transformation into adulthood. These behaviors may be considered normative or developmentally adaptive when it takes place during an age-appropriate time and in the context of a protective environment. When it becomes a problem is when the behavior is age-inappropriate and has harmful consequences and a propensity towards maladaptive development (e.g., substance abuse, teenage pregnancies, incarceration).

The Appeal of Problem Behavior Theory

Problem Behavior Theory’s depiction of the complex and diverse nature of adolescent behavior provides an appealing theoretical framework. According to PBT, no single component or domain of adolescent behavior (i.e., substance misuse, parental monitoring, and association with deviant peers) can of itself describe or account for the situational or behavioral influences that envelop the activities that adolescent engage in ( Jessor, 1991). Problem behavior is conceived as an underlying syndrome or group of interrelated unconventional behaviors, with the adolescent at center stage. These behaviors are purposefully acted out by the adolescent; additionally, the adolescent is also the receiver of the consequences of such behaviors. Essentially, PBT focuses on the action or actions of a person, rather than the actual person; thereby eliminating the need to make moral judgments about the adolescent’s personal attributes.

The Concept of Proneness in Problem Behavior Theory

Adolescent behavior can be thought of as on a continuum, ranging from unconventional problem behaviors to conventional or socially acceptable behaviors (Donovan et al., 1991;
Jessor, 1992). The balance between the unconventionality and conventionality reflects a behavioral profile of an adolescent’s propensity to engage in and be committed to values and standards of behavior that are currently sanctioned or not sanctioned by the society at large (Donovan et al., 1991). An adolescent’s advancement along the path of unconventionality is identified as “proneness”.

Proneness, can be defined according to the psychosocial systems: behavior system, personality system, perceived environment, social environment system and biology/genetics system. Each system consists of variables that act on each other in a mutual dynamic state either as an instigation towards involvement in problem behavior or a control against problem behavior. Overall, the individual and combined effects of the forces from the five systems results in a psychosocial proneness either towards or away from engagement in problem behavior.

Psychosocial proneness is defined by the effect of risk (instigator) factors and protective (control) factors on behavioral outcomes. This proneness is also reflected by a covariance of the risk and protective factors where one system influences the other in either a positive or negative direction. Thus the role of risk factors is to increase the likelihood that an adolescent will engage in problem behavior. A few examples of risk factors include; academic problems, poor parenting, socioeconomic disadvantage, low self-esteem, propensity to psychological problems, peer models for problem behavior, propensity for risk-taking, and low perceived chances for success. On the other hand, the role of protective factors is to decrease the likelihood that an adolescent engages in problem behavior. Some examples of protective factors include: values on achievement and health, high intelligence, involvement in school and voluntary clubs (member of organized sports or art club) and religiosity (church attendance), attending good quality schools, and intolerance for deviant behavior. Moreover, empirical evidence that has shown that
protective factors not only directly affect problem behaviors, but also indirectly through its moderating effect on the impact of risk factors.

*Psychosocial Proneness and Proximal and Distal Variables*

As stated in Jessor and Jessor’s 1977 model, an adolescent’s perceived environment includes risk and protective factors that are proximal (direct effect) or distal (indirect effect) in nature. Proximal variables (e.g., model of peers who use alcohol) have a more visible influence on behavior than distal variables (e.g., support from parents); due to the direct association with the specific behavior. Proximal structures include parent and peer approval of problem behavior and peer models for problem behavior. Distal variables are indirectly associated with the specific behavior through some mediating effect and are not always immediately detected. Distal structures include parental and peer support, parental and peer controls, parent-peer influence, and parent-peers compatibility.

*Theoretical Framework Revisions Since 1977*

Jessor made major revisions to his model in 1992, and discussed the most recent model in his 1998 book, in which he noted that current research literature had identified additional problem behaviors, risk factors, and protective factors. Their correlations through testing of the Problem Behavior Theory required changes to the original framework. This latest framework of multiple domains and linkages illustrate the relationships of these variables to each other, as well as their influence on health outcomes. Figure 1 presents the 1998 problem theory framework that Jessor referred to as the interrelated conceptual domains of risk and protective factors (Jessor, 1992; 1998).
Figure 1
Relationships Between Conceptual Domains of Risk and Protective Mechanisms
(Jessor, 1992, p. 27)
The first domain explicated by the revised model included the systems of perceived environment, personality, and behavior. Two additional systems were added to account for the adolescent’s social environment and biological/genetic predispositions. All of the systems’ structures were then divided into risk factors and protective factors, with the individual variables appropriate to each one listed in one of the two structures.

The next domain was the domain of risk behaviors. This domain was named adolescent risk behavior/lifestyles and was further subdivided into three types of behaviors; problem behaviors, health related behaviors, and school behaviors. The final domain was risk outcomes, conceptualized as health/life compromising behaviors. The four systems in this domain included health, social roles, personal, and preparation for adulthood. Each included specific variables for measurement to test the theory.

The Problem Behavior Theory has been empirically validated and revised over three decades on adolescents and young adults of varying ethnicities (Caucasian, African American, and Hispanic) in the United States and in numerous other countries including China (Jessor et al., 2003). PBT has been shown to account for a significant proportion of the variance in various problem behaviors, health-related behaviors, and prosocial behaviors.

*Psychosocial Explanatory Systems*

Problem Behavior Theory focuses on five main systems that influence each other and affect the likelihood of adolescents developing problem behaviors: the personality system, the perceived environment system, the behavior system, the social environment system, and the biology/genetic system. How the adolescent experiences, these domains during the course of adolescent development is a primary predictor of present and future harmful adolescent risk
behavior they may engage in (Jessor, 1992). Behavior results from the sum of two opposing sets of risk and protective factors (from all systems), which determine proneness toward either deviant or normative conduct. Thus the dominance of either positive or negative factors will predict whether the individual will engage in normative or deviant behaviors.

The personality system includes relatively stable sociocognitive variables that are a reflection of social learning and the developmental experiences of the adolescent. Essentially, this system describes the character or nature of the person and is posited to instigate or control against problem behaviors. These include attitudes, beliefs, values, expectation, and orientations towards self and others. Proneness to problem behavior consists of: low expectation placed on academic success, high value placed on behavioral autonomy, low self-esteem, high social criticism, high levels of alienation, more tolerance of deviant behaviors, and lower levels of religiosity.

The perceived environment consists of subjective psychosocial variables that may or may not exercise societal norms that enable the emergence of appropriate or inappropriate behaviors. These variables include an adolescent’s perceived social support and control forces (i.e., social controls, models, and supports). To have any effect on behavior, the adolescents’ must be able to distinguish or identity these variables. The manner in which adolescents perceive the presence and effect of each variable is what influences their behavior and their environment. This system is comprised of two structure of variables, the proximal (models and support) and distal structures (social controls). Proneness to problem behavior consists of: low levels of parent disapproval and high levels of peer approval for problem behaviors, abundance of peers who engage in problem behavior, limited parental monitoring and support, conflict with parent and peer’s expectations, peers more influential than parents, low levels of peer control.
The behavior system consists of two structures; the problem behavior and the conventional behavior structure. The conventional behavior structure contains actions that were socially acceptable norms, which are expected and referred to as appropriate behaviors for adolescents. While conventional behaviors are viewed by society as a responsible and mature way to transition to adulthood; problem behavior, on the other hand, is considered deviant and inappropriate. Proneness to problem behavior consists of: alcohol misuse, and limited/or no dedication towards academic achievement, religiosity, and involvement in school-related extracurricular activities and volunteer work.

The social environment system incorporates variables that are within an adolescent’s context. Variables included are those that pertain to the immediate settings in which the adolescent interacts. Proneness to problem behavior consists of: economic disadvantage, normative anomie (absence of social norms or values), racial inequality, opportunities to engage in problem behaviors, not attending quality schools, non-cohesive family, limited/or no access to neighborhood resources, and limited/or no support from adults.

The Biology/Genetic System includes inherited predispositions that help set the stage for adolescent behavior. Proneness to problem behavior consists of: low intellectual ability and a family history of alcoholism. Factors from this system were not included in the problem behavior model for the current study.

Covariance of Multiple Problem Behaviors

The tendency of problem behaviors to aggregate within individual youth has been well-known for over twenty years (Arnett, 1998; Biglan, Flay, & Foster, 2003; Biglan & Severson, 2003; Biglan, Wang, & Walberg, 2003; Donovan & Jessor, 1985; Roberts, Roberts, & Xing, 2007). Health risk behaviors co-occur during adolescence, in part, because different problem
behaviors serve the same social or psychological developmental functions for adolescents [e.g., individuation, seeking acceptance from peers (Jessor, 1992)]. For example, substance use is highly correlated with high-risk sexual behaviors (Cornelius, Clark, Reynolds, Kirisci, & Tarter, 2007; Rosenbaum & Kandel, 1990; Walter, Vaughan & Cohall, 1991). Among urban minority high school students, substance use predicted having multiple sex partners, sex with an IV drug user, unprotected sex and a history of STDs (Walter, Vaughan, Ragin, & Cohall, 1993). Alcohol use by adolescents, as well as other drugs, has been associated with having unprotected sex (Biglan, Metzler, Wirt, & Ary, 1990; Cooper, Peirce & Huselid, 1994; Huselid & Cooper, 1994). Alcohol use has also been associated with early onset of sexual activity and more frequent sexual activity (Bentler & Newcomb, 1986; Donovan & Jessor, 1985).

Research conducted by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) found that most adult users of alcohol or tobacco first experimented with these substances in early adolescence (NIAAA, 2007). Furthermore, numerous NIAAA research found that adolescents who smoke cigarettes, are 3 times more likely to also use alcohol. Other studies have also confirmed these results (Bobo & Husten, 2000; Ellickson, Hays, & Bell, 1992; Griffiths et al., 2006; Jackson, Sher, Cooper, & Wood, 2002; Johnson, O’Malley, Bachman, & Schulenberg, 2006; Schmid et al., 2007). There is a high prevalence of co-occurring tobacco and alcohol use disorders in high school students (Johnson et al., 2006). Furthermore, the use of alcohol and tobacco generally precedes the use of other drugs (Ellickson et al., 1992). In a study by Jessor, Costa, Krueger, and Turbin (2006), one of the key predictors of heavy drinking were cigarette smoking and marijuana use. In another study sampling 6645 adolescents across the nation found that it was alcohol use that predicted cigarette smoking more reliably than the reverse (Jackson et al., 2002).
Substance abuse has also been shown to co-occur with delinquent behavior (Fite, Colder, & O’Connor, 2006; McMorris, Hemphill, Toumbourou, Catalano, & Patton, 2007; Wiesner & Windle, 2006). For instance, Wei, Loeber, and Stouthammer-Loeber, (2002) reported that as compared to youth with a history of no offending or moderate offending, repeat, serious delinquent offenders reported higher rates of alcohol and drug use; thus, is also likely to have a direct effect upon risky sexual behaviors. Moreover, a study by the National Institute of Justice (2000) assessed the five most common drugs abused in a national sample of 2,529 juvenile detainees. The study found that 56% of males and 40% of females were positive for drug use based on self-report or urine drug screens. In addition, in longitudinal studies of delinquent youth, Stouthammer-Loeber and colleagues (2004) have shown that a risk factor for persistence of criminal activity into adulthood is the use of hard drugs in adolescence. Likewise, youth who used drugs consistently across developmental periods rather than engaging in the more typical adolescent pattern of sampling drugs and then desisting were characterized by persistent delinquent acts over time (Loeber, Farrington, Stouthammer-Loeber, & Van-Kammen, 1998). Thus, substance use/abuse, risky sexual behavior, and delinquent behavior appear to interact in a synergistic fashion to worsen outcomes in adulthood, supporting the importance of directly targeting substance use/abuse, risky sexual behavior, and delinquency in populations of youth. The overall health during adulthood is significantly affected by the habits and lifestyle choices that initiate during adolescence.

Research literature has confirmed the relationship between adolescent problem behaviors and various psychological factors (Benjet et al., 2007; Costello, 2007a; 2007b; Degenhardt, Coffey, Moran, Carlin, & Patton, 2007; Roberts et al., 2007). Some studies have shown that individual risk factors such as depression, anxiety, distress, and low self-esteem are significantly
associated with adolescent problem behavior (Kandel & Davies, 1996) and adult alcoholism and nicotine dependence (Grant, Hasin, Chou, Stinson, & Dawson., 2004). According to the literature, adolescents who exhibited psychological syndromes such as attention problems, anxiety, depression, withdrawal, and low self-esteem were more prone to substance use (Costello, 2007a; 2007b; Trim, Meehan, King, & Chassin, 2007).

In the “Islands of Risk” study by Houck et al. (2006), a total of 1153 sexually active adolescents aged 15 to 21 years were sampled from multiple sites across three United States cities. Five problem behaviors were assessed: unprotected sex, alcohol/marijuana use, illicit drug use, mental health crises, and arrest/school dropout. To some extent this study supports Jessor and Jessor’s (1977) construct of “syndrome of problem behavior” (co-occurrence of problem behaviors). Among this sample of high-risk adolescents, specific risk factors, such as sexual risk behaviors, substance use (alcohol/marijuana use), and mental health crises were found to co-occur. Conversely, statistical analyses found evidence of a differentiation among problem behaviors even within this group of high risk adolescents, not all adolescents engaging in problem behaviors do so at the same frequencies.

Critiques of the syndrome of behaviors. There have been some researchers who have placed a cautionary note on viewing problem behavior only as a syndrome of behaviors (Loeber et al., 1998; Maggs, Frome, Eccles, & Barber, 1997). Although, consensus among researchers remains that there exists significant covariation among domains of problem behavior, Maggs et al. (1997) found it worthwhile to distinguish between multiple domains. Some problem behaviors can have advantageous developmental outcomes while other behaviors may have harmful outcomes. Maggs et al. (1997) reviewed and compared adolescent problem behaviors of alcohol, tobacco, and illicit drug use, and offered a striking example that puts the issue of using a
‘unitary syndrome of behaviors’ in perspective. Depending on developmental level and age, moderate alcohol use may have some beneficial effects on the social development of an adolescent, without any harmful long-term effects on health. However, any level of tobacco and illicit drug, even moderate use, at any age or developmental level would likely have deleterious effects on health. Therefore, by uniting alcohol, tobacco, and illicit drug use into one unitary factor of behavior, namely, ‘substance use’, one would likely obscure the outcomes, whether beneficial or deleterious, for each behavior. Therefore, some researchers (Loeber et al., 1998) have put forward the constructive use of viewing adolescent problem behavior as a unitary construct as well as discrete entities of behavior in describing problem behavior’s antecedent and consequential facets. The current study will not look at the problem behavior outcomes as a unitary factor, but as separate outcomes (i.e., cigarette smoking, alcohol use, and delinquency).

Additionally, Loeber et al. (1998) suggested that in trying to formulate explanations for problem behaviors, proximal behaviors that are interrelated displayed a significantly stronger internal association than those that were more distal. Physical aggression and having models of deviant peers are more proximally associated with delinquency than the distal variable of substance use which of itself may or may not lead to deviant behavior. Therefore, the combination of these proximal variables as a single construct can be statistically advantageous in accounting for a more significant proportion of variance in determining the level of delinquency affecting an adolescent. On the other hand, certain risk factors are more significantly associated than others to certain outcomes. When examining the outcomes of externalizing and internalizing problems, risk factors such as having a broken family structure, negative mood, disadvantaged socioeconomic status, and poor neighborhood environment is more significantly associated to externalizing problems than internalizing. Furthermore, research literature has consistently found
a significant relationship between internalizing and externalizing behaviors and propensity to
engage in problem behaviors (Hall et al., 2009; Hunt & Hopko, 2009; Owens & Shippee, 2009;
Prinstein & La Greca, 2009; Saraceno et al., 2009; Skeer et al., 2009; Tillfors et al., 2009).

Sensation Seeking Theory

One of the premises of this study is that elements of an adolescent’s personality
predispose them to engage in problem behavior. Personality traits are underlying characteristics
of an individual that are relatively stable over time, and can explain regularities in an individual's
behaviors (McCrae & John, 1992; McCrae et al., 2002; Roberts, Caspi, & Moffit, 2001;
Zuckerman, 2007). Numerous studies on the personality trait of sensation seeking has predicted
adolescents who are most likely to engage in problem behaviors such as substance use (alcohol
and illicit drugs), risky sexual behaviors (multiple sex partners), and precocious sexual activity
(Zuckerman, 2007; 1983).

Marvin Zuckerman initially developed the Sensation Seeking Theory in the 1950s
following a series of sensory deprivation experiments. Zuckerman suspected that individuals
who participated in these experiments had shared personality traits. These individuals appeared
to be especially adventurous and inquisitive, eager to engage in novel and stimulating
experiences even if it contained social or physical risk. Sensation seeking is described as “the
need for varied, novel, and complex sensations and experiences and the willingness to take
physical and social risks for the sake of such experiences” (Zuckerman, 1994, p. 10). The
construct of sensation seeking is measured by a scale developed by Zuckerman called the
Sensation Seeking Scale (SSS; Zuckerman, 1994; Zuckerman, Kolin, Price, & Zoob, 1964). This
empirically validated and reliable scale has undergone several revisions (SSS-Form V will be
used in this study; Zuckerman, 1994) and has been translated into various languages, including
According to Zuckerman and Kulman (Zuckerman, 2007; Zuckerman & Kulman, 2000), heredity offers the most conclusive explanation of sensation seeking: the specific biological markers are the enzyme, monoaminoxidase (MAO), and the monoamine neurotransmitter, dopamine. Confirmatory analyses have shown that those with various disinhibitory types of disorders that are also high in sensation seeking have significantly low levels of MAO in their bloodstream. These same individuals also engage in a variety of problem behaviors such as smoking, alcohol use, illicit drug use, and illegal activity. In another study, Cloninger, Sigvardsson, and Bohman (1996) found that long alleles of the D4DR exon III was significantly associated with those who are high sensation seekers.

Sensation seeking is a particularly strong predictor of behavior in adolescents, as this trait routinely emerges in pre-adolescence and begins to peak by young adulthood (Zuckerman, 2007). The propensity for a high sensation seeking individual to engage in problem behaviors is already elevated; now add in the developmental challenges that an adolescent faces, this will surely place the high sensation seeking adolescent at an even more critical risk. Although the desire for sensation seeking endures beyond adolescence, it is during this developmental period that it appears to be strongest.

Dimensions of the Model of Sensation Seeking

In addition to an overall model of sensation seeking, Zuckerman (2007) proposes that there are four sub-dimensions to the Sensation Seeking trait: (1.) "Thrill and Adventure Seeking" which relates to the willingness to take physical risks (reckless driving, alcohol and illicit drug use) and participate in high risk sports (bungee jumping, skydiving), (2.) "Experience Seeking" which relates to the need for new and exciting experiences (traveling, listening to avant-garde
music, eating or preparing exotic foods, or interacting with an eclectic group of friends) and is associated with all types of risk taking, (3.) "Disinhibition" which relates to a willingness to take social risks (tendency to ignore or challenge social norms or the law) and engage in health risk behaviors (e.g. binge drinking or unprotected sex), and (4.) "Boredom Susceptibility" which relates to an intolerance for monotony (rapidly habituate to events, situations, or people).

There is evidence that gender differences exist in the construct of sensation seeking. Males tend to score higher on the Thrill and Adventure Seeking and Disinhibition variables and have slightly higher overall sensation seeking tendencies than females. On the other hand, females tend to score higher on the Experience Seeking sub-scale (Newcomb & McGee, 1991; Zuckerman, 1994). Biological differences in the level of hormones (gonadal hormones) may be plausible explanation for these gender differences (Zuckerman, 1994).

While the argument for a biological basis for sensation seeking is strong, many caution that one should not underestimate the influence of the social environment on an individual’s need for novelty or sensation (Zuckerman, 2007). Zuckerman (1994) states that sensation seeking is approximately 50% genetically determined. The remaining variance in personality traits is due to the environment; the way in which we are socialized, and the way in which we were brought up by our parents. Influences such as perceived peer norms, behavior of members of a peer group, parental influence, and future orientation may, too, serve as accelerants or deterrents to risky sensation seeking behavior.

It is generally accepted that socioeconomic status influences the range of options available to high sensation-seeking adolescents. Middle to upper class adolescents for example may have opportunities to engage in social and athletic activities that provide acceptable sensation seeking outlets (e.g., skiing, bungee jumping, or travel). Furthermore, it may be
generally more socially unacceptable to engage in problem behaviors, thus these conditions control/prevent an adolescent in middle or upper class from engaging in problem behaviors. The options available to socially disadvantaged adolescents are more limited, especially those who also live in a poor neighborhood. If pro-social risky activities are not reachable by these adolescents, they may resort to risky or even criminal activities to achieve their inherit need for novelty or sensation. These activities include truancy, recreational drug use, precocious sex, unprotected sex, or sex with multiple partners (Donohew et al., 2000). Moreover, youths living in poverty may have more opportunities to engage in problem behavior (e.g., accessibility of drugs) and also more deviant peer models (e.g., gang involvement).

Adolescents are more likely to choose peers that are most similar to them: “birds of a feather flock together” (Steinberg, 2008, p. 186). Adolescents high in sensation seeking may search for peers most similar to themselves, to satisfy their social need for peer support or models for sensation seeking (Donohew, Clayton, Skinner, & Colon, 1999a; Donohew et al., 1999b). Thus, it is reasonable to believe that both social and individual forces are operating in a two-way causal function (Donohew et al., 1999a; 1999b). In fact, within the peer group, they are causing each other to engage in even more problem behaviors; thus, reinforcing the relationship (Bryant & Zimmerman, 2002; Donohew et al., 1999). The socialization of selecting novel or risky friends may be both a high sensation seeking pursuit, and a force that influences risk-taking behaviors in the future.

Having a strong trait of sensation seeking is not necessarily problematic, Zuckerman (2007) describes the high sensation seeker as an individual who actively seek out paths that offer them novelty and intensity, rather than just waiting for circumstances to deliver it. Most likely, you will be able to distinguish these individuals because they usually venture on paths less
traveled and are constantly full of new and innovative ideas. Many creative adolescents engage in tasks that may be indicative of high sensation seeking, such as a fascination with new technology, over-commitment to tasks or projects, or even procrastination. Engaging in risky sports such as skiing has been associated with high sensation seeking; although it has not been found to associate with a higher than average sport related injuries (Cherpitel, Meyers, & Perrine, 1998).

Despite the fact that sensation seeking may be relatively risk-free and or socially acceptable, numerous studies have found that a high proportion of adolescents who engage in problem behaviors such as illicit drug use or unprotected sex are also high sensation seekers (Donohew, Palmgreen, & Lorch, 1994; Zuckerman, 1994). In fact, adolescents who are sensation seekers are 2-7 times more likely to engage in drug use (Donohew et al., 1994). Tang, Wong, and Schwarzer (1996) studied the regular use of marijuana and heroin in 969 adolescent offenders in Hong Kong. Increased level of marijuana and heroin were highly associated with high sensation seekers. In another Hong Kong study, over 50% of adolescents reported engaging in deviant behaviors that are characterized as “thrill seeking activities”, such as, using illicit drugs, throwing things from heights, staying overnight away from home without parental consent, and acts of vandalism (Davis, Tang, & Ko, 1998). Davis et al. (1998) recommended that there be services available for high sensation seeking adolescents that can redirect this inherent need for novelty and excitement into more positive activities (competitive sports, boot-camps).

There is also evidence that sensation seeking is a reliable predictor of other problem behaviors, for example, precocious sexual activity, having multiple sexual partners, having sex while under the influence of substances (alcohol or illicit drugs), and have elevated levels of alcohol and illicit drug use (Caspi et al., 1997; Donohew et al., 2000; Kalichman et al., 2002;
Seto et al., 1995). In a longitudinal study that followed 1037 participants from birth to the age of 21 (Caspi et al., 1997) found that sensation seeking was a reliable predictor of various health risk behaviors. High sensation seekers were consistently more likely to engage in sexual risk behaviors, such as having unprotected sex. More strikingly are the significant results from a study by Seto et al. (1995) that found that high sensation seekers not only reported more problem behaviors, but also had intentions to have multiple sex partners and to engage in a variety of risky sexual experiences in the future.

The literature clearly demonstrates that high sensation seekers are more likely to engage in behaviors that put them at risk for health risk outcomes. These behaviors include a propensity toward alcohol and illicit drug use, unprotected sexual activity, and delinquent behaviors. Given the deleterious effects of these health risk outcomes on the adolescent (e.g., death, chronic illness, incarceration) and to others, it is obvious why targeting adolescent high sensation-seekers is important.

Values Theory

There exist few domains of practical human concern more important and time honored than that of moral and ethical behavior. Many voters in the United States believed that “moral values” was a critical factor in voting for a U.S. president (CNN, 2004). Twenty-two percent \( (N = 13,660) \) reported that moral values was the most important issue in their vote for president (5%-taxes, 4%-education, 15%-Iraq, 19%-terrorism, 20%-economy/jobs, and 8%-health care). Moral values continue to be a key matter for our nation, as it is continuously brought up in the President’s addresses (The White House, 2009a; 2009b). Furthermore, in his travel to the U.S. in 2008, the Pope’s main purpose was to address issue of values (MSNBC, 2008). A “Google” search on the World Wide Web for “moral values” revealed over 26 million citations and a
search in PsycINFO revealed over 1400 citations, suggesting the significance of moral values across nations and in the scientific literature. Values can be thought of as a set of moral principles that provides a guide for making life decisions, small and large. Your values come into play when you have a decision to make and you have to ask yourself, “What is really most important to me?” For example, if you chose a career that your parents were opposed to, the decision you made about whether or not to pursue this career anyway would be a reflection of your values, of what was of ultimate importance to you.

Values of Individualism vs. Collectivism

The challenges and transitions adolescents face are influenced by their culture and by their past and present environments. Individual, familial, and cultural differences influence both the life-experiences of youth and the manner in which youth deal with and react to challenges and transitions. For this reason, it is important in developmental research to examine the social backgrounds of adolescents in culturally distinct groups, and to examine how culture and environment might influence the manner in which adolescents behave. Cultural history and present status of a cultural group are an important part of an individual’s values system.

Traditional studies of values have defined it in terms of individualism and collectivism (Chen, Chan, Bond, & Stewart, 2006; Hwang, Francesco, & Kessler, 2003; Kashdan & Yuen, 2007; Lai, Liu, & Zhehg, 2009; Le et al., 2009; Leung & Bond, 2009; Liu, Tein, & Zhao, 2004; Pillutla, Farh, Lee, & Lin, 2007; Rego & Cunha, 2009; Soontiens, 2007). Individualistic values center on the rights and needs of each person. Examples of individualistic values would be freedom, independence, self-sufficiency, self-esteem, equality of relationships, individual achievement, competition, personal enjoyment, and self-expression. Collectivistic values center most highly on a person’s obligations and duties to others. Examples of collectivistic values
would be cooperation (in-group harmony), hierarchical relationships, duty, loyalty, courtesy, kindness, generosity, modesty, obedience, academic achievement, and self-sacrifice.

A recent study found that people who come from collectivistic cultures (Hong Kong, Shanghai, Beijing, Chinese in Canada) are more likely to display more modest behaviors (Chen, Bond, Chan, Tang, & Buchtel, 2009). That is, values orientation towards an emphasis on individuation (i.e., willingness to display oneself publicly, high values on personal achievement/success, social status and prestige, and social dominance of people) are less likely to show modest behaviors (e.g., self-humbling behaviors).

Individualism and collectivism have been used most often to describe cultural differences in values. For example, the United States is often described as individualistic, whereas Japan, China, Hong Kong, and other Asian cultures are often described as collectivistic. In a study by Feldman and Rosenthal (1991), they compared values of 10th and 11th grade students from Hong Kong (N = 141), United States (N = 155), and Australia (N = 155). Results found that adolescents from Hong Kong described their families as less accepting, less engaged and less structured; had less expectations for autonomy; placed less value on individualism, external success, and individual competence, and more value on tradition and prosocial behaviors. The values of the adolescents from Australia and the United States were very similar.

Other research on values has found that some Chinese youths in Hong Kong are collectivistic, some are avidly individualistic while others are a combination of the two ethics. Younger generations of Chinese are becoming more individualist (Bond, 1986; Chang, Arkin, Leong, Chan, & Leung, 2004; Ho & Chan, 2009); although, not to the extent of youths in Western cultures. Ho and Chan (2009) found that the individuals in Hong Kong moderately perceived Hong Kong as a harmonious society (M = 5.57, range 1 to 10). With the following
reported as important aspects of a collectivistic culture: public governance (a just government with sincerity on communication), social solidarity and respect (mutual support and respect with integrity and dedication), economy/family/work (dedication to one’s job and community by helping he needed) and, social tolerance and progressiveness (creativity and progressiveness with tolerance). Confirmed by another study (Soontiens, 2007), results showed that individuals from Hong Kong placed high values priority on society and environment, and global well-being (collectivistic), but also high priority on materialism in work and lifestyle (individualistic). Hence, these studies conclude that Hong Kong is a society that has kept their traditional cultural values, but has also adopted a more westernized culture.

Asian and Western youth prioritize values rather differently. Youths in individualistic societies such as the United States emphasize values such as autonomy, self-direction, stimulation, and universalism, devaluing conformity and tradition (Feather, 1980a; 1980b; Rosenthal, Bell, Demetriou, & Efklides, 1989; Schwartz, 1994). Youth in collectivistic societies, such as Hong Kong and many other Asian societies, tend to emphasize tradition and conformity (Bond & Hewstone, 1988; Schwartz, 1994).

It might be expected that an emphasis on conformity, obedience and collective welfare (typical in collectivistic societies) would decrease the likelihood of adolescent deviant behaviors (Arnett, 1992a, 1992b; Juang & Nguyen, 2009; Le et al., 2009; Lim & Chang, 2009). Similarly, an emphasis on personal freedom and personal power with a relative de-emphasis on group interest (characteristic of individualistic societies), may increase the likelihood of such behaviors (Arnett, 1992a; 1992b). There are few studies explicitly investigating the relationship between Hong Kong Chinese adolescent values and problem behaviors. In one cross-cultural study (Feldman, Rosenthal, Mont-Reynaud, Leung, & Lau, 1991), Western adolescents were found to
have greater self-reported misconduct. In both Western and Chinese cultural groups, youth endorsing more “individualistic” values, and those placing a higher value on outward success reported higher levels of problem behaviors.

A recent study by Lim and Chang (2009) studied youth violence and a collective values orientation in 149 incarcerated Singaporean male adolescents. Results confirmed past literature, whereby youths who endorse values of collectivism may be the reason for lower violent crime rates in Asia. Another study (Le et al., 2009) examined individualism-collectivism and substance use among Asian American adolescents (N = 329; Cambodian, Chinese, Laotian/Mien, and Vietnamese adolescents). Chinese adolescents reported the least amount of substance use as compared to other Asian adolescents. Furthermore, having a collectivistic values orientation served as a buffer against substance use and interacting with substance using peers (especially for females) while individualistic values orientation served as a risk factor. Finally, Jiang and Nguyen (2009) found that Chinese American adolescents (N = 309) who place high priority on the specific cultural value of family obligation were less likely to engage in delinquent behaviors. Thus, cultural values specific to Chinese culture is of salient value when examining adolescent problem behavior.

*Defining and Identifying Values Across Cultures*

Based on the extensive literature on values theory, value questionnaires, and religious and philosophical discussions of values, (Bardi, Calogero, & Mullen, 2008; Calogero, Bardi, & Sutton, 2009; Parks & Guay, 2009; Rokeach, 1973; Schwartz, 1992; Schwartz, 2007; Williams, 1970), the consensus is that values are “deeply rooted, abstract motivations that guide, justify or explain attitudes, norms, opinions, and actions” (Schwartz, 1992, p. 261). According to Schwartz’s Values Theory (1992), values are conceptions of desirable goals that are prioritized
and guide the way an individual selects or evaluates actions, policies, people and events. Essentially, values “underlie and influence individual” differences on various “constructs that researchers from different disciplines will want to study” (Schwartz, 1992, p. 261). Furthermore, key changes that occur within a society and across countries are manifested in values.

Schwartz and colleagues (Schwartz, 1992; 2006; 2007) wanted to determine if certain values were recognized, understood, and used to form priorities across cultures and whether a comprehensive list could be composed. Validated in over 67 nations (including China and Hong Kong), ten basic values were compiled. Individuals within and between cultures differ with regard to the priority that they placed on a specific value, although it is apparent that they understood the concept and the motivational oppositions or compatibilities of these values (Schwartz, 2006). This model consisting of 10 basic values (Power, Self-Direction, Achievement, Hedonism, Stimulation, Universalism, Benevolence, Tradition, Conformity, and Security) has been established in the psychology of values as a comprehensive, cross-culturally stable model that can predict a series of external constructs. The 10 basic values can be differentiated based on their central motivational goals as illustrated in Table 1.
Table 1

*Ten basic values and their central motivational goal (Schwartz, 2006, p. 1-2)*

<table>
<thead>
<tr>
<th>Basic Values</th>
<th>Central Motivational Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-direction</td>
<td>Independent thought and action; choosing, creating, exploring.</td>
</tr>
<tr>
<td>Stimulation</td>
<td>Excitement, novelty, and challenge in life.</td>
</tr>
<tr>
<td>Hedonism</td>
<td>Pleasure and sensuous gratification for oneself.</td>
</tr>
<tr>
<td>Achievement</td>
<td>Personal success through demonstrating competence according to social standards.</td>
</tr>
<tr>
<td>Power</td>
<td>Social status and prestige, control or dominance over people and resources.</td>
</tr>
<tr>
<td>Conformity</td>
<td>Restraint of actions, inclinations, and impulses likely to upset or harm others and violate social expectations or norms.</td>
</tr>
<tr>
<td>Tradition</td>
<td>Respect, commitment, and acceptance of the customs and ideas that traditional culture or religion provide the self.</td>
</tr>
<tr>
<td>Benevolence</td>
<td>Preserving and enhancing the welfare of those with whom one is in frequent personal contact (the ‘in-group’).</td>
</tr>
<tr>
<td>Universalism</td>
<td>Understanding, appreciation, tolerance, and protection for the welfare of all people and for nature.</td>
</tr>
</tbody>
</table>
**Relationship Between Core Values**

The 10 basic categories of values correspond to a motivational continuum, thus are organized in a circular pattern (as illustrated in Figure 2). Values that are adjacent to each other have similar underlying motivations, while those values that are farther apart from each other are more dissimilar in their underlying motivations. Based on the 10 basic values, four higher-order values are clustered (see Table 2). The values model is essentially divided into two dimensions that summarize the compatibility and conflicts between the value structures: Openness to Change versus Conservation, and Self-Enhancement versus Self-Transcendence (see Table 3).

On the dimension of Openness to Change versus Conservation, self-direction and stimulation values are in conflict with the values of security, conformity, and tradition. That is, the values that emphasize autonomy and preference for novelty, sensation, and variety are in opposition to values that emphasize obedience, social control, and the preservation of traditions. On the second dimension of Self-Enhancement versus Self-Transcendence, personal achievement and dominance over others are in opposition to values that emphasize altruism and equality and social justice. Hedonism is not exclusively included in either of the two dimensions because the values of pleasure and self-gratification are related to both Openness to Change and Self-Enhancement.

Each class of values is related to the others in systematically consistent ways, such that strong endorsement of one value is likely to predict low endorsement of another value. Thus, instead of measuring single values, Schwartz’s Value Scale (SVS; Schwartz, 1992) allows researchers to map individuals’ (and study groups’) profiles of values. Such profiles are theoretically related to a variety of value-oriented human behaviors in systematic ways. For instance, an individual’s quest for altruism (benevolence-oriented) will interfere with the quest
Figure 2. Theoretical model of relations among ten motivational types of values (Schwartz, 2006, p. 3).
Table 2

Four higher-order values and the broad motivational goal shared by the basic values they are composed of (Schwartz, 2006, p. 3)

<table>
<thead>
<tr>
<th>Higher-Order Values</th>
<th>Motivational Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Openness to change (stimulation &amp; self-direction)</td>
<td>Pursuing whatever intellectual or emotional directions one wishes, however unpredictable or uncertain the outcomes.</td>
</tr>
<tr>
<td>Conservation (conformity, tradition &amp; security)</td>
<td>Preserving the status quo and the certainty it provides in relationships with close others, institutions, and traditions.</td>
</tr>
<tr>
<td>Self-enhancement (achievement &amp; power)</td>
<td>Enhancing one’s own personal interests (even at the expense of others).</td>
</tr>
<tr>
<td>Self-transcendence (universalism &amp; benevolence)</td>
<td>Transcending one’s selfish concerns and promoting the welfare of others, close and distant, and of nature.</td>
</tr>
</tbody>
</table>
Table 3

*Two basic dimensions of the higher-order values (Schwartz, 2006, p. 3)*

<table>
<thead>
<tr>
<th>Basic Dimensions</th>
<th>Oppositions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-enhancement vs.</td>
<td>On this dimension, power and achievement values oppose universalism and benevolence values. Both of the former emphasize pursuit of self-interests, whereas both of the latter involve concern for the welfare and interest of others.</td>
</tr>
<tr>
<td>self-transcendence</td>
<td></td>
</tr>
<tr>
<td>Openness to change vs.</td>
<td>On this dimension, self-direction and stimulation values oppose security, conformity and tradition values. Both of the former emphasize independent action, thought and feeling and readiness for new experience, whereas all of the latter emphasize self-restriction, order and resistance to change. Hedonism shares elements of both openness and self-enhancement, but in most cases hedonism is closer to openness to change.</td>
</tr>
<tr>
<td>conservation</td>
<td></td>
</tr>
</tbody>
</table>
for self success (achievement-oriented). Likewise, those who seek self success will also seek power (actions that strengthens a person’s authority over others). Research by Schwartz and his colleagues (2001) found that the acceptance of Hedonism, Stimulation, and Self-Direction oriented values and the rejection of Tradition-oriented values are predictive of alcohol use in South African respondents, whereas endorsement of Power- or Benevolence-oriented values is unrelated to alcohol use. Similarly, Schwartz (1996) found that the endorsement of benevolence-oriented values was correlated with cooperative behavior in children, while the endorsement of Power-oriented values was negatively correlated with such behaviors.

Pattern of Relationship Between Values

One of the benefits of values being arranged in a circle is that the order of associations is predictable: “there is a specific pattern of positive, negative, and zero associations for the remaining values” (Schwartz, 1992, p. 1). Associations between the values decrease monotonically (in a set order) in both directions as one travels around the circle (Bardi, Lee, Hofmann-Towfigh, & Soutar; 2009; Lee, Soutar, & Louviere, 2008; Maio, Pakizeh, Cheung, & Rees, 2009; Schwartz, 1992; 2007; Vecchione, Casconi, & Barbaranelli, 2009). That is, if an attitude, behavior, or trait correlates positively with one value, and negatively with another, there exists a pattern of associations that follow a set path around the circle. Schwartz gives an example to illustrate this: “if voting for a party with a left-wing orientation correlates most positively with universalism values and most negatively with security values. Then, going from universalism round the circle to the right (benevolence, tradition, conformity, security), correlations are likely to become less positive and more negative. This is also likely going from universalism around the circle to the left” (Schwartz, 1992, p. 1).
Variables That Influences Values Priorities

The priorities of values are dictated by a person’s life circumstance (Schwartz, 1992). An individual will place more priority on values that they can easily achieve, while demoting values that are not within reach. For example, adolescents who are consistently allowed to be autonomous in all areas of their lives will place the value of self-direction at high priority while downgrading the importance of conformity. The adaptation of values according to life circumstances occurs with most of the values, but not all. With the value structure of power (personal wealth) and security, the opposite occurs, that is, if the attainment of either of these values is blocked, an individual will give these values an even higher priority.

Early adolescence. Schwartz studied the values structure of early adolescents in Israel, and suggested that it is not until age 13 that the relations between values are completely crystallized. Schwartz and his colleagues (2001) sampled Ugandan girls aged 13 and 14. It was difficult to distinguish between the basic values of universalism and benevolence within the higher-order value of self-transcendence, and also the basic values that make up the higher-order value of conservation (i.e., tradition, conformity, and security). Although the aforementioned values were not discriminate, this did not exist for all other categories of values structure. There exist clear differentiations between the four higher-order values, and also a differentiation of the basic values of stimulation, hedonism, achievement, self-direction, and power. This pattern of prediction based on the order of the values on the circle was replicated by another study. Bubeck and Bilsky (2004) tested the applicability of the values structure on German children and adolescents. They sampled 1555 participants 10 to 17 year-old and found that even the youngest of the group (age 10) showed highly differentiated values structure (basic and higher-order values) as in adult samples. Bubeck and Bilsky stated that the early development of the values
structure at an age earlier than expected may have been due to significant socialization experiences that these 10 year olds had early in their life (e.g., family, school, and media influence).

*Historical events.* Values priority can change in response to specific events in history that affects a particular age cohort [e.g., war, 9-11, the Great Depression (Schwartz, 1992)]. An individual’s values that were shaped during adolescence are generally quite stable (Inglehart, 2006; Inglehart & Baker, 2000). For example, youths who faced economic and physical hardships will place high priority on materialist values that will usually last a lifetime. On the other hand, youths who live in nations that offer prosperity and security will tend to have less priority on materialistic values. Youths in this type of environment are accustomed to opportunities for exciting ventures, indulgences, freedom, and independence. Thus, hedonism, stimulation, self-direction, and perhaps, universalism will become values of high priority, rather than values of security, tradition, and conformity.

In a 2007 study by Lyons, Duxbury, and Higgins, generational differences in values orientation were examined. Results showed that the values orientation of individuals from different generational eras (i.e., Matures, Baby Boomers, Generation Xers, and Millenials) were significantly different from each other and may play a more important role in determining values orientation than any age-pattern.

Matures’ (born earlier than 1954) experiences were largely affected by the Great Depression, World War II, and the development of the social security system; thus, they are more likely to delay personal gratification, sacrifice to benefit those around them, have high work ethics and devotion, conform to traditions, and finally, are more accepting of authority.
They are more likely place high value on conformity, tradition, and security while placing low value on stimulation, hedonism, and self-direction.

Baby Boomers’ (born between 1945 and 1964) experiences were largely influenced by high birth rates (North America). Due to the large presence of Baby Boomers, competition became the norm, from competing for attention during childhood to competing for jobs. Values of self-direction, universalism, indulgence, hedonism, and achievement are in the forefront, even at the expense of those around them. Furthermore, due to the historical events of the Vietnam War and the Watergate scandal, Boomers are skeptical of authority figures and are also disdainful of conformity.

Generation Xers (born between 1965 and 1979) were largely affected by economic uncertainty, recession, job loss, and inflation. In fact, Xers may be worse off than their Baby Boomer parents who grew up during more prosperous times. Xers have a tendency to place high value priorities on openness to change (i.e., stimulation, hedonism, and self-direction), and low priority on values of conformity, security, and tradition than Baby Boomers.

As with Xers, Millennials (born after 1980) are easily adapted to change, and are creative, optimistic, and independent. Their experiences were vastly shaped by advancements in information technology (first generation to have computers in schools) and globalization. Consequently, they place high values priority on achievement (like their Boomer parents), and openness to change, and low values priority on conservation.

The findings from Lyons et al. (2007) showed that Generation Xers endorsed higher openness to change values and lower conservation values than Matures and Baby Boomers. Surprisingly, the values orientation of Millennials did not differ significantly in the values of openness to change and conservation when compared to Baby Boomers or Matures. This result is
unexpected, given that Millennials’ experiences were vastly shaped by advancements in information technology (first generation to have computers in schools) and globalization. Finally, Millennials and Generation Xers endorsed higher self-enhancement and lower self-transcendence values than Baby Boomers and Matures. This study is compelling in that generational differences may play a more important role than age-related pattern of values.

Gender. Males tend to have higher priority on the values of power, achievement, hedonism, stimulation, and self-direction; while females place high importance on the values of benevolence, universalism, conformity, and security. These gender differences were confirmed in a cross-cultural study (Lan, Ma, Cao, & Zhang, 2009; Schwartz & Rubel, 2005); although the size of these differences did vary substantially across the 70 countries studied. Furthermore, the values of conformity and tradition were not reliably differentiated by males and females.

Education. Those who place a high priority on the attainment of education also have high importance placed on values of stimulation and self-direction at the expense of the values of conformity, tradition, and security (Lan et al., 2009; Prince-Gibson & Schwartz, 1998; Schwartz et al., 2001b). Autonomous thinking and action that is nurtured in a novel, exciting, and challenging educational environment is in conflict with acceptance of the ideas and customs of the traditional culture, the control from social norms, and a focus on safety and stability. Furthermore, the value of achievement is continually fostered in an environment that is full of opportunities to display one’s competence and success. In the final years of high school, the value of universalism (empathy, gratitude, tolerance, and protection for the well-being of others and the environment) begins to increase in its importance in the adolescent’s life, especially in those who strive to attain higher education (attend college).
Relationship Between Values and Behaviors

Schwartz (1996) in his chapter on the ability of using values to predict behavior summarizes four main processes that occur. The first process states that values must be activated in order to influence or cause a behavior. This can be a conscious or unconscious thought. Values that are of higher importance will be activated more easily, and may consequently lead to some behavior.

The second process states that values motivate action and its effect on actions may be either through conscious or unconscious awareness. Actions that promote goals that are of high value are more appealing. Values that are of high importance to an individual make up a key proponent of their self-concept. If there is an opportunity to achieve these values, an individual will respond automatically, positively, and affectively. On the other hand, if there is a threat to the attainment of such value, the individual will respond in a negative and affective way to oppose this threat. Furthermore, how much an action appeals to the individual is influence by their values. In light of how values motivate actions, one must remember that individuals will unlikely take action if they don’t believe that they have the ability to attain such goals.

The third process states that situations are defined in light of the values that are important; different values may bring about different actions. Individuals consistently strive for goals that are of high value priority; thus becoming “chronic goals” that direct an individual to the constant awareness of situations that involve those values.

Finally, the last process states that the more importance given to a value, the more likely it will form action plans that lead to its expression in behavior. When an individual formulates a plan, the focus is in favor of attaining a specific goal. This focus enhances their confidence in
their capability to be victorious. When faced with barriers and distractions, an individual’s prior planning will keep them heading towards the end goal.

Values Theory has been applied to behavioral research in areas such as prosocial, antisocial/problem behaviors (i.e., substance use, delinquency), environmental, political, consumer, individuation and intellectual behaviors (Chen et al., 2009; Sagiv & Schwartz, 2004; Schwartz & Bardi, 2001). More specifically, researchers have examined the correlation between value-prioritization and specific “real-life” behaviors, including university course selection, (Feather, 1988), voting (Schwartz, 1996), modesty (Chen et al., 2009), empathic behavior (Balliet, Joireman, Daniels, & George-Falvy, 2008), attitudes and behavior in the workplace (Cohen, 2009), willingness to interact with members of an opposing socio-political group (Sagiv & Schwartz, 1995), stigmatization of those with mental illness (Norman, Sorrentino, Windell, & Manchanda, 2008), a client’s overt behavior in counseling sessions (Sagiv & Schwartz, 2004), efficacy of psychotherapy (Whalley & Hyland, 2009), contraceptive use (Kendall et al., 2005), delaying the initiation of sexual activity (DiLorio, Dudley, Soet, & McCarty, 2004; Stallworth et al., 2004; Tsai, 2002), and substance use behaviors (Dollinger & Kobayashi, 2003).

Some studies found that those who endorse high levels of self-enhancement values (i.e., emphasis on pleasure/gratification, success, ambition, authority over others, wealth) come from more individualistic cultures while those in a more collectivistic culture endorse lower levels (Chen et al., 2009; Kurman, 2003; Kurman, Yoshihara-Tanaka, & Elkoshi, 2003). In examining a client’s overt behavior during a career counseling session, Sagiv and Schwartz (2004) found that a client’s assertion of independence correlated positively with values of self-direction (i.e., independent thinking/action, curiosity) and achievement (i.e., personal success) and negatively with values of conformity (i.e., restraint of actions/impulses that is not socially acceptable) and
tradition (i.e., respect, commitment, and acceptance of customs of traditional culture). While a client’s insightfulness during a counseling session was negatively correlated with the values of conformity and tradition, and positively correlated with values of maturity. Another study (Whalley & Hyland, 2009) found that if individuals perceived the type of therapeutic treatment (i.e., cognitive behavior, psychodynamic, client-centered) to match their values priority, the efficacy of that treatment is significantly increased.

A study conducted among male college students found that heavy drinkers compared to light drinkers/abstainers were more likely to endorse Hedonism and Stimulation (Dollinger & Kobayashi, 2003). This was confirmed in a study by Schwartz and his colleagues (2001) where they found that in a sample of 3210 South African university students, alcohol use was positively associated with the values of stimulation and hedonism while it was negatively associated with conservation values of tradition, conformity, and security.

Schwartz Values Theory and Studies in China and Hong Kong

Literature on Schwartz Values Theory in Chinese adolescents (especially Hong Kong Chinese) are scarce. A study by Bond and Chi (1997) explored the relationship between Schwartz Values Theory and the anti-social behavior in a sample of 1841 Chinese high school students (ages 12 to 17) from across several urban cities in China (not including Hong Kong). Results from the study found that those who place low priority on the values of universalism, benevolence, and conformity were those who exhibited high levels of antisocial behaviors. However, the value domains only accounted for 4% of the variance in antisocial behaviors. Certainly there are other factors that influence anti-social behaviors, although this was not a focus of Bond and Chi’s research.

To date, there are only a handful of studies that studied the relationship between specific
behaviors and the Schwartz Values Theory in youths living in Hong Kong (Deeds, Stewart, Bond, & Westrick, 1998; Lam et al., 2004a; 2004b; Stewart, Bond, Deeds, Westrick, & Wong, 1999; Stewart et al., 1998; Yik & Tang, 1996). However, three of the five studies focused on youths who attend an international high school. Students from this particular high school are foreign students (expatriates from different countries), and are not a native of Hong Kong.

Nonetheless, two studies assessed the relationship between values system and emotional stability (Lam et al., 2004b; Yik & Tang, 1996). Yik and Tang (1996) sampled 222 Hong Kong university students (mean age was 19.1, SD = 1.69). Values were measured by the Schwartz Value Survey (SVS; 1992). Results showed that those who were emotionally stable place high values priority on tradition and low values priority to achievement. Those who were assessed as being emotionally unstable were individuals who constantly feel tense, anxious, and restless. These individuals placed high value priority on achievement. This may be due to the fact that being motivated to achieve provides them with a channel to ventila te their extra restlessness.

Another study examined suicidality and values system in 2427 Hong Kong adolescents from age 14 to 18 years-old (Lam et al., 2004b). The values of self-direction/independence (individualistic values) and obedience/respect (tradition values) were measured by Schwartz’ Portrait Values Questionnaire (PVQ) and suicidality was categorized as suicidal ideation in the past year, plans for a suicide attempt, attempted suicide, and made a serious attempt requiring medication assistance. Results showed that the value of tradition (obedience/respect) protected adolescents from suicidal ideation for both girls and boys. For suicide attempts, the value of tradition was only protective for girls. For boys, the value of self-direction was correlated with reduced risk of planning and attempting suicide. In all analyses, there was an effort by the researchers to control for the variables of depressive symptoms and quality of family
relationships. Lam and colleagues suggested that the difference between what values protect boys or girls are due to gender-role differentiation. Since Hong Kong culture supports these gender role differences, societal support may decrease the stress that is involved with incorporating these roles for boys and girls.

Hong Kong History and Culture

Hong Kong is situated in south-eastern China and evolved from a harbor village to become a densely populated, modern, multi-ethnic city and financial center. Hong Kong’s location and status as a commercial port have significantly impacted its history. The Opium War of 1842 forced Hong Kong Island and nearby islands to be ceded to Great Britain. Parts of the mainland were subsequently added to the British holdings on a 99 year lease. On July 1st 1997, the expiration of that lease led to the return of Hong Kong to the sovereignty of China. Hong Kong became a Special Administrative Region of the People's Republic of China. With respect to this study, "Hong Kong" stands for the Hong Kong Special Administrative Region (Hong Kong SAR) while "China" stands for the mainland of China.

Hong Kong is divided into Hong Kong Island, Kowloon Peninsula, and the New Territories (with a total of 262 outlying islands), with a total area of 1,104 square kilometers and a population of 7.0 million (Census and Statistics Department Hong Kong Special Administrative Region, 2009b). Government statistics from a 2009 census showed that the vast majority of Hong Kong people are of Chinese ethnicity (95%). With regard to language, 90% of people over the age of five speak Cantonese. Based on demographics, Hong Kong is fundamentally a Chinese society; this is also true culturally. Most of the Hong Kong Chinese population (especially the adults) are immigrants from Mainland China. These immigrants carry with them cultural traditions from all over China.
However, one cannot state that Hong Kong is a 100% Chinese society, because it has been a British Colony for one and a half centuries. The British established the administrative-legal framework that has become embedded in how Hong Kong functions currently. Furthermore, Hong Kong is a society that is ever-changing. Over the past couple of decades, Hong Kong has had tremendous economic growth, which secured its position as Asia’s most highly modernized industrial-commercial center. Hong Kong has been culturally influenced by all parts of the world, notably the West. Thus, to fully comprehend the beliefs and realities of Hong Kong society, one needs to not only acknowledge its Chinese cultural heritage, but also how it has evolved and transformed.

The people of Hong Kong have a pragmatic attitude and make use of material resources from Mainland China while distancing themselves from mainland politics. They have maintained Chinese culture, especially a strong allegiance to family life, while incorporating cultural influences from the West (i.e. U.K. or North America). The community places emphasis on learning and education. The majority of schools are publicly funded but privately run by sponsoring bodies, the majority of bodies being religious organizations. Of these religious organizations, the majority are Christian.

This introductory information shows that education in Hong Kong occurs in a context in which the families of the Chinese majority live according to Chinese cultural heritage while many of them send their children to schools run by Christian organizations. This evidences a mix of sources of influence on the beliefs and values of the people in Hong Kong.
The low frequency of problem behaviors reported in Hong Kong raises the possibility that such behaviors indicate deviance more reliably than in the West (Lam et al., 2001a; 2001b). In Western cultures, problem behaviors are considered to be normative and an essential part of development during adolescence (Baumrind, 1991); however, in the Chinese culture, adolescent problem behavior is not considered normative, and is considered a source of shame for the family (Stigler et al., 1985). When you take into account the Chinese cultural norms, those who participate in problem behaviors are considered deviants and thus more seriously violate the normative behavior that is expected from adolescents. This disparity in the way the culture sends messages to the adolescents, and the normative urge to participate in risky behavior to express autonomy may cause some adolescents turmoil.

Although engagement in problem behaviors in Hong Kong adolescents is low compared to Western counterparts (Feldman et al., 1991; Lee et al., 2005; Lee & Tsang, 2004; Lee et al., 2009; Lo & Globetti, 1999), there has been an increase in that past 10 years. Data from the Hong Kong Police Force (2009) shows an increase in the number of arrests from 2009 (January to June) to the same period in 2008, there is a 6.8% increase in arrests (2,388 arrests compared to 2,247 arrests) for juveniles (ages 10 to 15) and a 2.8% increase in arrests (2,512 arrests compared to 2,444 arrests) for young persons (ages 16 to 20). Furthermore, in the year 2008, there were 4,178 arrests of juveniles and 4,830 arrests for young persons, which is a 14.5% and 17.5% rise from 2006 (3,649 juvenile and 4,111 young persons arrests). Other statistics also support the notion that delinquency is on a rise.
Results from a study by the Hong Kong Federation of Youth Groups (HKFYG; 2005), showed a significant increase in girls joining gangs (especially all female groups) and taking part in delinquent behaviors (HKFYG, 2005; Tam & Taki, 2007), with those in Form 2 (age 13) being the most vulnerable to participate in these deviant activities. This gender difference was found in research a decade ago, Davis and colleagues (1998) explored behaviors in Chinese juvenile delinquents in Hong Kong. A total of 398 (183 females, and 215 males) juvenile delinquents from age 12 to 18 completed the interviews. Results showed significant gender differences in the frequency of delinquent behaviors. As compared to males, there were significantly more females that committed acts of vandalism, drawing graffiti, running away from home, using illicit drugs, throwing things from heights, and committing indecent assault or sexual abuse/offense. On the other hand, males significantly engaged in more breaking and entering, robbery/burglary, pick pocketing, and gang fights. Berger (1989) attributed this gender difference to a gender “role strain” where females are faced with a conflict between their internal and external expectations. Although Hong Kong is known as the most modernized and industrialized city in Asia, the traditional philosophy of gender inequality still exists. Some female adolescents may be experiencing this role strain while also facing problem behavior risk factors (i.e., deviant peers, family conflict, opportunities for deviance); thus engaging in deviant behaviors may be an outlet for this conflict; albeit potentially harmful.

In the last decade, there has been much public attention given to ‘young night drifters’ (Lee, 2000) or ‘marginal youths’ (Ngai & Cheung, 2005), a term given to Hong Kong adolescents who spend all evening and throughout the night wondering the streets, and engaging in deviant behaviors (e.g., smoking, alcohol use, chasing each other around, fighting and teasing with each other, vandalizing, using soft drugs, petting publicly, casual sex, and harassing
pedestrians). The majority of these youth lives in the New Territories, and are from intact family homes (67%); although over half of the 60 adolescents (ages 15 to 17) interviewed had dropped out of school, with 62% reporting poor academic performance. Furthermore, when asked about friends, 95% reported that they had close friends, and the majority reporting that those friends were also ‘night drifters’. In Ngai and Cheung’s (2005) study examining marginal youths, vandalism was found to be the most reported delinquent behavior, followed by gang activity, assault, bullying, and substance use. Another study found that among 3000 Hong Kong high school students sampled, fighting/bullying and involvement in a triad (gangs) were the second and third most reported problems in their schools (Yue & Ho, 1999).

Through this research and significant media attention, the Hong Kong government has set up several organizations to reach out to these youths. In February of 2008, Hong Kong’s Secretary for Labor and Welfare went to visit these young night drifters to encourage them to spend time in a safer environment. More specifically, youth mobile teams (5 social workers per one mobile team) are in service from 21:00 until 07:00, with actual field work (on the streets) from 23:00 to 07:00. The mobile team would go out to search for these youths (night drifters/marginal youths) and would assess their need of temporary shelter services (transported to residential centers). Based on the youths’ assessed needs, the mobile team would provide crisis intervention, counseling, escorting, and service referrals. In a period of 16.5 months, the two mobile teams serviced over 1,477 youths.

In a study comparing delinquency and gang/triad involvement across three cities in China (i.e., Hong Kong, Shanghai, and Guangzhou), delinquent adolescents ($M = 15.8$ years; $N = 838$) from Hong Kong reported significantly more gang involvement (current and past involvement)
than any of the other two cities (Ngai, Cheung, & Ngai, 2007). Furthermore, Hong Kong adolescents had the lowest moral beliefs, parental control, and attachment to teachers.

With respect to drinking alcohol, 20% of underage respondents (under 18 years of age) admitted that they had used alcohol (HKFYG, 2000). Studies at Hong Kong universities have found that 61% reported lifetime alcohol use and 14% reported binge drinking (as defined by NIAAA) in the past month (Abdullah, Fielding, & Hedley, 2002). Data from the Centre for Health Protection (2006) found an increase in the rate of binge drinking in the past month (at least once) among Hong Kong adults to have increased within a one year period from 24% to 29% (2004 to 2005). More remarkable are those who binged three or more times, there was an increase from 35 to 45%. Griffiths and her colleagues (2006) studied alcohol use among 2968 first year students (mean age of 18.9 years) at the Chinese University of Hong Kong. The surveys were given to students prior to them starting their first year classes at the university. Results showed that 62% of the students reported lifetime alcohol use, 7% reported binge drinking, 0.8% had alcohol-related problems, 49% reported not drinking any alcohol in the past year. Furthermore, males reported a higher frequency of drinking and binge drinking compared to females.

A 2008 study (Kim et al., 2008) examined the prevalence rates of problem drinking in Hong Kong (N = 9,860) and found that the younger age groups (young adults) had the highest rates of drinking problems (i.e., binge drinking, alcohol abuse, and alcohol dependence). Furthermore, smoking was significantly related to the likelihood of problem drinking among both genders. Griffiths’ study (2006) also collected data on smoking, and found that 96.4% (2519) of respondents never smoked, 3.4% (88) reported smoking in their lifetime, and 0.2% (6) were current smokers (smoking 5 or more cigarettes per day). Fifty-six males (4.6%) reported
lifetime cigarette smoking, and 32 (2.4%) females reported lifetime use. There were 5 (0.4%) current male smokers and 1 (0.07%) female current smoker. Although there are low reported rates of smoking, there is a significant association between smoking and alcohol use. The study states some reasons for the low rate of alcohol use in Chinese young adults: genetic factors (intolerance of alcohol causing illness) and social (excessive and solitary drinking not socially acceptable), and cultural influences (living at home, family harmony and obedience are highly valued). Although rates of alcohol and tobacco use are low, they are still the most prevalent substances used among Hong Kong adolescents (HKFYG, 1999).

The Census and Statistics Department’s (C&SD; 2009a) survey of smoking patterns of Hong Kong residents found that 754,800 were current smokers (had a smoking habit), which is 13.2% of all persons aged 15 and over living in Hong Kong. Of the current smokers, 679,000 (90.0%) were daily smokers (daily cigarette smoking habit), while the other 10% (75,300) were categorized as non-daily smokers. The percentage of daily cigarette smokers has been steadily decreasing over the past decade and a half (since 1993). Although the number of daily cigarette smokers has decreased, the daily consumption of cigarettes of daily cigarettes smokers has increased: from 13 per day in 2005 to 14 per day in 2008. With regard to gender differences, males (20.5%) tend to smoke significantly more than females (3.6%). Focusing specifically on the age range of 15 to 19 years, the C&SD found that only 2.4% of those in this age group were daily cigarette smokers. On average, daily cigarette smokers (age 15 to 19 years) consumed 9 cigarettes in 2005 and 11 cigarettes in 2008. This increase in consumption coincides with the overall Hong Kong population increase, but at a more alarming rate of increase. Since the first of January 2007, Hong Kong has banned smoking in the majority of public places, which includes restaurants, workplaces, schools, karaoke lounges and other public areas. Even smoking
outdoors, at public beaches, swimming pools, sports grounds, museums and most areas in public parks is prohibited. As smoking becomes less socially acceptable, the C&SD cautions their statistics, stating that the actual percentage of youth smoker may not be represented in the C&SD report due to underreporting of smoking behavior.

Adolescent cigarette smoking (in the past three months) have been significantly associated with illnesses such as, chronic anxiety and/or insomnia, disorders of the digestive system, accidental injury, headache and/or dizziness, and skin problems (Lam et al., 2001b). In a study among 4116 high schools (age 13 to 18 years), Lam et al. (2001b) found that 30% of the adolescents reported ‘ever smoking’. Smoking was positively correlated with age. Generally, males were more likely to report smoking. Finally, current smokers significantly reported more psychological symptoms of anxiety, depression and somatic complaints.

Psychological symptoms of internalizing and externalizing problem behaviors have been extensively studied and found to be related to higher incidences of smoking, drinking, and delinquency (Burke et al., 2007; Clark et al., 1999; Hall et al., 2009; Henry et al., 1993; Hunt & Hopko, 2009; Kaplow et al., 2001; Mason & Windle, 2002; Molina & Pelham, 2003; Owens & Shippee, 2009; Pardini et al., 2004; Pardini et al., 2007; Prinstein & La Greca, 2009; Saraceno et al., 2009; Skeer et al., 2009; Sung et al., 2004; Tillfors et al., 2009; Weinberg et al., 1998). This clearly demonstrates the importance of including this variable as a predictor of problem behavior outcome. In Hong Kong, leading researchers in the area of children and adolescent psychopathology published Youth Self-Report’s normative T-score values \( (N > 1500) \): 48.4 \( (SD = 9.8) \) for Total Problems, 48.5 \( (SD = 9.9) \) for Internalizing Problems, and 48.7 \( (SD = 10.0) \) for Externalizing Problems (Leung et al., 2006). A recent study with Hong Kong adolescents (Leung et al., 2008) examined prevalence rates of various DSM-IV disorders. Prevalence rates are as
follows: 6.9% for anxiety disorders, 1.3% for depressive disorders, 3.9% for attention deficit/hyperactivity disorder (ADHD), 6.8% for oppositional defiant disorder (ODD), 1.7% conduct disorder (CD), and 1.1% for substance use disorders. The same study also measured psychological problem behaviors using the YSR and found T-scores for Total Problems to be 46.1 (SD = 10.1), Internalizing Problems to be 45.3 (SD = 9.7), and Externalizing Problems to be 48.5 (SD = 10.6). These values are only slightly lower than the normative YSR T-scores published in 2006, but still higher than the overall YSR T-scores (Total Problems) from a 2003 published study, where the overall Total Problems score was 44.2 (Verhulst et al., 2003). In a 2008 study, Ng, Chan, and Ho compared the mental health of high school students across Hong Kong, Shanghai, and Beijing (N = 5058). Results found that students from Hong Kong had significantly poorer mental health and self-esteem compared to the other two metropolitan cities. From this review of psychological problem behaviors in Hong Kong adolescents, it is apparent that these youths are at risk for engagement in problem behaviors.

Hypotheses

As a result of the review of the literature examining sensation seeking, psychological problem behaviors, values orientation, and problem behavior outcomes of smoking, alcohol use, and delinquency, the following hypotheses are presented:

\[ H_{01} : \] Problem behavior outcomes will be related to the independent study variables of sensation seeking, psychological problem behavior, values orientation, and to each other.

\[ H_{01a} : \] There will be a positive relationship between sensation seeking and the problem behavior outcome of smoking, alcohol use, and delinquency. As sensation seeking increases, smoking, alcohol use, and delinquency will also increase.

\[ H_{01b} : \] There will be a positive relationship between psychological problem behavior, both internalizing and externalizing problem behavior, and the problem behavior outcome of smoking, alcohol use, and delinquency. As
internalizing and externalizing problem behavior increases, smoking, alcohol use, and delinquency will also increase.

H01c: There will be a positive relationship between the values orientation of hedonism, openness to change, and self-enhancement, and the three problem behavior outcomes of smoking, alcohol use, and delinquency. As the values orientation of hedonism, openness to change, and self-enhancement increases, smoking, alcohol use, and delinquency will also increase.

H01d: There will be a negative relationship between the values orientation of conservation and self-transcendence, and the three problem behavior outcomes of smoking, alcohol use, and delinquency. As the values orientation of conservation and self-transcendence increases, smoking, alcohol use, and delinquency will decrease.

H01e: There will be a positive relationship between the three problem behavior outcomes of smoking, alcohol use, and delinquency. As smoking increases, alcohol use and delinquency will also increase.

H02: Problem behavior outcomes will be predicted based on age, gender, school band level, etc.

H02a: Delinquent behavior will be predicted based on age, gender, school band level, etc.

H02b: Smoking behavior will be predicted based on age, gender, school band level, etc.

H02c: Alcohol use behavior will be predicted based on age, gender, school band level, etc.

H03: Adolescents at each of two levels of school band level will differ on their involvement in problem behavior activities.

H03a: Adolescents who are studying at the band three level school are more likely to engage in delinquent behaviors than adolescents who are studying at the band one level school. That is, the mean level of delinquent activity will be higher for those studying at the band one level school.

H03b: Adolescents who are studying at the band three level school are more likely to be current smokers than adolescents who are studying at the band one level school.

H03c: Adolescents who are studying at the band three level school are more likely to be current alcohol users than adolescents who are studying at the band one level school.
Summary

Research has shown a relationship between sensation seeking, psychological problem behaviors, and values orientation on problem behavior outcomes, but little is known about how these factors affect Chinese adolescents in Hong Kong. A proposed predictive model is illustrated in Figure 3, which represents the independent and dependent variables of this study. Furthermore, Figure 4 presents the hypotheses and statistical analysis to test each hypothesis.
Figure 3. Problem behaviors in adolescents and the effect of risk and protective factors on these behaviors.
<table>
<thead>
<tr>
<th>Hypothesis</th>
<th>Variables</th>
<th>Statistical Analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>H₀₁:</td>
<td>Problem behavior outcomes will be related to the independent study variables of sensation seeking, psychological problem behavior, and to each other.</td>
<td></td>
</tr>
<tr>
<td>H₀₁a:</td>
<td>There will be a positive relationship between sensation seeking and the problem behavior outcome of smoking, alcohol use, and delinquency. As sensation seeking increases, smoking, alcohol use, and delinquency will also increase.</td>
<td></td>
</tr>
<tr>
<td>H₀₁b:</td>
<td>There will be a positive relationship between psychological problem behavior, both internalizing and externalizing problem behavior, and the problem behavior outcome of smoking, alcohol use, and delinquency. As internalizing and externalizing problem behavior increases, smoking, alcohol use, and delinquency will also increase.</td>
<td></td>
</tr>
<tr>
<td>H₀₁c:</td>
<td>There will be a positive relationship between the values orientation of hedonism, openness to change, and self-enhancement, and the three problem behavior outcomes of smoking, alcohol use, and delinquency. As the values orientation of hedonism, openness to change, and self-enhancement increases, smoking, alcohol use, and delinquency will also increase.</td>
<td></td>
</tr>
<tr>
<td>H₀₁d:</td>
<td>There will be a negative</td>
<td></td>
</tr>
</tbody>
</table>

**Independent Variables**
- Sensation Seeking
- Internalizing Problem Behaviors
- Externalizing Problem Behaviors
- Values: Openness to Change
- Values: Self-Transcendence
- Values: Conservation
- Values: Self-Enhancement
- Values: Hedonism

**Dependent Variables**
- Problem Behavior Outcome
  - Smoking
  - Alcohol use
  - Delinquency

Pearson product moment correlations were used to examine the strength and direction of the relationships between the independent and dependent study variables.
relationship between the values orientation of conservation and self-transcendence, and the three problem behavior outcomes of smoking, alcohol use, and delinquency. As the values orientation of conservation and self-transcendence increases, smoking, alcohol use, and delinquency will decrease.

H01c: There will be a positive relationship between the three problem behavior outcomes of smoking, alcohol use, and delinquency. As smoking increases, alcohol use and delinquency will also increase.

<table>
<thead>
<tr>
<th>Outcome Variables</th>
<th>Predictor Variables</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoking</td>
<td>Age</td>
</tr>
<tr>
<td>Alcohol use</td>
<td>Gender</td>
</tr>
<tr>
<td>Delinquency</td>
<td>School Band Level</td>
</tr>
</tbody>
</table>

H02: Problem behavior outcomes will be predicted based on age, gender, school band level, etc.

H02a: Delinquent behavior will be predicted based on age, gender, school band level, etc.

H02b: Smoking behavior will be predicted based on age, gender, school band level, etc.

H02c: Alcohol use behavior will be predicted based on age, gender, school band level, etc.

H03: Adolescents at each of two levels of school band level will differ on their involvement in problem behavior activities.

H03a: Adolescents who are studying at the band three level school are more likely to engage in delinquent behaviors than adolescents who are studying at the band one level school. That is, the

<table>
<thead>
<tr>
<th>Independent Variable</th>
<th>Dependent Variable</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Band Level</td>
<td>Problem Behavior Outcome</td>
</tr>
<tr>
<td>• Band 1</td>
<td>• Smoking</td>
</tr>
<tr>
<td>• Band 3</td>
<td>• Alcohol use</td>
</tr>
<tr>
<td></td>
<td>• Delinquency</td>
</tr>
</tbody>
</table>

Regressions were employed to determine the contribution of the significantly correlated variables in explaining each of the three problem behavior outcomes in this sample. The three problem behavior outcomes (smoking, alcohol use, and delinquent behavior) were separately analyzed. Linear regression was deployed for delinquent behavior (continuous variable), whilst multinomial logistic regression was used for smoking and alcohol use (categorical variable with three categories).
mean level of delinquent activity will be higher for those studying at the band one level school.

\( H_{03b}: \) Adolescents who are studying at the band three level school are more likely to be current smokers than adolescents who are studying at the band one level school.

\( H_{03c}: \) Adolescents who are studying at the band three level school are more likely to be current alcohol users than adolescents who are studying at the band one level school.

Figure 4. Hypotheses and statistical analysis.
Chapter 3: Methodology

Setting

The Hong Kong secondary school education system is largely based on the British schooling system. Secondary school or high school begins after the seventh year of formal education, after Primary Six, called Form One. The first three years of high school (Forms One to Three) are compulsory and free, with most students spending five years in high school. During Form Four and Five, the students begin preparing for the Hong Kong Certificate of Education Examination (HKCEE), which takes place after Form Five. If the student passes the examination, they will be promoted to Form Six. During Form Six, the students will begin to prepare for the Hong Kong Advanced level Examination (HKALE), which is to be taken after Form Seven. Currently, there is a proposal to change the secondary school educational system from seven to six years, thereby merging the HKCEE and HKALE into one exam.

In Hong Kong, most secondary schools (total of 451 schools and 482,000 students) are considered public schools where they are either directly managed by the government or are sponsored by voluntary agencies with funding provided by the government. The majority of schools are Christian schools (52%). Furthermore, most of the schools are grammar schools, which follow a common core curriculum comprising Chinese language, English language, Mathematics, and Integrated Science. Practical subjects, such as Home Economic, Design and Technology, Music, Arts, and Physical Education, are also included. English is the medium of study in most secondary schools.

This study collected data on students studying from Form 2 to Form 7 (age 13 to 18), among two high schools in Hong Kong. Students in this study are comparable to those studying in Grade 8 to Freshman Year in college in the United States education system. In Hong Kong,
School banding is a system of assigning elementary school students into different bands for secondary school allocation, a form of streaming students based on their academic ability. Based on the results from achievement tests (math, Chinese, and English) taken last year of elementary school, students are arranged to one of three different bands of secondary schools. It is the students who are banded rather than the schools, but by a transference of designation, secondary schools with an intake of high ability students (band one) are considered as “band one schools”. Similarly, schools which have an intake of low ability students (band three) are called “band three schools” by the community. These students are perceived as academic low achievers at risk of academic failure and behavioral difficulties. It is now government policy that schools with a considerable proportion of band three students be given extra resources. There must be consideration of a school’s environment since this may differ depending on which band category the school falls under. In band one schools, the majority of students come from middle or high socioeconomic backgrounds. They are usually located in more prosperous areas, have better school facilities, and have more extracurricular programs than the other band schools. Student motivation and achievement can be affected by a school’s physical and cultural environment (Maehr & Midgley, 1996).

Demographics of the two high schools. Bethel High School is a band three (low academic ability) school, located in Fairview Park, a private housing estate in the suburbs of Yuen Long, New Territories, in Hong Kong. Wong Shui Chi Secondary School is a band one (high academic ability) school, located in the suburbs of Tai Po, New Territories, in Hong Kong. The level of education of the teachers from the band one school is as follows: 5% has their Certificate in Masters/Mistress, 60% has their bachelor’s degree, 33% has their master’s degree, and 2% has their doctoral degree. The level of education of the teachers at the band one schools
is 1.7% has their Certificate in Masters/Mistress, 71.2% has their bachelor’s degree, 27.1% has their master’s degree, and none has a doctoral degree. All teachers from both schools are proficient in Chinese and English. Basic demographics of each high school are shown in Table 4 (HKedCity, 2008).

Table 4

**Basic Demographics of Wong Shui Chi Secondary School and Bethel High School**

<table>
<thead>
<tr>
<th></th>
<th>Wong Shui Chi Secondary School</th>
<th>Bethel High School</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year of commencement</td>
<td>1960</td>
<td>1950</td>
</tr>
<tr>
<td>School band level</td>
<td>band one</td>
<td>band three</td>
</tr>
<tr>
<td>School type</td>
<td>Aided / Co-ed</td>
<td>Aided / Co-ed</td>
</tr>
<tr>
<td>School size (land area)</td>
<td>8,000 sq. m.</td>
<td>8,000 sq. m.</td>
</tr>
<tr>
<td>Number of students enrolled 2007-2008</td>
<td>1150</td>
<td>924</td>
</tr>
<tr>
<td>Number of teachers</td>
<td>63</td>
<td>59</td>
</tr>
<tr>
<td>Religion</td>
<td>Protestantism/Christianity</td>
<td>Protestantism/Christianity</td>
</tr>
<tr>
<td>School motto</td>
<td>Learnedness, Love-Dedication, Integrity</td>
<td>You will know the Truth, and the Truth will make you free.</td>
</tr>
<tr>
<td>Teacher qualification:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(number of teachers)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Working experience:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0-4 years</td>
<td>13</td>
<td>10</td>
</tr>
<tr>
<td>5-9 years</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>≥ 10 years</td>
<td>42</td>
<td>42</td>
</tr>
<tr>
<td>Education qualification:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NET teacher</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Special education</td>
<td>0</td>
<td>2</td>
</tr>
<tr>
<td>Teacher training</td>
<td>60</td>
<td>54</td>
</tr>
</tbody>
</table>
Participants

The sample (age 13 to 18 years) was drawn from two secondary schools in Hong Kong, each representing the top and bottom school bands (i.e., band one and three). All home room classes were targeted for participation in the proposed study. The school principals provided letters of support for the researcher to conduct this study in their high school. Wayne State University Human Investigative Committee Internal Review Board (WSU HIC IRB) gave this study full approval (10-30-2007, HIC #107407B3E). Copies of WSU’s HIC full approval and all amendments filed with HIC are located in Appendix B.

The final sample consisted of 1385 students from two high schools in Hong Kong. The total number of eligible students aged 13 to 18 at these two high schools totaled 1499. The number of eligible students for the band one school was 865 and 634 for the band three school. Of this number, 1432 volunteered to participate in the study for a participation rate of 95.8%. The researcher mailed parent information sheets to the homes of all students that were eligible to participate in the study (N = 1499). Of this number, 4 parents did not allow their children to participate in the study. Fifty-nine students were absent during the data collection day, thus the final participant pool was comprised of 1436 students. A total of 1436 students completed the research questionnaire, indicating their willingness to participate in the study. Of these protocols completed, 51 were unusable due to significant missing data across all scales. The current study eliminated questionnaires from analyses if there were any missing data on any of the following scales: Sensation Seeking Scale, Youth Self Report, Portrait Values Questionnaire, and the individual questions from the Adolescent Health and Development Questionnaire measuring problem behavior outcomes (smoking, drinking, and delinquency). The percentage of missing data was relatively small ranging from 21 to 77 participants (1.5 to 5.5%) with missing data on
various scales, out of a total of 1385 total participants. Hence, the study did not replace any missing values and may have varying sample sizes for each analysis.

Procedure

Data collection involved a self-report questionnaire that was administered to students in classrooms by the trained research staff. Two research assistants were hired to administer the questionnaire at both schools. Both research assistants completed Wayne State University HIC training and also training specific to the current study (consent procedure and questionnaire administration). One research assistant was a faculty member at a local teacher’s college in Hong Kong, and the other research assistant was a researcher employed by this faculty member.

During questionnaire administration, the home room teacher was not present in the classroom. The research staff members followed a standardized protocol in consenting and giving instructions to the students. The Participant Information Sheet (approved by WSU HIC IRB) was given to all students (translated into Chinese). English and Chinese versions of all information sheets and informed consents are located in Appendix C. After giving all instructions to the students and answering all student questions, the research staff remained in the classroom for student supervision and data collection integrity. For those students who chose not to participate in the research, they continued to remain in the classroom and occupied themselves as they wished (e.g., completed homework, read, etc). Students who volunteered to participate in the research retrieved a research packet that was in a box in the front of the classroom, they completed the questionnaire, and then placed it back in the same box from which it was retrieved. The survey was administered under confidential and anonymous conditions, and participants were instructed not to write their names on the questionnaires and were given envelopes in which to seal their completed surveys. Participants were informed that their
responses were anonymous and would not be known by their parents, school authorities, or teachers. Students, age 13 to 17 years, participated under a consent procedure in which parents were sent, by first class mail delivery, a Parent Consent Form (approved by WSU HIC IRB) that informed them about the purpose and nature of the study. This consent form was translated into Chinese. Parents were informed that they could exclude their child from the research, if they wish, by notifying the researcher or the school within two weeks. All students were informed about the purpose and nature of the research at the time of the questionnaire administration, if they chose to complete the questionnaire packet, this indicated their consent to participate in the study. They were also instructed that they could refuse or discontinue participation at any time during the questionnaire completion period.

Measures

Participants completed a paper-and-pencil questionnaire packet comprised of several scales. The variables used in the analyses are based on single and combined items. All measures were written in Chinese, and have all come from existing Chinese versions of the scales, obtained directly from its original authors. The Chinese scales have all been tested for reliability and validity in Hong Kong with results published in peer reviewed journals.

Demographics. The demographics survey collected the following information on the participant: age (in years), gender, current grade level, GPA, school band level, socio-economic status, employment, school/community involvement and religious/spiritual involvement, family structure (living situation, and dual parents, single parent, other), ethnicity and country of origin (Hong Kong, China, other), and primary language spoken at home. Data collected on the adolescent’s academic grade ($N = 623, 45\%$), socioeconomic status ($N = 942, 68\%$), household composition ($N = 817, 59\%$), and engagement in religious activities ($N = 1219,$
88%) could not be used in any analysis, due to a significant amount of cases with missing responses and/or also multiple responses from a single adolescent. Copies of the questionnaire in English and Chinese are in Appendix A.

**Sensation seeking.** The Sensation Seeking Scale Form-V (SSS-V; Zuckerman, 1994; Zuckerman, Eysenck, & Eysenck, 1978) is a 40-item questionnaire that yields four subscale scores (10 items each): (1) Thrill and Adventurer Seeking (TAS; desire to engage in sports or other physical activities involving speed or danger), (2) Experience Seeking (ES; seeking of experience through the mind and senses, travel, and a nonconformist life-style), (3) Disinhibition (DIS; desire for social and sexual disinhibition as expressed in social drinking, partying, and variety in sexual partners), and (4) Boredom Susceptibility (BS; an aversion to repetition, routine, and restlessness when things are not changing). It also yields an overall index of sensation seeking (total score; the sum of the four subscale scores, maximum score of 40), which is used in this study. The SSS-V presents participants with a choice between two opposite statements, with one point assigned for each choice of the option reflecting the seeking of varied, novel, complex, and intense situations and experiences, and the willingness to take physical, social and financial risks for the sake of such experience (Zuckerman, 1994). The total score has good internal reliabilities of .83 to .86, and a 3-week retest reliability of .94 (Zuckerman, 2007). The Chinese version of the SSS-V was obtained from the original author (Wang et al., 2000), and permission to use was granted. Wang et al. (2000) and Ke et al. (2007) have shown good reliabilities ($\alpha \geq .76$) with the Chinese SSS-V within the Chinese culture. In the current study, the total score showed good internal reliabilities ($\alpha = .76$).

**Values system.** The 40-item Portrait Values Questionnaire (PVQ; Schwartz et al., 2001; Schwartz, 2005) is constructed based on the Schwartz Value Survey (SVS; Schwartz, 1992;
The PVQ assesses 10 basic values: Benevolence (helpfulness); Universalism (social justice, equality); Self-direction (creativity, freedom); Stimulation (exciting life); Hedonism (pleasure); Achievement (success, ambition); Power (authority, wealth); Security (social order); Conformity (obedience); and Tradition (humility, devoutness). These 10 basic categories cluster to form 4 higher-order values: Openness to Change (Stimulation and Self-Direction), Conservation (Conformity, Tradition, and Security), Self-Enhancement (Achievement and Power), and Self-Transcendence (Universalism and Benevolence). The basic category of Hedonism is not included within a particular higher-order value due to its involvement in both Openness to Change and Self-Enhancement. This current study uses the 4 higher-order values and the basic value of Hedonism. Scored along a six-point likert scale from 1 (not at all like me) to 6 (very much like me), values items are combined to yield a mean score for each values subscale, then again for the higher-order values categories. Since individual and cultural groups differ in their use of the response scales, corrections were made for individual differences before performing further analyses. To correct for scale use, scores were computed for the 10 values by taking the means of the items that index it; then, each individual’s mean score was computed across all 40 value items (called the MRAT); then the MRAT was subtracted from each of the 10 value scores. The PVQ can be used from age 11 and on, and was specifically designed for use in all populations, including those groups with limited literacy. Although the SVS and PVQ have been tested Hong Kong (Luk & Bond, 1993; Schwartz & Boehnke, 2004; Yik & Tang, 1996), there have not been any studies using the PVQ in this particular adolescent population. The Chinese version of the PVQ was obtained from Dr. Shalom Schwartz, and permission to use was granted. Psychometric properties of the original instrument among different populations (14 samples from seven different countries) are adequate (Schwartz et al., 2001; Vecchione et al.,
2009). Test-retest coefficients across an interval of six weeks showed considerable stability, with coefficients ranging from .70 to .80. Cronbach alphas of internal reliability (consistency) ranged from .68 to .75, with Tradition, as the only value with an alpha of .60. Schwartz stated that possibly the low reliability may be due to the diverse component of the value of tradition. In a recent study (Vecchione et al., 2009), the psychometric properties of the PVQ was tested in a sample of 9,847 participants, and results showed a strong internal validity ($RMSEA = .06$) for the PVQ. One study in Hong Kong (Lam et al., 2004b) showed the test-retest reliability over a one month period was .90 (internal reliabilities were not published). In the current study, the overall total values score showed very good internal reliabilities ($\alpha = .94$). The reliabilities for the four higher-order values and Hedonism range from an alpha of .76 to .83.

*Psychological problematic syndrome of behaviors.* To assess adolescents’ psychological problematic symptoms, internalizing and externalizing problem behavior in the previous 6 months, the Youth Self Report (YSR-age 11-18; Achenbach, 1991) was used. The questionnaire consists of 101 items, with possible answer choices of ‘0=not true’, ‘1=somewhat or sometimes true’, and ‘2=very true or often true’. The YSR has a combined total problem score that encompasses eight syndromes: withdrawn, somatic complaints, and anxious/depressed (combined as Internalizing Scale); delinquent and aggressive behavior (combined as Externalizing Scale); and social problems, thought problems, and attention problems (which are neither Internalizing nor Externalizing). Adolescent problem behavior can be conceptualized as two empirically derived syndromes: externalizing versus internalizing behavioral problems (Achenbach & Rescorla, 2001). Social problems, thought problems, and attention problems are indicative neither of externalizing nor of internalizing problems; therefore, are only included in the Total Score.
The Ratings to Scores Utility (RTS) computer program transformed the YSR raw scores that were entered into the SPSS statistical package into an analyzable format. RTS computed the percentiles, T-scores, and subscale scores of the YSR. RTS also produced these scores in a scored data file which was then converted back to into the SPSS package through the A2S utility computer program. All of these computer scoring programs were purchased from ASEBA, the YSR’s publishers. The raw legacy scores were used for analyses in this current study, and not the legacy derived T-scores (normalized scores). Using T-scores would result in changing the distribution of the raw scores, since the derived scores are reduced for skewness and are truncated. Kamphaus and Frick state that the “lack of reflection of the sample characteristics in the T-scores makes them of dubious value for research purposes in particular” (1996, p. 110).

For the original version of the YSR (English version), the mean one week test-retest reliability for the problem scales was .65 for 11- to 14-year-old adolescents and .83 for 15- to 18-year-old adolescents. Internal consistencies for symptom scales ranged from alpha .89 for externalizing problems and alpha .91 for internalizing problems. The YSR has been translated into Chinese and tested in Hong Kong with good test-retest reliability and factorial validity (Ivanova et al., 2007; Leung et al., 2006). Results from Ivanova’s et al. (2007) confirmatory factor analyses of the syndromes in the YSR in 23 societies, found the Chinese YSR (Hong Kong; N = 1,593) to be of good model fit (RMSEA = .043). Test-retest reliability for Total Problems was .86, Internalizing Problems was .81, and Externalizing Problems was .86. In the current study, internal consistencies for the symptom scales are as follows: an alpha of .88 for externalizing problems and an alpha of .90 for internalizing problems. The following represent the normative t-score values for Hong Kong: 48.4 (SD = 9.8) for Total Problems, 48.5 (SD =
(SD = 10.0) for Externalizing Problems (Leung et al., 2008).

Problem behavior outcome. Jessor’s (2002) Adolescent Health and Development Questionnaire (AHDQ) was used to assess the individual levels of adolescent problem behavior involvement of cigarette smoking, alcohol use, and delinquency. Three types of problem behavior were assessed: (1) delinquent behavior (i.e., theft, physical aggression, and vandalism); (2) cigarette smoking (i.e., lifetime use, frequency and quantity of use in the past month and year); and (3) problem drinking (i.e., lifetime use, frequency of drunkenness, high-volume drinking, and negative consequences of drinking). Jessor et al. (2003) has tested the overall reliability of the scale, the Multiple Problem Behavior Index (MPBI), which includes the three problem behaviors stated above. When tested in the U.S., the reliability was .69, and when tested in China, it was .64. When looking at the problem behaviors individually, these are the following cronbach’s alphas: delinquent behavior (U.S. \( \alpha = .84 \), China \( \alpha = .82 \)); cigarette smoking (U.S. \( \alpha = .79 \), China \( \alpha = .84 \)); and problem drinking (U.S. \( \alpha = .71 \), China \( \alpha = .58 \)). In the current study, the MPBI had an internal reliability of .60; while individually, the problem behavior outcomes showed good internal reliabilities (i.e., delinquent behavior \( \alpha = .78 \); cigarette smoking \( \alpha = .90 \); problem drinking \( \alpha = .77 \)).

For the current study, problem behavior outcome for cigarette smoking, alcohol use, and delinquency were calculated as follows:

Cigarette smoking:

a) Never Smoker (NS)-in their lifetime, has never smoked a cigarette ever or has only tried it once

b) Non-current Smoker (NcS)-smoked cigarettes before (at least a few times or
more), but not in the past year

c) Current Smoker (CS)-smoked cigarettes before (at least a few times or more), smoking, and daily smoking in the past month

Alcohol use:

a) Never Drinker (ND)-has never drank alcohol or only had a sip or taste OR has drank more than a sip or taste, but less than 2 or 3 times in their life

b) Non-current Drinker (NcD)-drank alcohol more than 2 or 3 times in their life, but not in the past 6 months

c) Current Drinker (CD)-drank alcohol more than 2 or 3 times in their life, and drinking in the past 6 months

Delinquency:

A set of 10 items that asks how often have they engaged in delinquent behavior in the past 6 months. For example, delinquent behaviors such as, cheating on tests/homework, making fun of or picking on others, shoplifting from a store, lying to a teacher, staying out all night without permission, or carrying a weapon at school. Scored along a five-point likert scale from 1 (never) to 5 (five or more times), with a total score ranging from 10 to 50; thus, a higher score reflects more self-reported delinquency behavior.

Statistical Analyses

All statistical analyses were performed using the Statistical Package for the Social Sciences, version 17.0 (SPSS Inc, 2009). Prior to analysis, the data were assessed for normality and appropriateness of the proposed statistical tests. The data were also assessed for missing data, outliers, linearity (scatterplots), and homoscedasticity (homogeneity of variance), and any
violations of normality. Screening was conducted for out of range values and outliers. Scatterplots were generated between independent and dependent variables to check for the multiple regression assumption of linearity. Scales were all scored according to scoring directions, and cronbach’s alpha was utilized to determine the reliability (internal consistency) of scale scores in this sample. Results were considered significant at a 95% or higher confidence interval. Chi-squares tests were considered only if cell categories had a frequency of 5 or more. Initially, frequencies, means, standard deviations, and proportions were calculated for study variables. Then bivariate correlations were conducted to examine the relationships between study variables. Only significant relationships from the bivariate correlations were assessed using linear and multinomial logistic regressions for its predictiveness of the three problem behavior outcomes (smoking, alcohol use, and delinquency). Finally, independent-samples t-test, cross-tabs, and chi-squares test were computed to assess the relation between enrollment in the two different ability level high schools (Band 1 or 3) and the three problem behavior outcomes.

**Research Question 1.** What is the prevalence of problem behaviors in Chinese adolescents living in Hong Kong? In order to answer this question, descriptive statistics were calculated using SPSS frequencies, means, standard deviations, proportions, and range of scores.

**Research Question 2:** What is the relation between demographic factors, predictive variables, and problem behavior outcomes among these adolescents? Bivariate correlations was used to examine the patterns of relations between all study variables. In addition to examining the bivariate correlations, as described above, the contribution of those variables in predicting problem behavior were explored through linear and multinomial logistic regressions. Regressions were employed to determine the contribution of the significantly correlated variables in explaining each of the three problem behavior outcomes in this sample. The three
problem behavior outcomes (smoking, alcohol use, and delinquent behavior) were separately analyzed. Linear regression was deployed for delinquent behavior (continuous variable), whilst multinomial logistic regression was used for smoking and alcohol use (categorical variable with three categories).

*Research Question 3*: What is the relation between enrollment in different ability level high schools in Hong Kong and problem behavior outcomes? Independent-samples t-test, cross-tabs, and chi-squares test were all performed to examine the relation between students enrolled in Band 1 or Band 3 schools and the three problem behavior outcomes. Independent-samples t-test was used for the continuous variable of delinquent behavior, and cross-tabs and chi-squares test were used for the categorical variables of cigarette smoking and alcohol use.

*Summary*

The methodology, research procedures, and statistical analyses used to describe the research sample and to test the three main hypotheses has been presented in this chapter. The results the statistical analyses will presented in Chapter 4.
Chapter 4: Results of Data Analysis

Results of the data analysis are presented in this chapter. Specifically, SPSS data analysis (SPSS 17.0) was used to describe the sample and to address the research questions. The chapter is divided into three sections. Using descriptive statistics, the first section provides a description of the sample and outcome variables, with the primary study variables described in the second section. The results of the inferential statistical analyses that were used to test the specific hypotheses that guided this study are presented in the last section of the chapter.

The purpose of this study was threefold. The first purpose was to examine the prevalence of problem behaviors, such as smoking behavior, alcohol use, and delinquency among a cross-sectional sample Hong Kong adolescents studying in high school. In addition, demographic variables were examined in the context of these three problem behavior outcomes. The second purpose was to explore the relationship between the study variables and the three problem behavior outcomes. Specifically, whether these outcomes could be predicted by various study variables such as demographic characteristics, level of sensation seeking, psychological problem behavior (externalizing and internalizing problem behavior), and values orientation (conservation, openness to change, self-enhancement, self-transcendence, and hedonism). The final purpose was to evaluate the relationship between enrollment in different ability level high school (school band one and three) in Hong Kong and the problem behavior outcomes among these adolescents. That is, whether these outcomes differed between adolescents from these two high schools.

Description of Problem Behavior Outcome Variables

Jessor’s Adolescent Health and Development Questionnaire (AHDQ) was used to assess the individual levels of adolescent problem behavior involvement of smoking (cigarettes),
alcohol use, and delinquency. Three types of problem behavior were assessed: (1) delinquent behavior (i.e., theft, physical aggression, and vandalism); (2) smoking (i.e., lifetime use, frequency and quantity of use in the past month and year); and (3) alcohol use (i.e., lifetime use, frequency and quantity of use in the past 6 months).

*Smoking.* Table 5 presents the frequency distribution of each categorical level of smoking behavior. For the current study, problem behavior outcome for smoking was calculated as follows:

a) *Never Smoker (NS)*-in their lifetime, has never smoked a cigarette ever or has only tried it once

b) *Non-current Smoker (NcS)*-smoked cigarettes before (at least a few times or more), but not in the past year

c) *Current Smoker (CS)*-smoked cigarettes before (at least a few times or more), smoking, and daily smoking in the past month

A chi square statistic was performed to compare smoking behavior category by gender. School band level comparison is discussed later in the chapter, as it is one of the study hypotheses. A chi-square test of independence was not significant, $\chi^2 (2, 1358) = 5.10, p = .08$, which indicated that smoking behavior was not reliably related to gender. That is, gender and smoking behavior category are independent of each other, without any statistical pattern.
Table 5

*Frequency Distribution in Percentages of Smoking Behavior Category Among the Total Sample, and the Sample by Gender and School Band Level*

<table>
<thead>
<tr>
<th>Smoking Behavior Category</th>
<th>Total</th>
<th>Never Smokers</th>
<th>Not-Current Smokers</th>
<th>Current Smokers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>N</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Total sample</td>
<td>1363</td>
<td>1261</td>
<td>93</td>
<td>30</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Males</td>
<td>681</td>
<td>619</td>
<td>91</td>
<td>19</td>
</tr>
<tr>
<td>Females</td>
<td>677</td>
<td>637</td>
<td>93</td>
<td>11</td>
</tr>
<tr>
<td>School Band Level</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Band one</td>
<td>829</td>
<td>815</td>
<td>98</td>
<td>8</td>
</tr>
<tr>
<td>Band three</td>
<td>534</td>
<td>446</td>
<td>84</td>
<td>22</td>
</tr>
</tbody>
</table>

*Note.* Gender missing data = 5.

*Alcohol use.* Table 6 presents the frequency distribution of each categorical level of alcohol use behavior. For the current study, problem behavior outcome for alcohol use were calculated as follows:

a) *Never Drinker (ND)*-has never drank alcohol or only had a sip or taste OR has drank more than a sip or taste, but less than 2 or 3 times in their life

b) *Non-current Drinker (NcD)*-drank alcohol more than 2 or 3 times in their life, but not in the past 6 months

c) *Current Drinker (CD)*-drank alcohol more than 2 or 3 times in their life, and drinking in the past 6 months

A chi square statistic was performed to compare alcohol use behavior category by gender. School band level comparison is discussed later in the chapter, as it is one of the study hypotheses. A chi-square test of independence was not significant, \( \chi^2 (2, 1345) = 2.63, p = .27, \)
which indicated that alcohol use behavior was not reliably related to gender. That is, gender and alcohol use behavior category are independent of each other, without any statistical pattern.

Table 6

*Frequency Distribution in Percentages of Alcohol Use Behavior Category Among the Total Sample, and the Sample by Gender and School Band Level*

<table>
<thead>
<tr>
<th>Alcohol Use Behavior Category</th>
<th>Total</th>
<th>Never Drinkers</th>
<th>Not-Current Drinkers</th>
<th>Current Drinkers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Total sample</td>
<td>1350</td>
<td>861</td>
<td>64</td>
<td>84</td>
</tr>
<tr>
<td>Gender*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Males</td>
<td>676</td>
<td>416</td>
<td>62</td>
<td>44</td>
</tr>
<tr>
<td>Females</td>
<td>669</td>
<td>440</td>
<td>66</td>
<td>40</td>
</tr>
<tr>
<td>School Band Level</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Band one</td>
<td>819</td>
<td>573</td>
<td>70</td>
<td>30</td>
</tr>
<tr>
<td>Band three</td>
<td>531</td>
<td>288</td>
<td>54</td>
<td>54</td>
</tr>
</tbody>
</table>

*Note.* Gender missing data = 5.

*Delinquency.* For the current study, problem behavior outcome for delinquent behavior was a measure of 10 items that asks how often have they engaged in delinquent behavior in the past 6 months. For example, delinquent behaviors such as, cheating on tests/homework, making fun of or picking on others, shoplifting from a store, lying to a teacher, staying out all night without permission, or carrying a weapon at school. Scored along a five-point likert scale from 1 (never) to 5 (five or more times), with a total score ranging from 10 to 50; thus, a higher score reflects more self-reported delinquency behavior. Table 7 presents the frequency distribution of delinquent behavior.
The mean score for delinquent behavior (raw score) was 4.28 (SD = 5.61) with a median of 2.00 and a range of 0 to 40. The mean score for delinquent behavior (T-score) was 50.00 (SD = 10.00) with a median of 45.93 and a range of 42 to 114. An Independent Samples T-test was used to determine the difference in delinquent behavior between males and females and between school band level one and three. With respect to gender, the results indicate that there is no significant difference in delinquent behaviors between males and females. Although the mean for males ($M = 4.51$, $SD = 5.96$) was higher than the mean for females ($M = 4.05$, $SD = 5.21$), the difference was not large enough to be statistically significant. With respect to school band level, the results indicate that there is a significance difference ($p \leq .001$) in delinquent behavior between band one and band three level adolescents, the average total delinquent behavior score of band one level adolescents ($M = 3.85$, $SD = 5.19$) was significantly higher than that of band three level adolescents ($M = 4.93$, $SD = 6.14$). Table 7 presents the results from the comparison of the means for gender and school band level.

The frequency of responses for each individual delinquent behavior item is presented in Table 8. In the past school year, 2.3% ($n = 19$) band one level adolescents reported that they had been suspended or expelled from school, while 11.1% ($n = 61$) band three level adolescents reported being suspended/expelled. With respect to gang or triad involvement, in the band one level school, four adolescents reported current involvement with a gang/triad while two reported past involvement. In the band three level school, 6 adolescents reported current involvement with a gang/triad while 18 reported past involvement.
Table 7

Descriptive Statistics of the Problem Behavior Outcome of Delinquency in the Total Sample and Differences Between Gender and School Band Level

<table>
<thead>
<tr>
<th></th>
<th>Gender</th>
<th>School Band Level</th>
<th>Total Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
<td>N</td>
</tr>
<tr>
<td>Delinquent Behavior</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Raw score</td>
<td>4.51</td>
<td>5.96</td>
<td>690</td>
</tr>
<tr>
<td>T-score</td>
<td>50.40</td>
<td>10.62</td>
<td>690</td>
</tr>
</tbody>
</table>

*p ≤ .001.
Table 8

Descriptive Statistics of the Individual Delinquent Behaviors in the Total Sample (N = 1385)

<table>
<thead>
<tr>
<th>Delinquent Behavior</th>
<th>Frequency of Delinquent Behavior (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
</tr>
<tr>
<td>Cheated on tests/homework</td>
<td></td>
</tr>
<tr>
<td>Total sample     a</td>
<td>1363</td>
</tr>
<tr>
<td>Band 1</td>
<td>816</td>
</tr>
<tr>
<td>Band 3</td>
<td>547</td>
</tr>
<tr>
<td>Shoplifted from store</td>
<td></td>
</tr>
<tr>
<td>Total sample   b</td>
<td>1369</td>
</tr>
<tr>
<td>Band 1</td>
<td>821</td>
</tr>
<tr>
<td>Band 3</td>
<td>548</td>
</tr>
<tr>
<td>Vandalism</td>
<td></td>
</tr>
<tr>
<td>Total sample   c</td>
<td>1380</td>
</tr>
<tr>
<td>Band 1</td>
<td>820</td>
</tr>
<tr>
<td>Band 3</td>
<td>550</td>
</tr>
<tr>
<td>Lied to teacher</td>
<td></td>
</tr>
<tr>
<td>Total sample   d</td>
<td>1369</td>
</tr>
<tr>
<td>Band 1</td>
<td>821</td>
</tr>
<tr>
<td>Band 3</td>
<td>548</td>
</tr>
<tr>
<td>Taken something of value that isn’t yours</td>
<td></td>
</tr>
<tr>
<td>Total sample   e</td>
<td>1369</td>
</tr>
<tr>
<td>Band 1</td>
<td>821</td>
</tr>
<tr>
<td>Band 3</td>
<td>548</td>
</tr>
<tr>
<td>Stayed out all night without permission</td>
<td></td>
</tr>
<tr>
<td>Total sample   f</td>
<td>1371</td>
</tr>
<tr>
<td>Band 1</td>
<td>822</td>
</tr>
<tr>
<td>Band 3</td>
<td>549</td>
</tr>
<tr>
<td>Lied to parents (where you have been or who you were with)</td>
<td></td>
</tr>
<tr>
<td>Total sample   g</td>
<td>1369</td>
</tr>
<tr>
<td>Band 1</td>
<td>822</td>
</tr>
<tr>
<td>Band 3</td>
<td>547</td>
</tr>
<tr>
<td>Hit another student because you did not like them</td>
<td></td>
</tr>
<tr>
<td>Total sample   h</td>
<td>1368</td>
</tr>
<tr>
<td>Band 1</td>
<td>821</td>
</tr>
<tr>
<td>Band 3</td>
<td>547</td>
</tr>
<tr>
<td>Carried a weapon to school (knife or gun)</td>
<td></td>
</tr>
<tr>
<td>Total sample   i</td>
<td>1368</td>
</tr>
<tr>
<td>Band 1</td>
<td>820</td>
</tr>
<tr>
<td>Band 3</td>
<td>548</td>
</tr>
<tr>
<td>Made fun of or picked on other kids, because they were different or not part of your group</td>
<td></td>
</tr>
<tr>
<td>Total sample   j</td>
<td>1366</td>
</tr>
<tr>
<td>Band 1</td>
<td>820</td>
</tr>
<tr>
<td>Band 3</td>
<td>546</td>
</tr>
</tbody>
</table>

Description of the Sample

The adolescents completed a demographic survey that was comprised of some items from Jessor’s Adolescent Health and Development Questionnaire (AHDQ). These responses are presented along with the three problem behavior outcomes separately. Specifically, age, country of origin, involvement in extracurricular/community activities, and employment will be presented.

Age. Age is the first variable, and the results for smoking behavior are presented in Table 9.

Table 9

Crosstabulation of Age and Smoking Behavior Category

<table>
<thead>
<tr>
<th>Age</th>
<th>Never Smokers</th>
<th>Not-Current Smokers</th>
<th>Current Smokers</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
</tr>
<tr>
<td>13</td>
<td>341</td>
<td>94.7</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>14</td>
<td>263</td>
<td>92.6</td>
<td>7</td>
<td>2.5</td>
</tr>
<tr>
<td>15</td>
<td>291</td>
<td>92.4</td>
<td>8</td>
<td>2.4</td>
</tr>
<tr>
<td>16</td>
<td>205</td>
<td>91.1</td>
<td>8</td>
<td>3.6</td>
</tr>
<tr>
<td>17</td>
<td>116</td>
<td>92.1</td>
<td>5</td>
<td>4.0</td>
</tr>
<tr>
<td>18</td>
<td>44</td>
<td>86.3</td>
<td>2</td>
<td>3.9</td>
</tr>
<tr>
<td>Total</td>
<td>1260</td>
<td>92.6</td>
<td>30</td>
<td>2.2</td>
</tr>
</tbody>
</table>

The largest group of adolescents ($n = 360, 26.5\%$) were 13 years of age. Of the 360 adolescents, 341 (94.1\%) were included in the never smokers category, no adolescents (0\%) were in the not-current smokers category, and 19 (5.3\%) were in the current smokers category. The smallest group of adolescents ($n = 51, 3.7\%$) were 18 years of age. Most of these adolescents ($n = 44, 86.3\%$) were in the never smokers category, with 2 (3.9\%) in the not-current smokers category, and 5 (9.8\%) adolescents in the current smokers category. Of the current smokers ($n =$
71), most of adolescents \( n = 19, 26.8\% \) were 13 years of age, with only 5 (7.0\%) adolescents in each of the 17 and 18 age groups.

The results for the crosstabulation of age and alcohol use behavior category are presented in Table 10.

Table 10

<p>| Age | Alcohol Use Behavior Category | | | | | |
|-----|--------------------------------|---|---|---|---|</p>
<table>
<thead>
<tr>
<th></th>
<th>Never Drinkers</th>
<th>Not-Current Drinkers</th>
<th>Current Drinkers</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>253 (71.7%)</td>
<td>19 (5.4%)</td>
<td>81 (22.9%)</td>
<td>353 (100.0%)</td>
</tr>
<tr>
<td>14</td>
<td>202 (72.4%)</td>
<td>15 (5.4%)</td>
<td>62 (22.2%)</td>
<td>279 (100.0%)</td>
</tr>
<tr>
<td>15</td>
<td>181 (57.6%)</td>
<td>23 (7.3%)</td>
<td>110 (35.0%)</td>
<td>314 (100.0%)</td>
</tr>
<tr>
<td>16</td>
<td>128 (55.9%)</td>
<td>11 (4.8%)</td>
<td>90 (39.3%)</td>
<td>229 (100.0%)</td>
</tr>
<tr>
<td>17</td>
<td>71 (56.8%)</td>
<td>14 (11.2%)</td>
<td>40 (32.0%)</td>
<td>125 (100.0%)</td>
</tr>
<tr>
<td>18</td>
<td>25 (52.1%)</td>
<td>2 (4.2%)</td>
<td>21 (43.8%)</td>
<td>48 (100.0%)</td>
</tr>
<tr>
<td>Total</td>
<td>860 (63.8%)</td>
<td>84 (6.2%)</td>
<td>404 (30.0%)</td>
<td>1348 (100.0%)</td>
</tr>
</tbody>
</table>

The largest group of adolescents \( n = 353, 26.2\% \) were 13 years of age. Of the 353 students, 253 (71.7\%) were included in the never drinkers category, 19 (5.4\%) were in the not-current drinkers category, and 81 (22.9\%) were in the current drinkers category. The smallest group of adolescents \( n = 48, 3.6\% \) were 18 years of age. Most of these adolescents \( n = 25, 52.1\% \) were in the never drinkers category, with 2 (4.2\%) in the not-current drinkers category, and 21 (43.8\%) adolescents in the current drinkers category. Of the current drinkers \( n = 404 \), most of the adolescents \( n = 110, 27.2\% \) were 15 years of age.

A 1 x 6 one-way analysis of variance (ANOVA) procedure was used to test the difference between age and delinquency. Higher scores on delinquency were indicative of more delinquent behaviors, and lower scores reflected less delinquent behaviors. Age ranged from 13 to 18 years. Table 11 represents the results of this analysis.
Table 11

One-way Analysis of Variance of Age by Delinquency

<table>
<thead>
<tr>
<th>Age in Years</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>df</th>
<th>F</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>357</td>
<td>4.48</td>
<td>5.85</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>284</td>
<td>3.97</td>
<td>5.27</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>317</td>
<td>4.34</td>
<td>5.86</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>230</td>
<td>4.70</td>
<td>5.66</td>
<td>2, 1365</td>
<td>1.52</td>
<td>.18</td>
</tr>
<tr>
<td>17</td>
<td>127</td>
<td>3.29</td>
<td>4.03</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>51</td>
<td>5.06</td>
<td>7.14</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>1366</td>
<td>4.29</td>
<td>5.61</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The results of the one-way ANOVA provided no evidence of statistically significant differences among age and delinquent behaviors. While those who were the oldest (18 years of age) had higher scores of delinquency than younger adolescents, this difference was not sufficient to be considered statistically significant.

Country of origin. The adolescents were asked to indicate their race and country of origin, whether they were a Chinese native of Hong Kong (had been living there for most of their lives), Chinese from Mainland China, Chinese from another country, or the other category. The majority of adolescents ($n = 1050, 79.3\%$) indicated that they were natives of Hong Kong. For those who reported not being a Chinese native of Hong Kong, the majority were Chinese from Mainland China ($n = 263, 19.5\%$), while 14 (1.0\%) reported being Chinese from another country and 6 (.4\%) reported the “Other” response. Their responses were crosstabulated by smoking and alcohol use behavior categories separately. The results for smoking behavior are presented in Table 12.
Table 12

Crosstabulation of Country of Origin and Smoking Behavior Category

<table>
<thead>
<tr>
<th>Hong Kong Native</th>
<th>Smoking Behavior Category</th>
<th>N</th>
<th>%</th>
<th>N</th>
<th>%</th>
<th>N</th>
<th>%</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never Smokers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td></td>
<td>991</td>
<td>94.4</td>
<td>16</td>
<td>1.5</td>
<td>43</td>
<td>4.1</td>
<td>1050</td>
<td>100.0</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td>236</td>
<td>86.1</td>
<td>11</td>
<td>4.0</td>
<td>27</td>
<td>9.9</td>
<td>274</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>1227</td>
<td>92.7</td>
<td>27</td>
<td>2.0</td>
<td>70</td>
<td>5.3</td>
<td>1324</td>
<td>100.0</td>
</tr>
</tbody>
</table>

χ²(2, 1324) = 21.84, p = .00

Of the adolescents who are a native of Hong Kong, 991 (94.4%) that were in the never smokers category, 16 (1.5%) in the not-current smokers category, and 43 (4.1%) in the current smokers category. To determine if there was an association between being a native of Hong Kong and smoking behavior category, a chi-square test for independence was used. The results of this analysis were statistically significant, χ²(2, 1324) = 21.84, p = .00, which indicated that being a native or not a native of Hong Kong was not independent of smoking behavior. That is, there is an association between country of origin and smoking behavior category. Adolescents who are a native of Hong Kong were more likely to have never smoked (n = 991, 94.4%) than those adolescents who are not originally from Hong Kong (n = 236, 86.1%). For not current smokers, 1.5% (n = 16) were a native of Hong Kong, while 4.0% (n = 11) were not originally from Hong Kong. Lastly, 4.1% (n = 43) of those who are a native of Hong Kong were current smokers, while 9.9% (n = 27) were not originally from Hong Kong.

The results for the crosstabulation of country of origin and alcohol use behavior category are presented in Table 13.
When alcohol use was examined, the majority of adolescents \( n = 1040, 79.0\% \) indicated that they were a native of Hong Kong. This number included 688 (66.2\%) that were in the never drinkers category, 55 (5.3\%) in the not-current drinkers category, and 297 (28.6\%) in the current drinkers category. To determine if there was an association between being a native of Hong Kong and alcohol use behavior category, a chi-square test for independence was used. The results of this analysis were statistically significant, \( \chi^2 (2, 1316) = 11.97, p = .00 \), which indicated that being a native or not a native of Hong Kong was not independent of alcohol use behavior. That is, there is an association between country of origin and alcohol use behavior category. Adolescents who are a native of Hong Kong were more likely to have never drank alcohol \( n = 688, 66.2\% \) then those adolescents who are not originally from Hong Kong \( n = 155, 56.2\% \). For not current drinkers, 5.3\% \( n = 55 \) were a native of Hong Kong, while 9.4\% \( n = 26 \) were not originally from Hong Kong. Lastly, 28.6\% \( n = 297 \) of those who are a native of Hong Kong were current drinkers, while 34.4\% \( n = 95 \) were not originally from Hong Kong.

An independent-samples \( t \) test was used to compare delinquency scores between those who are a native of Hong Kong to those who are not a native of Hong Kong. Results showed that there was not a significant difference in delinquency behaviors between those who were

### Table 13

<table>
<thead>
<tr>
<th>Hong Kong Native</th>
<th>Alcohol Use Behavior Category</th>
<th>( N )</th>
<th>%</th>
<th>( N )</th>
<th>%</th>
<th>( N )</th>
<th>%</th>
<th>( N )</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Never Drinkers</td>
<td>688</td>
<td>66.2</td>
<td>55</td>
<td>5.3</td>
<td>297</td>
<td>28.6</td>
<td>1040</td>
<td>100.0</td>
</tr>
<tr>
<td>No</td>
<td></td>
<td>155</td>
<td>56.2</td>
<td>26</td>
<td>9.4</td>
<td>95</td>
<td>34.4</td>
<td>276</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>843</td>
<td>64.1</td>
<td>81</td>
<td>6.2</td>
<td>392</td>
<td>29.8</td>
<td>1316</td>
<td>100.0</td>
</tr>
</tbody>
</table>

\( \chi^2 (2, 1316) = 11.97, p = .00 \)
originally from Hong Kong to those who were not. Since there was not a significant Levene’s test for equality of variances, equal variances was assumed. The results are presented in Table 14.

Table 14

<table>
<thead>
<tr>
<th>Country of Origin</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>df</th>
<th>t</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Native of Hong Kong</td>
<td>1051</td>
<td>4.30</td>
<td>5.70</td>
<td>1329</td>
<td>-.48</td>
<td>.63</td>
</tr>
<tr>
<td>Native of Other Country</td>
<td>280</td>
<td>4.49</td>
<td>5.48</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Involvement in extracurricular/community activities. The adolescents provided information on whether they were involved in extracurricular or community activities. Specifically, they were asked if they were involved in: 1) school clubs or organizations (drama club, school newspaper, and sports teams), 2) community (Boy Scouts, Big Brothers or Sisters) or church groups, and 3) volunteer work in the community. Of the 1353 responses, 631 (46.6%) adolescents reported no involvement in extracurricular or community activities, 398 (29.4%) reported being involved in at least one of the three activities, 231 (17.1%) involved in two activities, and 93 (6.8%) in all three activities. Results from the crosstabulation of involvement in extracurricular/community activities and smoking behavior are presented in Table 15.
Table 15

*Crosstabulation of Involvement in Extracurricular/Community Activities and Smoking Behavior Category*

<table>
<thead>
<tr>
<th>Involvement in Extracurricular / Community Activities</th>
<th>Smoking Behavior Category</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never Smokers</td>
<td>Not-Current Smokers</td>
<td>Current Smokers</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>None</td>
<td>570</td>
<td>90.3</td>
<td>10</td>
<td>1.6</td>
<td>51</td>
</tr>
<tr>
<td>1 activity</td>
<td>375</td>
<td>94.2</td>
<td>10</td>
<td>2.5</td>
<td>13</td>
</tr>
<tr>
<td>2 activities</td>
<td>220</td>
<td>95.2</td>
<td>5</td>
<td>2.2</td>
<td>6</td>
</tr>
<tr>
<td>3 activities</td>
<td>87</td>
<td>93.5</td>
<td>4</td>
<td>4.3</td>
<td>2</td>
</tr>
<tr>
<td>Total</td>
<td>1252</td>
<td>92.5</td>
<td>29</td>
<td>2.1</td>
<td>72</td>
</tr>
</tbody>
</table>

The majority of adolescents \( n = 631, 46.6\% \) indicated that they were not involved in any extracurricular/community activities. This number included 570 \( 90.3\% \) that were in the never smokers category, 10 \( 1.6\% \) in the not-current smokers category, and 51 \( 8.1\% \) in the current smokers category. Of the 93 \( 6.9\% \) adolescents who participated in all three activities, 87 \( 93.5\% \) were never smokers, 4 \( 4.3\% \) were not-current smokers, and 2 \( 2.2\% \) were current smokers.

The results for the crosstabulation of involvement in extracurricular/community and alcohol use behavior category are presented in Table 16.

Table 16

*Crosstabulation of Involvement in Extracurricular/Community Activities and Alcohol Use Behavior Category*

<table>
<thead>
<tr>
<th>Involvement in Extracurricular / Community Activities</th>
<th>Alcohol Use Behavior Category</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never Drinkers</td>
<td>Not-Current Drinkers</td>
<td>Current Drinkers</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>None</td>
<td>395</td>
<td>63.4</td>
<td>38</td>
<td>6.1</td>
<td>190</td>
</tr>
<tr>
<td>1 activity</td>
<td>246</td>
<td>61.8</td>
<td>29</td>
<td>7.3</td>
<td>123</td>
</tr>
<tr>
<td>2 activities</td>
<td>151</td>
<td>65.7</td>
<td>15</td>
<td>6.5</td>
<td>64</td>
</tr>
<tr>
<td>3 activities</td>
<td>63</td>
<td>68.5</td>
<td>2</td>
<td>2.2</td>
<td>27</td>
</tr>
<tr>
<td>Total</td>
<td>855</td>
<td>63.7</td>
<td>84</td>
<td>6.3</td>
<td>404</td>
</tr>
</tbody>
</table>
The majority of adolescents \((n = 623, 46.4\%)\) indicated that they were not involved in any extracurricular/community activities. This number included 395 (63.4%) that were in the never drinkers category, 38 (6.1%) in the not-current drinkers category, and 190 (30.5%) in the current drinkers category. Of the 92 (6.9%) adolescents who participated in all three activities, 63 (68.5%) were never drinkers, 2 (2.2%) were not-current drinkers, and 27 (29.3%) were current drinkers.

A one-way analysis of variance (ANOVA) procedure was used to test the difference between involvement in extracurricular/community activities and delinquency. Table 17 represents the results of this analysis.

<table>
<thead>
<tr>
<th>Age in Years</th>
<th>N</th>
<th>M</th>
<th>SD</th>
<th>df</th>
<th>F</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>642</td>
<td>4.33</td>
<td>5.99</td>
<td>3, 1363</td>
<td>.47</td>
<td>.71</td>
</tr>
<tr>
<td>1 activity</td>
<td>400</td>
<td>4.20</td>
<td>5.01</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 activities</td>
<td>230</td>
<td>4.55</td>
<td>5.80</td>
<td>3, 1363</td>
<td>.47</td>
<td>.71</td>
</tr>
<tr>
<td>3 activities</td>
<td>92</td>
<td>3.77</td>
<td>5.01</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>1364</td>
<td>4.29</td>
<td>5.62</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The results of the one-way ANOVA provided no evidence of statistically significant differences among involvement in extracurricular/community activities and delinquent behaviors. While those who were at the highest level of involvement in extracurricular/communities activities had lower scores of delinquency than those less involved in activities, this difference was not sufficient to be considered statistically significant.
Employment Status. The adolescents were asked to indicate whether they were employed. Their responses were crosstabulated by smoking and alcohol use behavior categories separately. The results for smoking behavior are presented in Table 18.

Table 18

Crosstabulation of Employment and Smoking Behavior Category

<table>
<thead>
<tr>
<th>Employment</th>
<th>Smoking Behavior Category</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never Smokers</td>
<td>Not-Current Smokers</td>
<td>Current Smokers</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td></td>
<td>1173</td>
<td>92.9</td>
<td>28</td>
<td>2.2</td>
<td>61</td>
</tr>
<tr>
<td>Yes</td>
<td>53</td>
<td>82.8</td>
<td>1</td>
<td>1.6</td>
<td>10</td>
</tr>
<tr>
<td>Total</td>
<td>1226</td>
<td>92.5</td>
<td>29</td>
<td>2.2</td>
<td>71</td>
</tr>
</tbody>
</table>

The majority of adolescents (n = 1262, 95.2%) indicated that they were not employed/working. This number included 1173 (92.9%) that were in the never smokers category, 28 (2.2%) in the not-current smokers category, and 61 (4.8%) in the current smokers category.

The results for the crosstabulation of employment and alcohol use behavior category are presented in Table 19.

Table 19

Crosstabulation of Employment and Alcohol Use Behavior Category

<table>
<thead>
<tr>
<th>Employment</th>
<th>Alcohol Use Behavior Category</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never Drinkers</td>
<td>Not-Current Drinkers</td>
<td>Current Drinkers</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td></td>
<td>N</td>
<td>%</td>
<td>N</td>
<td>%</td>
<td>N</td>
</tr>
<tr>
<td>No</td>
<td>804</td>
<td>64.2</td>
<td>79</td>
<td>6.3</td>
<td>369</td>
</tr>
<tr>
<td>Yes</td>
<td>32</td>
<td>49.2</td>
<td>3</td>
<td>4.6</td>
<td>30</td>
</tr>
<tr>
<td>Total</td>
<td>836</td>
<td>63.5</td>
<td>82</td>
<td>6.2</td>
<td>399</td>
</tr>
</tbody>
</table>
The majority of adolescents \((n = 1252, 95.1\%)\) indicated that they were not employed or working. This number included 804 (64.2\%) that were in the never drinkers category, 79 (6.3\%) in the not-current drinkers category, and 369 (29.5\%) in the current drinkers category.

An independent-samples \(t\) test was used to compare delinquency scores with an adolescent’s employment status. Those who were working \((M = 6.06, SD = 7.56)\) expressed significantly higher levels of delinquent behaviors than those who were not working \((M = 4.22, SD = 5.53)\), \(t(71) = -1.98, p = .05\). Since there was a significant Levene’s test for equality of variances, equal variances was not assumed. Results are presented in Table 20.

Table 20

*Summary of Independent-Samples \(t\) Test to Compare Delinquency by Employment Status*

<table>
<thead>
<tr>
<th>Employment Status</th>
<th>(N)</th>
<th>(M)</th>
<th>(SD)</th>
<th>(df)</th>
<th>(t)</th>
<th>(p)</th>
</tr>
</thead>
<tbody>
<tr>
<td>No job</td>
<td>1262</td>
<td>4.22</td>
<td>5.53</td>
<td>71</td>
<td>-1.98</td>
<td>.05</td>
</tr>
<tr>
<td>Job-working</td>
<td>68</td>
<td>6.06</td>
<td>7.56</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Description of Scaled Variables*

All scales were scored according to protocols developed by the original authors. Results from descriptive and mean comparison statistics are presented in Table 21, this includes total scores and separate scores for gender and school band level.
### Table 21

**Descriptive Statistics of Main Study Variables in the Total Sample and Differences Between Gender and School Band Level**

<table>
<thead>
<tr>
<th></th>
<th>Gender</th>
<th>School Band Level</th>
<th>Total Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Males</td>
<td>Females</td>
<td>Band 1</td>
</tr>
<tr>
<td></td>
<td>M (range)</td>
<td>SD</td>
<td>N</td>
</tr>
<tr>
<td>Sensation seeking</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total score</td>
<td>15.44</td>
<td>5.37</td>
<td>674</td>
</tr>
<tr>
<td>Psychological problem behavior</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Internalizing problem</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>T-score</td>
<td>51.14</td>
<td>12.75</td>
<td>656</td>
</tr>
<tr>
<td>Externalizing problem</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Raw score</td>
<td>11.67</td>
<td>8.44</td>
<td>656</td>
</tr>
<tr>
<td>T-score</td>
<td>49.36</td>
<td>11.83</td>
<td>656</td>
</tr>
<tr>
<td>Total problem</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Raw score</td>
<td>39.58</td>
<td>25.52</td>
<td>656</td>
</tr>
<tr>
<td>T-score</td>
<td>50.43</td>
<td>12.75</td>
<td>656</td>
</tr>
<tr>
<td>Values orientation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conservation</td>
<td>3.60</td>
<td>.81</td>
<td>680</td>
</tr>
<tr>
<td>Openness to change</td>
<td>3.84</td>
<td>.93</td>
<td>681</td>
</tr>
<tr>
<td>Self-enhancement</td>
<td>3.65</td>
<td>.94</td>
<td>680</td>
</tr>
<tr>
<td>Self-transcendence</td>
<td>3.91</td>
<td>.92</td>
<td>680</td>
</tr>
<tr>
<td>Hedonism</td>
<td>4.11</td>
<td>1.14</td>
<td>683</td>
</tr>
</tbody>
</table>

*p < .05. **p < .01. ***p ≤ .001.
Sensation seeking. The Chinese version of Zuckerman’s Sensation Seeking Scale Form-V (SSS-V) was used to measure the adolescent’s need to engage in novel, stimulating, and diverse experiences. This scale has a total of 40 items, the overall index of sensation seeking was used in this study. This index is the total score of all items, thus yielding a maximum score of 40. The mean score for overall total sensation seeking was 14.90 (SD = 5.62) with a median of 15.00. Sensation seeking score ranged from 1 to 33.

An Independent Samples T-test was used to determine the difference in sensation seeking between males and females and between school band level one and three. With respect to gender, the results indicate that there is a significant difference in sensation seeking between males and females, \( t(1346) = 3.70, p = .00 \). That is, the average total sensation seeking score of males (\( M = 15.44, SD = 5.37 \)) was significantly different from that of females (\( M = 14.32, SD = 5.76 \)). With respect to school band level, the results indicate that there is no significant difference in sensation seeking between adolescents at a band one and band three level school.

Psychological problem behavior. Achenbach’s Youth Self-Report (YSR: Chinese version) was used to measure the adolescent’s psychological problematic symptoms, internalizing and externalizing problem behavior in the previous 6 months. This measure has a total of 101 items, resulting in a combined total problem score, an internalizing problem score, and an externalizing problem score. The raw legacy and derived T-scores (normalized) scores are both reported, but only the raw legacy scores were used for the main analyses in this current study. The mean score for overall total problem score (raw legacy) was 42.45 (SD = 25.99) with a median of 40.00 and a range from 0 to 178. The mean score for internalizing problem score (raw legacy) was 13.78 (SD = 9.84) with a median of 12.00 and a range from 0 to 58. The mean score for externalizing problem score (raw legacy) was 11.86 (SD = 8.13) with a median of
11.00 and a range from 0 to 60. The mean score for the derived T-score for overall total problems was 52.06 (SD = 12.26) with a median of 52.00 and a range from 22 to 95. The mean score for the derived T-score for internalizing problems was 52.03 (SD = 12.07) with a median of 53.00 and a range from 26 to 97. The mean score for the derived T-score for externalizing problems was 50.80 (SD = 11.57) with a median of 51.00 and a range from 25 to 100.

An Independent Samples T-test was used to determine the difference in psychological problem behavior between males and females and between school band level one and three. With respect to gender, the results indicate that there is a significant difference in internalizing problem behavior, $t(1296) = 6.93, p = .00$, and total problem behavior between males and females, $t(1306) = 5.46, p = .00$. That is, the average internalizing problem behavior score of males ($M = 11.93, SD = 9.27$) was significantly different from that of females ($M = 15.64, SD = 10.06$). Furthermore, the average total problem behavior score of males ($M = 39.58, SD = 25.25$) was significantly different from that of females ($M = 47.34, SD = 25.89$).

With respect to school band level, the results indicate that there is also a significant difference in internalizing problem behavior, $t(1306) = 3.40, p = .001$, and total problem behavior between adolescents at a band one and band three level school, $t(993) = 2.28, p < .05$. That is, the average internalizing problem behavior score of band one level adolescents ($M = 14.51, SD = 9.69$) was significantly different from that of band three level adolescents ($M = 12.62, SD = 9.98$). Furthermore, the average total problem behavior score of band one level adolescents ($M = 44.78, SD = 24.88$) was significantly different from that of band three level adolescents ($M = 41.34, SD = 27.55$). With respect to externalizing problem behavior, the results indicate that there is no significant difference between gender and school band level.
Values Orientation. The Chinese version of the Portrait Values Questionnaire (PVQ) was used to measure the adolescent’s values orientation. The questionnaire is a 40 item with 4 subscales, higher order values: openness to change (stimulation and self-direction), conservation (conformity, tradition, and security), self-enhancement (achievement and power), and self-transcendence (universalism and benevolence). The basic values orientation of hedonism is not included within a particular higher order values orientation due to its involvement in both openness to change and self-enhancement. This current study used the four higher order values orientation and the basic values orientation of hedonism in the analyses. The mean score for the values orientation of conservation was 3.61 (SD = .80) with a median of 3.61 and a range of 1 to 6. The mean score for the values orientation of openness to change was 3.87 (SD = .91) with a median of 3.86 and a range of 1 to 6. The mean score for the values orientation of self-enhancement was 3.63 (SD = .93) with a median of 3.57 and a range of 1 to 6. The mean score for the values orientation of self-transcendence was 4.02 (SD = .89) with a median of 4.00 and a range of 1 to 6. Finally, the mean score for the values orientation of hedonism was 4.25 (SD = 1.10) with a median of 4.33 and a range of 1 to 6.

An independent samples T-test was used to determine the difference in values orientation between males and females and between school band level one and three. With respect to gender, the results indicate that there is only a significant difference in the values orientation of self-transcendence, \( t(1341) = 4.50, p = .00 \), and hedonism, \( t(1347) = 4.90, p = .00 \). That is, the average values orientation of self-transcendence, the score of males (\( M = 3.91, SD = .92 \)) was significantly different from that of females (\( M = 4.13, SD = .84 \)). This was also true for the values orientation of hedonism, the score of males (\( M = 4.11, SD = 1.14 \)) was significantly different from that of females (\( M = 4.40, SD = 1.04 \)). With respect to school band level, the
results indicate that there is significance difference in the values orientations of conservation, \( t(1358) = 7.48, p = .00 \), openness to change, \( t(1034) = 7.39, p = .00 \), self-enhancement, \( t(1359) = 6.44, p = .00 \), self-transcendence, \( t(1027) = 9.36, p = .00 \), and hedonism, \( t(1038) = 10.53, p = .00 \). Such that there is a difference between adolescents attending a band one and band three level school with respect to all five values orientation (Table 21 shows the means and standard deviations).

Research Hypotheses

Three main hypotheses were developed for the current research study, with separate hypotheses for each of the three problem behavior outcomes; hence, a final total of 11 hypotheses. Inferential statistical analyses were used to test each of these hypotheses, with all decisions on the statistical significance of the findings made using an alpha level of .05.

The first hypothesis investigates the relationship between the three problem behavior outcomes of smoking, alcohol use, and delinquency and sensation seeking, psychological problem behaviors, values orientation, and to each other. The results from the bivariate correlation analyses among possible predictors and the problem behavior outcomes (smoking, alcohol use, and delinquency) are reported in Table 22.
Table 22

*Intercorrelations Between Predictor Variables and Problem Behavior Outcome Variables*

<table>
<thead>
<tr>
<th>Variables</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
<th>11</th>
<th>12</th>
<th>13</th>
<th>14</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Gender&lt;sup&gt;a&lt;/sup&gt;</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. School band level&lt;sup&gt;b&lt;/sup&gt;</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Sensation seeking</td>
<td>.07**</td>
<td>-10***</td>
<td>.02</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Internalizing problem behavior</td>
<td>.07*</td>
<td>.18***</td>
<td>-.09***</td>
<td>.14***</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Externalizing problem behavior</td>
<td>.00</td>
<td>.02</td>
<td>-.02</td>
<td>.38***</td>
<td>.68***</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Values Orientation: Openness to change</td>
<td>-.03</td>
<td>-.04</td>
<td>-.20***</td>
<td>.28***</td>
<td>.09***</td>
<td>.15***</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Values Orientation: Self-transcendence</td>
<td>-.03</td>
<td>.12***</td>
<td>-.25***</td>
<td>-.11***</td>
<td>.06*</td>
<td>-.07**</td>
<td>.62***</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Values Orientation: Conservation</td>
<td>.04</td>
<td>.03</td>
<td>-.20***</td>
<td>-.21***</td>
<td>-.01</td>
<td>-.15***</td>
<td>.53***</td>
<td>.80***</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Values Orientation: Self-enhancement</td>
<td>.04</td>
<td>-.02</td>
<td>-.17***</td>
<td>.12***</td>
<td>.13***</td>
<td>.20***</td>
<td>.66***</td>
<td>.50***</td>
<td>.53***</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Values Orientation: Hedonism</td>
<td>.15***</td>
<td>.13***</td>
<td>-.28***</td>
<td>.09***</td>
<td>.13***</td>
<td>.13***</td>
<td>.59***</td>
<td>.56***</td>
<td>.46***</td>
<td>.52</td>
<td>1.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12. Problem behavior: Smoking&lt;sup&gt;c&lt;/sup&gt;</td>
<td>.04</td>
<td>-.06*</td>
<td>.28***</td>
<td>.23***</td>
<td>.07</td>
<td>.18***</td>
<td>-.06*</td>
<td>-.14***</td>
<td>-.13***</td>
<td>-.07**</td>
<td>-.14***</td>
<td>1.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13. Problem behavior: Alcohol use&lt;sup&gt;d&lt;/sup&gt;</td>
<td>.14***</td>
<td>-.04</td>
<td>.13***</td>
<td>.29***</td>
<td>.12***</td>
<td>.18***</td>
<td>.09***</td>
<td>-.08**</td>
<td>-.08**</td>
<td>0.02</td>
<td>0.03</td>
<td>.30***</td>
<td>1.00</td>
<td></td>
</tr>
<tr>
<td>14. Problem behavior: Delinquency</td>
<td>-.01</td>
<td>-.04</td>
<td>.10***</td>
<td>.31***</td>
<td>.30***</td>
<td>.51***</td>
<td>.02</td>
<td>-.12***</td>
<td>-.20***</td>
<td>.02</td>
<td>.04</td>
<td>.23***</td>
<td>.23***</td>
<td>1.00</td>
</tr>
</tbody>
</table>

*Note.* <sup>a</sup>Gender: 0 = male, 1 = female. <sup>b</sup>School band level: 1 = band one, 3 = band three. <sup>c</sup>Smoking behavior: 0 = Never smokers, 1 = Not-current smokers, 2 = Current smokers. <sup>d</sup>Alcohol use: 0 = Never drinkers, 1 = Not-current drinkers, 2 = Current drinkers.

* p ≤ .05. ** p ≤ .01. *** p ≤ .001.
H01a: There will be a positive relationship between sensation seeking and the problem behavior outcome of smoking, alcohol use, and delinquency. As sensation seeking increases, smoking, alcohol use, and delinquency will also increase.

H01b: There will be a positive relationship between psychological problem behavior, both internalizing and externalizing problem behavior, and the problem behavior outcome of smoking, alcohol use, and delinquency. As internalizing and externalizing problem behavior increases, smoking, alcohol use, and delinquency will also increase.

H01c: There will be a positive relationship between the values orientation of hedonism, openness to change, and self-enhancement, and the three problem behavior outcomes of smoking, alcohol use, and delinquency. As the values orientation of hedonism, openness to change, and self-enhancement increases, smoking, alcohol use, and delinquency will also increase.

H01d: There will be a negative relationship between the values orientation of conservation and self-transcendence, and the three problem behavior outcomes of smoking, alcohol use, and delinquency. As the values orientation of conservation and self-transcendence increases, smoking, alcohol use, and delinquency will decrease.

H01e: There will be a positive relationship between the three problem behavior outcomes of smoking, alcohol use, and delinquency. As smoking increases, alcohol use and delinquency will also increase.

For the outcome variable of smoking behavior, it is positively and significantly correlated (all at $p \leq .001$) with school band level ($r = .28$), total sensation seeking score ($r = .23$), and externalizing problem behavior ($r = .18$). Smoking behavior is negatively and significantly correlated with gender ($r = -.06, p \leq .05$), and the values orientation of openness to change ($r = -.06, p \leq .05$), self-transcendence ($r = -.14, p \leq .001$), conservation ($r = -.13, p \leq .001$), self-enhancement ($r = -.07, p \leq .01$), and hedonism ($r = -.14, p \leq .001$).

For the outcome variable of alcohol use behavior, it is positively and significantly correlated (all at $p \leq .001$) with age ($r = .14$), school band level ($r = .13$), total sensation seeking score ($r = .29$), externalizing ($r = .18$) and internalizing ($r = .12$) problem behavior, and the values orientation of openness to change ($r = .09$). Alcohol use is negatively and significantly
correlated (all at $p \leq .01$) with the values orientation of self-transcendence ($r = -.08$) and conservation ($r = -.08$).

For the outcome variable of delinquency, it is positively and significantly correlated (all at $p \leq .001$) with school band level ($r = .10$), total sensation seeking score ($r = .31$), and externalizing ($r = .51$) and internalizing ($r = .30$) problem behavior. Delinquent behavior is negatively and significantly correlated (all at $p \leq .001$) with the values orientation of self-transcendence ($r = -.12$) and conservation ($r = -.20$).

All problem behavior outcome variables were positively and significantly associated (all at $p \leq .001$) with one another such that higher levels of one problem behavior was associated with higher levels of the other two. That is, as alcohol use increased, so did smoking ($r = .30$) and delinquent behaviors ($r = .23$). Furthermore, as smoking behavior increased, so did delinquent behavior ($r = .23$).

The second hypothesis seeks to determine whether the three problem behavior outcomes of smoking, alcohol use, and delinquency could be predicted based on various demographic and study variables. The results from the regression analyses are presented next.

$H_{02_a}$: Delinquent behavior will be predicted based on age, gender, school band level, etc.

Linear regression was used to assess the relative contribution of potential predictors of delinquency. Only variables that were associated with delinquency in bivariate analyses (Table 22: alcohol use, smoking, school band level, total score of sensation seeking, externalizing and internalizing problem behavior score, and the values orientation of conservation and self-transcendence) were included in the regression analysis. The overall model was significant ($F (8, 1228) = 69.27, p = .00$) and accounted for approximately 31 percent of the total variance in
delinquency (R² = .31). In the multivariate analyses, smoking, alcohol use, school band level, total score of sensation seeking, externalizing problem behavior score, and the values orientation of conservation were all significant predictors of delinquency. While only internalizing problem behavior score and the values orientation of self-transcendence were not significant predictors. Odds ratio and significance are presented in Table 23.

Table 23

*Summary of Linear Regression Analysis for Variables Predicting Delinquency (N = 1236)*

<table>
<thead>
<tr>
<th>Predictor</th>
<th>B</th>
<th>SE B</th>
<th>B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoking</td>
<td>.75</td>
<td>.06</td>
<td>.06*</td>
</tr>
<tr>
<td>Alcohol use</td>
<td>.54</td>
<td>.09</td>
<td>.09***</td>
</tr>
<tr>
<td>School band level</td>
<td>.35</td>
<td>.06</td>
<td>.06*</td>
</tr>
<tr>
<td>Sensation seeking</td>
<td>.10</td>
<td>.03</td>
<td>.11***</td>
</tr>
<tr>
<td>Externalizing problem behavior</td>
<td>.30</td>
<td>.02</td>
<td>.44***</td>
</tr>
<tr>
<td>Internalizing problem behavior</td>
<td>-.02</td>
<td>.02</td>
<td>-.27</td>
</tr>
<tr>
<td>Values Orientation: Conservation</td>
<td>-.58</td>
<td>.28</td>
<td>-.08*</td>
</tr>
<tr>
<td>Values Orientation: Self-transcendence</td>
<td>-.10</td>
<td>.25</td>
<td>-.03</td>
</tr>
</tbody>
</table>

R²                                   | .31<sup>a</sup> |

F for change in R²                   | 69.27*** |

*Note. * R² = total explained variance.
* p < .05. ** p < .01. *** p ≤ .001.
H₀₂₆: Smoking behavior will be predicted based on age, gender, school band level, etc.

H₀₂₇: Alcohol use behavior will be predicted based on age, gender, school band level, etc.

To assess percent of variance accounted for in the three level categorical measure of smoking (Never smoker, Not-current smoker, and Current smoker), multinomial logistic regression analysis included measures significantly associated with the smoking behavior (alcohol use, delinquency, gender, school band level, total score of sensation seeking, externalizing and internalizing problem behavior score, and the values orientation of conservation, hedonism, openness to change, self-enhancement, and self-transcendence). For smoking behavior, regression analyses found that school band level, sensation seeking, externalizing problem behaviors, values orientation of openness to change, and alcohol use were all predictive of smoking behavior. Specifically, sensation seeking, externalizing problem behaviors, school band level, and alcohol use were reliable predictors of current smokers from never smokers, while the values orientation of openness to change, school band level, and alcohol use were reliable predictors of not-current smokers from never smokers. The model ($X^2 (22, 1237) = 244.24, p = .00$) correctly classified 93.4% of the observations. Nagelkerke $R^2$ indicated that the model explained 40% of the total variance in smoking. Results are presented in Table 24.

To assess percent of variance accounted for in the three level categorical measure of alcohol use (Never drinker, Not-current drinker, Current drinker), logistic regression analysis included measures significantly associated with the alcohol measure (smoking, delinquency, age, school band level, total score of sensation seeking, externalizing and internalizing problem behavior score, and the values orientation of conservation, openness to change, and self-
transcendence). For alcohol use, regression analyses found that age, school band level, sensation seeking, internalizing problem behaviors, values orientation of openness to change, and self-transcendence, and the problem behavior outcomes of smoking and delinquency, were all predictive of alcohol use behavior. Specifically, age, sensation seeking, internalizing problem behaviors, school band level, values orientation of openness to change and self-transcendence, and smoking and delinquency were reliable predictors of current drinkers from never drinkers, while the school band level, sensation seeking, age, and smoking behavior were reliable predictors of not-current drinkers from never drinkers. The model \( \chi^2 (26, 1237) = 259.65, p = .00 \) correctly classified 70.6% of the observations. Nagelkerke R² indicated that the model explained 23.5% of the total variance in alcohol use. Results are presented in Table 25.
Table 24

Summary of Multinomial Logistic Regression Analysis for Variables Predicting Smoking Behavior (N = 1237)

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Smoking Behavior</th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never smokers vs</td>
<td></td>
<td></td>
<td></td>
<td>Never smokers vs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not-current smokers</td>
<td>B</td>
<td>SE B</td>
<td>Exp B</td>
<td>B</td>
<td>SE B</td>
<td>Exp B</td>
<td></td>
</tr>
<tr>
<td>Delinquency</td>
<td>.01</td>
<td></td>
<td>.04</td>
<td>1.01</td>
<td>.01</td>
<td>.03</td>
<td>1.02</td>
<td></td>
</tr>
<tr>
<td>Sensation seeking</td>
<td>.12</td>
<td></td>
<td>.05</td>
<td>1.12</td>
<td>.14</td>
<td>.04</td>
<td>1.15***</td>
<td></td>
</tr>
<tr>
<td>Externalizing problem behavior</td>
<td>-.02</td>
<td></td>
<td>.04</td>
<td>.98</td>
<td>.06</td>
<td>.03</td>
<td>1.06*</td>
<td></td>
</tr>
<tr>
<td>Internalizing problem behavior</td>
<td>.02</td>
<td></td>
<td>.03</td>
<td>1.02</td>
<td>-.03</td>
<td>.02</td>
<td>.98</td>
<td></td>
</tr>
<tr>
<td>Values Orientation: Conservation</td>
<td>.03</td>
<td></td>
<td>.51</td>
<td>1.03</td>
<td>.50</td>
<td>.38</td>
<td>1.65</td>
<td></td>
</tr>
<tr>
<td>Values Orientation: Openness to change</td>
<td>-.88</td>
<td></td>
<td>.40</td>
<td>.41*</td>
<td>.07</td>
<td>.29</td>
<td>1.07</td>
<td></td>
</tr>
<tr>
<td>Values Orientation: Self-enhancement</td>
<td>.41</td>
<td></td>
<td>.34</td>
<td>1.51</td>
<td>-.16</td>
<td>.25</td>
<td>.85</td>
<td></td>
</tr>
<tr>
<td>Values Orientation: Self-transcendence</td>
<td>.01</td>
<td></td>
<td>.48</td>
<td>1.01</td>
<td>-.31</td>
<td>.36</td>
<td>.74</td>
<td></td>
</tr>
<tr>
<td>Values Orientation: Hedonism</td>
<td>.14</td>
<td></td>
<td>.26</td>
<td>1.15</td>
<td>-.38</td>
<td>.22</td>
<td>.68</td>
<td></td>
</tr>
<tr>
<td>School band level</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Band one</td>
<td>-1.51</td>
<td></td>
<td>.52</td>
<td>-2.77</td>
<td>.48</td>
<td>.06***</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Band three</td>
<td>0b</td>
<td></td>
<td></td>
<td>.22**</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>-.06</td>
<td></td>
<td>.47</td>
<td>.95</td>
<td>-.18</td>
<td>.33</td>
<td>.83</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>0b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alcohol use</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never drinkers</td>
<td>-1.56</td>
<td></td>
<td>.55</td>
<td>.21*</td>
<td>-.22</td>
<td>.42</td>
<td>.11***</td>
<td></td>
</tr>
<tr>
<td>Not-current drinkers</td>
<td>.56</td>
<td></td>
<td>.55</td>
<td>1.75</td>
<td>-.70</td>
<td>.49</td>
<td>.50</td>
<td></td>
</tr>
<tr>
<td>Current drinkers</td>
<td>0b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Constant</td>
<td>-3.37</td>
<td></td>
<td>1.37</td>
<td>-2.68</td>
<td>.95</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

\( \chi^2 \)

244.24***

\( Df \)

6.00

Note. \(^a\) The reference category for smoking behavior is Never smokers. \(^b\) This parameter is set to zero because it is redundant.

\(^*p < .05. \(^{**}p < .01. \(^{***}p < .001. \)
Table 25

Summary of Multinomial Logistic Regression Analysis for Variables Predicting Alcohol Use

(N = 1237)

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Never drinkers vs Not-current drinkers</th>
<th>Never drinkers vs Current drinkers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>SE B</td>
</tr>
<tr>
<td>Delinquency</td>
<td>.00</td>
<td>.03</td>
</tr>
<tr>
<td>Sensation seeking</td>
<td>.08</td>
<td>.03</td>
</tr>
<tr>
<td>Externalizing problem behavior</td>
<td>-.04</td>
<td>.03</td>
</tr>
<tr>
<td>Internalizing problem behavior</td>
<td>.02</td>
<td>.02</td>
</tr>
<tr>
<td>Values Orientation: Conservation</td>
<td>-.20</td>
<td>.26</td>
</tr>
<tr>
<td>Values Orientation: Openness to change</td>
<td>.29</td>
<td>.20</td>
</tr>
<tr>
<td>Values Orientation: Self-transcendence</td>
<td>.06</td>
<td>.25</td>
</tr>
<tr>
<td>Age</td>
<td>.21</td>
<td>.09</td>
</tr>
<tr>
<td>School band level</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Band one</td>
<td>-1.43</td>
<td>.27</td>
</tr>
<tr>
<td>Band three</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Smoking behavior</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never smokers</td>
<td>-1.43</td>
<td>.58</td>
</tr>
<tr>
<td>Not-current smokers</td>
<td>.51</td>
<td>.83</td>
</tr>
<tr>
<td>Current smokers</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>Constant</td>
<td>-4.99</td>
<td>1.59</td>
</tr>
<tr>
<td>$\chi^2$</td>
<td></td>
<td></td>
</tr>
<tr>
<td>df</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: aThe reference category for alcohol use is Never Drinkers. bThis parameter is set to zero because it is redundant.
*p < .05. **p < .01. ***p < .001.
The third hypothesis predicts that adolescents at each of the two levels of school band would differ on their involvement in smoking, alcohol use, and delinquency. Each of the three problem behavior outcome hypotheses are discussed as follows.

$H_{03a}$: Adolescents who are studying at the band three level school are more likely to engage in delinquent behaviors than adolescents who are studying at the band one level school. That is, the mean level of delinquent activity will be higher for those studying at the band one level school.

An independent-samples $t$ test was used to compare delinquency scores for students attending a band one level high school to those attending a band three level high school. Band three adolescents ($M = 4.93, SD = 6.14$) expressed significantly higher levels of delinquent behaviors than did the band one level adolescents ($M = 3.85, SD = 5.19$), $t (1034) = -3.39, p = .001$. Since there was a significant Levene’s test for equality of variances, equal variances was not assumed. Based on this finding, the null hypothesis of no difference in students attending band one or band three school on delinquent behaviors is rejected. Results are presented in Table 26.

Table 26

*Summary of Independent-Samples $t$ Test to Compare Delinquency by School Band Level*

<table>
<thead>
<tr>
<th>Group</th>
<th>$N$</th>
<th>$M$</th>
<th>$SD$</th>
<th>$df$</th>
<th>$t$</th>
<th>$p$</th>
</tr>
</thead>
<tbody>
<tr>
<td>School band level</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Band one</td>
<td>821</td>
<td>3.85</td>
<td>5.19</td>
<td>1034</td>
<td>-3.39</td>
<td>.001</td>
</tr>
<tr>
<td>Band three</td>
<td>547</td>
<td>4.93</td>
<td>6.14</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
H₀₃b: Adolescents who are studying at the band three level school are more likely to be current smokers than adolescents who are studying at the band one level school.

The study compared smoking behavior (never smokers, not-current smokers, and current smokers) by the band level of the high school (band one versus band three). It was expected that the smoking behavior would vary by high school band level. A statistically significant chi-square test of independence, $\chi^2 (2, 1363) = 105.61$, $p = .00$, indicated that smoking behavior was not independent of school band level, with band three level adolescents more likely to be current smokers ($n = 66, 12.4\%$). Moreover, band three level adolescents were less likely to be in the never smokers category ($n = 446, 83.5\%$) than band one level adolescents ($n = 815, 98.3\%$). Table 27 presents the results of this analysis.

Table 27

<table>
<thead>
<tr>
<th>Smoking Behavior Category</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
</tr>
<tr>
<td>Never Smokers</td>
<td>615</td>
</tr>
<tr>
<td>Not-current Smokers</td>
<td>446</td>
</tr>
<tr>
<td>Current Smokers</td>
<td>1261</td>
</tr>
<tr>
<td>Total</td>
<td>1363</td>
</tr>
</tbody>
</table>

$\chi^2 (2, 1363) = 105.61$, $p = .00$

H₀₃c: Adolescents who are studying at the band three level school are more likely to be current alcohol users than adolescents who are studying at the band one level school.

Finally, the study also compared alcohol use (never drinkers, not-current drinkers, and current drinkers) by the band level of the high school (band one versus band three). It was
expected that alcohol use would vary by high school band level. A statistically significant chi-square test of independence, $\chi^2 (2, 1350) = 43.54, p = .00$, indicated that alcohol use was not independent of school band level, with current drinkers more likely to be in the band three level school ($n = 66, 12.4\%$). Moreover, band three level adolescents were less likely to be in the never drank alcohol category ($n = 288, 54.2\%$) than band one level adolescents ($n = 573, 70\%$). Table 28 represents the findings of this analysis.

Table 28

*Crosstabulation of Alcohol Use by School Band Level*

<table>
<thead>
<tr>
<th>School Band Level</th>
<th>Alcohol Use Category</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Never Drinkers</td>
<td>N</td>
</tr>
<tr>
<td>Band one</td>
<td>573</td>
<td>70.0</td>
</tr>
<tr>
<td>Band three</td>
<td>288</td>
<td>54.2</td>
</tr>
<tr>
<td>Total</td>
<td>861</td>
<td>63.8</td>
</tr>
</tbody>
</table>

$\chi^2 (2, 1350) = 43.54, p = .00$

*Summary*

The results of the statistical analyses used to describe the research sample and to test the three main hypotheses were presented in this chapter. A discussion of what can be derived from these finding is presented in Chapter 5.
Chapter 5: Discussion

The purpose of this study was threefold. The first purpose was to examine the prevalence of problem behaviors, such as smoking behavior, alcohol use, and delinquency among a cross-sectional sample of Hong Kong adolescents studying in high school. In addition, demographic variables were examined in the context of these three problem behavior outcomes. The second purpose was to explore the relationship between the study variables and the three problem behavior outcomes. Specifically, this study examined whether smoking, alcohol use, and delinquent behaviors could be predicted by various study variables such as, demographic characteristics, level of sensation seeking, psychological problem behavior (externalizing and internalizing problem behavior), and values orientation (conservation, openness to change, self-enhancement, self-transcendence, and hedonism). The final purpose was to evaluate the relationship between enrollment in different ability level high schools (band one and three) in Hong Kong and the problem behavior outcomes among these adolescents. That is, whether smoking, alcohol use, and delinquent behaviors were significantly different amongst adolescents from the band one or three high school.

This chapter presents the research findings in the context of four basic objectives. First, the prevalence and rate of problem behaviors (smoking, alcohol use and delinquency) are discussed, with also a focus on their relationship with assessed demographic variables. Second, the main study variables of sensation seeking, psychology problem behaviors, and values orientation are discussed. Third, research findings from the regression analyses and school band level comparisons are discussed, interpreted, and placed in context of the reviewed literature. Finally, the chapter concludes by presenting limitations of the study, providing implications for practitioners, and offers suggestions for future research.
Prevalence and Rate of Problem Behavior Outcomes

The current study reported on the prevalence and rate of problem behavior outcomes in an adolescent population living in Hong Kong. There was a variation in the sample size across the three outcome behaviors of smoking ($N = 1363$), alcohol use ($N = 1350$), and delinquency ($N = 1368$) due to the issue of missing data. Smoking behavior was measured categorically, and among the total sample of 1363 adolescents, 93% never smoked cigarettes or tried once, 2% use to smoke but not currently, and 5% were current smokers. As compared to non-Chinese populations (Netherlands), the current study rates are much lower than those found in the current literature: 50% never smoked/attempted, 7% quit smoking, 22% occasionally smoked, and 19% smoked daily ($N = 175$; deLeeuw, Engles, Vermulst, & Scholte, 2009). Prevalence rates in the US (National Survey on Drug Use and Health, 2009) for adolescent (age 12 to 17) smoking in the past month was 11.4% in 2008, this was a decrease from 2002 with a rate of 15.2%. Although there is a discrepancy in rates when compared with adolescents abroad, the current study rates were more similar to Hong Kong rates. A recent government report of smoking by the Hong Kong Census and Statistics Department (2009a) reported 2.4% of youths between the ages of 15 to 19 were daily smokers. One Hong Kong study (Lee et al., 2009) showed rates of heavy smokers at 3.6% (more than 20 cigarettes in the past month), while another study (Griffiths et al., 2006) reported rates as follows: 96.4% never smoked, 3.4% lifetime smoking, 0.2% were current smokers (smoking 5 or more cigarettes a day). Furthermore, 0.4% of males and 0.07% of females were current smokers (Griffiths et al., 2006), which are much lower than rates from the current study (current smokers: 6% males and 4% females). For all past prevalence rates and for the current study, definition of current smokers differed, which most likely contributed significantly to the discrepancy in prevalence rates.
Alcohol use behavior was also a categorical variable, and among the total sample of 1350 adolescents, 64% never tried alcohol or tried once, 6% quit drinking, and 30% were current drinkers. These rates are higher than Hong Kong rates measured in 2000 (HKFYG, 2000), with 20% of adolescents (under 18 years of age) reporting alcohol use. When compared to US prevalence rates (The Center on Alcohol Marketing and Youth, 2006), underage alcohol use is at a lower rate. Monitoring the Future (The Center on Alcohol Marketing and Youth, 2006) reported that approximately one in six eighth-graders drank alcohol in the past month (one in three 10th-graders, and one in two 12th–graders), and were defined as current drinkers. Underage drinking prevalence rate for those ages 12 to 20 was at 28.2% (use in the past month) and by the end of high school, 75% (3 out of 4) of adolescents have used alcohol. Furthermore, the National Survey on Drug Use and Health (2009) reported approximately 10.9 million underage youths (ages 12 to 20) using alcohol in the past month and 7.2 million underage youths binge drinking (drinking 5 or more drinks at a time at least once in the past month).

Delinquent behaviors was a continuous variable that measured frequency of behaviors such as, cheating on tests/homework, making fun of or picking on others, shoplifting from a store, lying to a teacher, staying out all night without permission, or carrying a weapon at school. The current study’s measure of delinquency was taken from Jessor et al.’s (2003) study, and comparing delinquency T-score rates, the rates for the current sample was 50.00, which is lower than US rates (52.32), but higher than rates in Mainland China (47.94). The gender differences in T-scores also mirrored these results, with Hong Kong adolescent male and female scores falling in between the U.S. scores (higher than Hong Kong) and Mainland China scores (lower than Hong Kong). In another study comparing 2142 high school students from Mainland China (i.e., Guangzhou) and Hong Kong, students from Hong Kong had significantly higher self-reported
delinquent behaviors (Cheung, Ngai, & Ngai, 2007). The mean level of delinquency for students in Guangzhou was 5.5 ($SD = 10.5$) while the mean for students in Hong Kong was 10.3 ($SD = 14.5$).

Correlational analyses showed a positive correlation between all three problem behavior outcomes, such that, as behavior increases in one problem behavior, behavior also increases with respect to the other two. For example, as delinquency increased, so did smoking and alcohol use behaviors. This confirmed Jessor’s Problem Behavior Theory and past research on the covariance of problem behaviors (Arnett, 1998; Biglan et al., 2003; Biglan & Severson, 2003; Biglan & Wang, 2003; Donovan & Jessor, 1985; Griffiths et al., 2006; Kalman, Kim, DiGirolamo, Smelson, & Ziedonis, 2009; Magid et al., 2009; Piko & Kovács, 2009; Roberts et al., 2007; Weitzman & Chen, 2005). Furthermore, regression analyses found that problem behaviors of smoking, alcohol use and delinquent behavior, all predict each other.

**Demographic Factors and the Problem Behavior Outcomes**

Gender, age, country of origin, involvement in extracurricular/community activities, and employment status were assessed and analyzed in terms of the three problem behavior outcomes: smoking, alcohol use, and delinquency. School band level was also a demographic variable that was assessed as a function of the problem behavior outcomes. This will be discussed more extensively later in the chapter as it was one of the main hypotheses of this study.

For gender, results showed that there was no statistical difference between males and females as a function of smoking behavior, alcohol use, or delinquency. Although the mean for delinquent behaviors was higher in males, and there were more males in the current smokers and drinkers categories, this was not statistically significant. While the results did not indicate statistical significance, this is still consistent with past research that has found problem behavior
profiles to differ according to gender (Griffiths et al., 2006; Krantz, Lynch, & Russell, 2002; Roberts et al., 2007; Zweig, Lindberg, & McGinley, 2001), with males reporting on average, more problem behaviors than females. Roberts et al., (2007) found that males were more likely to have disruptive and substance use disorders while females exhibited fewer disorders (i.e., substance use, conduct behavior). With respect to delinquency, current study data was not consistent with past research in Hong Kong that found that females engaged in higher rates of certain delinquent behaviors (Davis et al., 1998; Feldman et al., 1991; Hui & Cheung, 1996; Lau & Leung, 1992a; 1992b). Notably, past literature may be outdated and current norms show no gender differences. For example, the current study confirms other research that examined the statistical significance of gender differences in which results found negligible gender differences (Ausems, Mesters, van Breukelen, & De Vries, 2009; deLeeuw et al, 2009; Hahm, Lahiff, & Guterman, 2004; Vaccaro & Wills, 1998). Furthermore, in a study (Hahm et al., 2004) examining gender differences in smoking and alcohol use among Asian Americans, results also did not find any gender differences in binge drinking and smoking.

Age was independent of delinquent behaviors, which is not consistent with past literature where older adolescents tend to engage in more problem behaviors, such as smoking (Audrain-McGovern et al., 2009; Faeh, Viswanathan, Chiolero, Warren, & Bovet, 2006; Lam et al., 2001a; 2001b) and delinquency (Declercq, Markey, Vandist, & Verhaeghe, 2009). Statistical analysis was not performed on the relationship between age and smoking and alcohol use due to a very small frequency in some of the behavior categories. Recent longitudinal research (Audrain-McGovern et al., 2009) on adolescent smoking behavior found that at baseline 5% of adolescents (10th graders; N = 947) were smoking daily, 7% smoking weekly, and 13% smoked at least once per month. Follow up data collection was at one and two years post-high school, and results
showed that daily smoking increased to 10%, weekly to 15%, and smoked at least once a month to 25%.

Country of origin was only related to smoking behaviors and alcohol use, where adolescents who were native to Hong Kong were more likely to be in the current smokers and drinkers categories. Country of origin was not related to delinquency. Delinquency may not be statistically related to the country of origin due to the disproportionate number of adolescents in the sample who were not native to Hong Kong. About 79% of the sample was Chinese originally from Hong Kong, while the rest of the sample was either Chinese from Mainland China (20%) or from other countries (1%). Tam and Lam (2005) examined delinquency and country of origin, and found that local-born adolescents in Hong Kong were more likely to report delinquent behaviors, as compared to migrant adolescents who were originally from Mainland China and had been living in Hong Kong for less than 7 years. Of noteworthy, this study found that as the length of residence in Hong Kong increases, the profiles of the migrant adolescents became more like local-born adolescents (ex., lower self-esteem and higher incidences of delinquency), suggesting the process of acculturation, specifically, a negative assimilation to their current social environment. These migrant adolescents start to incorporate mainstream local-born adolescents’ thinking, values, and behaviors.

Involvement in extracurricular/community activities and employment status were not related to delinquency. Statistical analysis was not performed on the relationship between extracurricular/community activities and employment status with smoking and alcohol use due to a very small frequency in some of the behavior categories. The research literature itself is inconsistent in its stance on the benefits of organized extracurricular/community activities (Guest & Schneider, 2003; McNeal, 1999). Hence, studies have distinguished between the various
activities and its effects on problem behaviors. Research that studied extracurricular such as sports (especially team sports), has shown increases in alcohol use (frequency and binge drinking), problems with alcohol use (drinking and driving), and delinquency, especially in males (Fauth, Roth, & Brooks-Gunn, 2007; Gardner, Roth, & Brooks-Gunn, 2009; Guest & McRee, 2009; Mays & Thompson, 2009; Metzger, Crean, & Forbes-Jones, 2009). Others studies have found that delinquency decreases with involvement in athletics (Pate, Strost, Levin, & Dowda, 2000; Ripke, Huston, & Casey, 2006; Wichstrøm & Wichstrøm, 2009). In a study by Wichstrøm and Wichstrøm’s (2009), this longitudinal study on a sample of 3251 adolescents found that participation in athletics such as team sports (as compared to individual sports) and endurance sports were associated with less tobacco and cannabis use. Verkooijen, Nielsen, and Kremers (2009) surveyed 16 to 22 year olds, and found that sports activity (outside of school time) was negatively related to smoking (i.e., involvement in sports activity was linked to less smoking behavior).

With alcohol use, gender differences may be linked to the fact that participating in male athletics is frequently associated with the tendency to socialize and attend parties where alcohol is present. With regard to age of initiation, adolescents who participated in sport activities were less likely to report alcohol use at 12 years or younger, as compared to male non-athletes (Mays & Thompson, 2009). May and Thompson’s (2009) study also compared female athletes to non-athletes, female athletes were less likely to report any lifetime alcohol use, current use, and early use (12 years or younger). Other studies have shown that participation in nonathletic activities is associated with less delinquency (Hoffmann & Xu, 2002), since most structured activities (church groups, volunteering, chess club) are generally assumed to be beneficial for adolescents, especially with adult supervision.
Although this study did not statistically test the relationship between employment status and smoking, those who had a job were more likely to report smoking daily. These results are similar to the research by Ramchand, Ialongo, and Chilcoat (2007), who examined the effects of paid employment and cigarette smoking on a sample of 799 adolescents who had been followed since the first grade (predominantly African American youths). Results showed a significant relationship between working for pay and tobacco use. At approximately the 10th grade follow up time point, amount of time spent working and current smoking exhibited a positive relationship. Thus, increase in time spent working also showed an increase in smoking and also earlier initiation of tobacco use. This effect was especially notable when the adolescents worked more than 10 hours per week. When comparing adolescents who were not working, those who started work one year after the 10th grade follow up and those who worked over 2 consecutive follow ups, were also more likely to smoke at an earlier age.

**Main Study Variables**

*Sensation seeking.* Gender differences as a function of sensation seeking were also examined in the current study. On overall sensation seeking, males were significantly more likely to engage in novel, experience-seeking behaviors than females. This result is consistent with past literature, where sensation seeking levels of males were higher than females (Ke et al., 2007; Rosenblitt, Soler, Johnson, & Quadagno, 2001; Roth, Schumacher, & Brähler, 2005; Wang et al., 2000; Zuckerman, 2007; Zuckerman, 1994; Zuckerman et al., 1978). Difference in school band level as a function of sensation seeking were also examined, and on overall sensation seeking, there were no difference between band one and band three level adolescents.

Correlational analyses showed that as overall sensation seeking score increases, so does involvement in smoking (current smokers), alcohol use (current drinkers), and delinquent
behaviors. These results confirm the current literature on the positive correlation between sensation seeking and problem behaviors (Audrain-McGovern et al., 2004; Audrain-McGovern et al., 2009; Brunelle, Douglas, Pihl, & Stewart, 2009; Duangpatra, Bradley, & Glendon, 2009; Dunlop & Romer, 2009; Flory & Manuck, 2009; Kreek et al., 2005; Maldonado-Molina, Piquero, Jennings, Bird, & Canino, 2009; Ravert et al., 2009; Ray et al., 2009). In a study by Ravert et al. (2009), among 1690 college students from nine US colleges and universities, sensation seeking was found to be a reliable risk factor that was associated with various problem behaviors (i.e., substance use, impaired driving).

In a clinical trial to test the efficacy of an alcohol treatment program found that those who were low in sensation seeking and impulsivity, and had a short DRD4 genotype (genetic marker for sensation seeking trait) were more likely to reduce their drinking behavior outcome (Ewing, LaChance, Bryan, & Hutchison, 2009). Another study examined delinquency among Puerto Rican children and adolescents and found that sensation seeking and delinquency were robust factors in determining trajectories of delinquent offenders (Maldonado-Molina et al., 2009). Finally, Brunelle et al. (2009) examined 32 incarcerated female offenders and 32 matched female controls, and found that sensation seeking was a significant independent predictor of delinquent behavior (i.e., incarceration status).

Psychological problem behaviors. The prevalence of psychological problem behaviors as measured by the Youth Self Report found that current study T-scores of internalizing, externalizing, and total problem behaviors (scores ranging from 50.80 to 52.06) were higher than the standardized norms in the US (total problem behavior score of 44.2) and in Hong Kong (scores ranging from 48.4 to 48.7: Leung et al., 2006; Leung et al., 2008; Velhurst et al., 2003). When examining the gender and school band level differences as a function of psychological
problem behaviors (internalizing and externalizing problem behaviors), there were differences in
gender and school band level only with internalizing problem behaviors. Females had
significantly higher internalizing problem behavior scores than males. In the literature, a gender
difference does exist for internalizing problem behaviors where females have exhibited more
internalizing type problem behaviors, such as anxious/depressed, somatic complaints, and
withdrawn symptoms (Davis et al., 2004; Fröjd et al., 2008; Leung et al., 2009; Mazza et al.,
2009; Owens & Shippee, 2009). In a 2009 Hong Kong study of adolescents (age 12 to 18 years;
N = 1099) by Leung et al., they found that adolescent females showed higher levels of depressive
symptoms than males. Davis et al. (2004) found that Hong Kong adolescent females reported
significantly more symptoms of depression and anxiety than males (N = 710).

Analyses on school band level, found that adolescents studying at the band one level
school had higher internalizing problem behaviors. With regard to school band level (ability
grouping), the research literature has produced results examining symptoms of internalizing
problem behaviors (Cheng & Chan, 2008; Cheung & Rudowicz, 2003a; 2003b; Hui, 2000; Kemp
& Watkins, 1996; Salili & Lai, 2003; Wong & Watkins, 2001). With regard to high ability
schools (band one level), students attending these schools have less conduct behavioral
problems, and have higher educational expectations (Hallinan, 1994; 1996; Kerckhoff &
Glennie, 1999). Adolescents who attend these high ability schools tend also to have higher
anxiety levels, more concerns with academic achievement (with more attribution to personal
deficiencies), higher performance and achievement goals, and lower self-concepts than students
from other ability level schools (Hui, 2000; Kemp & Watkins, 1996; Salili & Lai, 2003; Wong &
Watkins, 2001; Zeidner & Schleyer, 1999). This may offer an explanation to why adolescents
studying at high ability level schools exhibit poorer psychological well-being, specifically with
internalizing type problem behaviors (Cheng & Rudowicz, 2003a; 2003b). This is not to say that adolescents studying at a lower ability level school are immune from symptoms of internalizing problems. Research comparing school band levels has found that adolescents studying at a lower ability level school exhibited low self-efficacy, less learning strategies, low levels of positive attitude, motivation, and were anxious (Salili & Lai, 2003).

Analyses examining externalizing problem behaviors found no difference among males and females, and also no difference among adolescents attending a band one or band three level school. However, correlational analyses did find a positive relationship between externalizing problem behaviors and the three problem behavior outcomes, such that as externalizing problem behaviors increase, so does the behavior of smoking, alcohol use, and delinquency. With respect to delinquency and externalizing problem behaviors, many of the behaviors measured were exactly the same on both scales (e.g., shoplifting, vandalism, etc); hence, a strong correlation among these two variables.

In examining problem behavior outcomes, internalizing problem behaviors were positively related to alcohol use and delinquency, such that as internalizing problem behaviors increased, so did alcohol use and delinquency. Results were similar to those found in Mazza et al. (2009) where internalizing problems were related to alcohol use, and in a review of the literature by Blatt and Luyten (2009) that internalizing problems were positively related to delinquency. Smoking was not correlated with internalizing problem behaviors, which is not consistent with the results of a Hong Kong study (Lam et al., 2001a; 2001b) where results suggested that adolescents who reported depressive symptoms were also more likely to initiate smoking behavior and were less likely to quit smoking.
Values Orientation. All four of the higher order values orientation (conservation, openness to change, self-enhancement, and self-transcendence) and the basic values of hedonism were examined with respect to gender and school band level. Values orientation as a function of gender showed only significant differences in the values orientation of self-transcendence and hedonism, with females reporting higher self-transcendence and hedonistic orientations. Self-transcendence incorporates the two basic values orientation of universalism and benevolence. Those who report high universalistic traits are those who place high value on understanding, appreciation, tolerance, and protection for the welfare of all people for nature (Schwartz, 2006). Those who report high benevolence traits are those who place high value on preserving and enhancing the welfare of people with whom they have close contact with. Benevolence is more of an internally motivated trait as compared to conformity, where cooperation is valued to prevent negative consequences for themselves. Those who report high hedonistic traits are those who place high value on personal pleasure and sensuous gratification.

Society typically socializes males and females with different roles. These dissimilarities in gender roles, expectations, and motivations tend to also be expressed as different values orientation profiles. Specifically, according to Schwartz’ Values Theory, males tend to attribute more importance to the basic values of power, achievement, hedonism, stimulation, and self-direction, while females tend to place more value on benevolence, universalism, conformity, and security values. These differences in values priority hold true cross-culturally (across 70 countries, including China and Hong Kong), although there are some variations in the degree or size of differences with respect to the values of conformity and tradition (Schwartz & Rubel, 2005). The results from this study do confirm the literature’s findings that females significantly place higher values priority to the values orientation of benevolence and universalism, but does
not confirm the gender differences for hedonism. This study found that females place significantly place higher values priority to hedonistic traits, which goes against past findings that males tend to report more hedonistic values.

When school band level was examined, there were differences with all five values orientations, with band one level adolescents reporting higher levels of conservation, openness to change, self-enhancement, self-transcendence, and hedonistic values orientation. Individuals who have higher educational achievement and more educational experiences tend to be have more intellectual openness, flexibility in thinking, and are more self-directed. These traits are highly similar to the values orientation of self-enhancement (basic values: achievement-self success/ambition and power-social status/prestige, control over others and resources) and openness to change, which is made up of the basic values of stimulation (high values on excitement, novelty, and challenge in life) and self-direction (high values on independent thought and action, independent choice, creativity, and exploration).

Theoretically, the findings support Schwartz’s (1992) theory of the interrelationships between values: the circular model. This circular model has been supported by more than 200 studies in over 70 countries (Bardi et al., 2009; Lee et al., 2008; Maio et al., 2009; Schwartz & Rubel, 2005; Vecchione et al., 2009). The correlations between the values orientation were consistent with Schwartz’ theory structure (Schwartz, 1992) that a values orientation is more correlated to those that are adjacent to them, than those that are opposite or further away. For example, values orientation of conservation and openness to change were more strongly correlated to the values of self-enhancement and self-transcendence than to each other. The values orientations of self-enhancement and self-transcendence were more strongly correlated to the values of conservation and openness to change than to each other.
The four higher-order values orientations are organized as two pairs of conflicting dimensions (conservation vs. openness to change and self-transcendence vs. self-enhancement). The values that are directly opposite to each other in the values circle are not antonyms, but are in contradiction to each other based on their conflicting motivations. If one’s motivations are conflicting, this usually leads to opposite judgments or behaviors; thus, if one’s motivations are compatible, this often leads to the same behavior or judgment. For example (Bardi et al., 2009), if your supervisor asks you to do something that goes against your beliefs or judgment, there are two opposing paths that you may go: comply or not comply. If you choose not to comply, then you would satisfy your value of self-direction but go against your values of security and conformity. On the other hand, if you choose to comply, then you satisfy your values of security and conformity (adjacent to each other) while going against your values of self-direction (opposite values in the circle). Thus, pursuing differing values has psychological, social, and practical consequences that may be harmonious or conflicting with one another. Consequently, if one places high importance on holding values that are opposite to each other, it is certain that this will bring on internal conflict and may lead to diminished coping and overall well-being. Since band one level students had significantly higher levels of each values orientation than those students from the band three level school, this may certainly be linked to the fact that band one level students reported more internalizing problem behaviors. In addition, holding opposite values may produce social and practical problems, since behavior may become inconsistent which others may find to be quite frustrating and annoying. This may be especially valid for adolescents. In the current study, although correlations between values orientations are consistent with Schwartz’s circular model, all correlations were still in the positive direction; thus, possibly indicating internal conflict among its responders.
High endorsement of achievement values has been found to correlate with anxiety, stress and emotional instability (Yik & Tang, 1996). According to Schwartz, higher values placed on openness to change, should coincide with a decrease in values priority placed with conformity (restraint of actions and impulses that upset or harm others and violate social expectations/norms), tradition (respect, commitment, acceptance of customs/thoughts of traditional culture/religion), and security (safety, harmony, stability of society, of relationships, and of oneself), which comprises the values orientation of conservation. This finding may not hold true cross culturally and was not found in the current study. Hong Kong adolescents are also faced with the traditional Chinese values of Confucius that place high priority on conformity, tradition and security. The basic values orientation of hedonism shares many of the traits of both openness to change and self-enhancement, and thus explains the high endorsement in all three values orientation.

Correlational analyses were performed on values orientation and the outcomes of smoking, alcohol use, and delinquency. With respect to smoking behavior, there was a negative relationship between the five values orientation (conservation, openness to change, self-enhancement, self-transcendence, and hedonism) and smoking, that is, current smokers were less likely to endorse high values on all five values orientation. Alcohol use was negatively correlated with the values orientation of conservation, and self-transcendence, and positively related to openness to change. Delinquency was negatively related to both conservation and self-transcendence, such that as delinquent behaviors increased, so the endorsement of values priority on obedience, tradition, social order, social justice, equality, and helpfulness decrease.
Predictors of Problem Behavior Outcomes

The current study investigated predictors of problem behavior outcomes (smoking, alcohol use, and delinquency) within an adolescent population living in Hong Kong. Linear and multinomial logistic regression analyses were used, with demographic variables, overall sensation seeking score, psychological problem behavior score (internalizing and externalizing behaviors), and values orientation as the predictor variables.

For delinquency, the following variables when entered into the linear regression equation were found to be predictors of delinquent behaviors: school band level, overall sensation seeking score, externalizing problem behavior score, values orientation of conservation, and the problem behavior outcomes of smoking and alcohol use. These variables accounted for a total of 31% of the variance explaining delinquency. Based on these findings, school band level, sensation seeking, externalizing problem behavior, values orientation of conservation, smoking behavior, and alcohol use may be predictive of delinquency and in the present study could identify delinquent adolescents accurately. Similar conclusions were drawn by several studies regarding the importance of these predictors as factors related to delinquency (Davis et al., 1998; Donohew et al., 2000; Goff & Goddard, 1999; Kalichman et al., 2002; Zuckerman, 1994). However, internalizing problem behavior score and the values orientation of self-transcendence, although correlated with delinquency, were not significant predictors of these behaviors.

For smoking behavior, multinomial logistic regression analyses found that school band level, sensation seeking, externalizing problem behaviors, values orientation of openness to change, and alcohol use all predictive of smoking behavior. Specifically, sensation seeking, externalizing problem behaviors, school band level, and alcohol use were reliable predictors of current smokers from never smokers, while the values orientation of openness to change, school
band level, and alcohol use were reliable predictors of not-current smokers from never smokers. Similar conclusions were drawn by several studies regarding the importance of these predictors as factors related to smoking behavior (Davis et al., 1998; Donohew et al., 2000; Goff & Goddard, 1999; Kalichman et al., 2002; Kalman et al., 2009; Magid et al., 2009; Saraceno et al., 2009; Weitzman & Chen, 2005; Whiteside & Lynam, 2009; Zuckerman, 1994).

The study’s significant predictor variables accounted for a total of 40.0% of the variance explaining smoking behavior category, and was able to correctly classify 93.4% of the observations. However, the present study failed to find predictive significance with the variables of delinquency, internalizing problem behaviors, gender, and the values orientations of conservation, self-enhancement, self-transcendence, and hedonism, suggesting that these variables do not differentiate between the smoking behavior categories. Magid et al. (2009) found that internalizing problem behaviors (i.e., negative affect) was a significant predictor of smoking behavior, which this study did not confirm.

For alcohol use, multinomial logistic regression analyses found that age, school band level, sensation seeking, internalizing problem behaviors, values orientation of openness to change and self-transcendence, and the problem behavior outcomes of smoking and delinquency, were all predictive of alcohol use behavior. Specifically, sensation seeking, internalizing problem behaviors, school band level, values orientation of openness to change and self-transcendence, and smoking and delinquency were reliable predictors of current drinkers from never drinkers, while the school band level, sensation seeking, age, and smoking behavior were reliable predictors of not-current drinkers from never drinkers. In comparison to the literature, similar conclusions were drawn by several studies regarding the importance of these predictors as a factor related to alcohol use (Davis et al., 1998; Donohew et al., 2000; Goff & Goddard, 1999;
Kalichman et al., 2002; Piko & Kovács, 2009; Saraceno et al., 2009; Weitzman & Chen, 2005; Whiteside & Lynam, 2009; Zuckerman, 1994), while Skeer et al. (2009) found that internalizing problem behaviors were not significant predictors of alcohol use disorders.

The study’s significant predictor variables accounted for a total of 23.5% of the variance explaining alcohol use behavior category, and was able to correctly classify 70.6% of the observations. However, the present study failed to find predictive significance with the variables of externalizing problem behaviors, and the values orientation of conservation, suggesting that these variables do not differentiate between the alcohol use behavior categories.

School Banding and Problem Behavior Outcomes

When examining the differences between adolescents who attend a band one or band three level school, there were significant findings with all three of the problem behavior outcomes. Adolescents studying at a band three level school were significant more likely to be categorized as current smokers and drinkers, and also reported more delinquent behaviors.

For adolescents, the majority of the day is spent at school; hence, the school itself may become a significant risk or protective factor for the engagement of problem behaviors. School climate and attachment to school and teachers have been found to serve as protective factors against involvement with problem behaviors (Fitzpatrick, Piko, & Wright, 2005; Simons-Morton, Davis Crump, Haynie, & Saylor, 1999). The question of whether these results are related to higher ability students or better teaching methods, could not be determined in this current study nor other studies (Salili & Lai, 2003), as the variable of school band level may have been confounded with the ability levels as well as the socioeconomic background of the students (which could not be measured in this study due to missing data). However, it can be construed that higher ability level schools provide students with a more optimum learning
environment and the majority of students are of higher ability (Salili & Lai, 2003). The issues that lower ability level schools face are further complicated by inadequate resources and facilities, lack of quality teachers, in addition to negative peer group influences. Maeher and Midgely (1996) found that in North America, poor school environments do have an affect on student learning, performance, and motivation, and also have students of lower socioeconomic backgrounds. Furthermore, school drop out rates, and learning and behavioral problems are more prevalent in lower ability level schools (Raffini, 1993).

Implications of Findings

There are a number of important implications that must be addressed. First, the findings add to a slow-growing literature illustrating how cultural and individual values may be good predictors of engagement in adolescent problem behaviors of smoking, alcohol use, and delinquency (especially in Hong Kong adolescents). Second, these findings suggest that Hong Kong students who attend a band one level school or a band three level school are significantly different in their propensity to engage in problem behaviors. Overall, this information may be useful to clinicians (i.e., psychologist, counselors, and social workers), teachers, teacher educators, and school administrators when working with or helping adolescents.

This study highlights the importance of values orientation in predicting adolescents’ problem behavior. From a practical standpoint, the design of clinical interventions might benefit from the knowledge that altering or instilling values is a more effective approach to reducing problem behaviors than are direct attempts to control the behavior itself. Although intuitively, this might be apparent, numerous existing programs including juvenile delinquency programs continue to exercise an authoritarian approach to controlling youths’ behavior (Greenwood, 2008), and place little if any emphases on building youths’ relationships with individuals who
might provide positive guidance to youths (i.e., individuals who are supportive of youths, but who also endorse mainstream values).

Understanding a person’s core values provides insight about how values may act as motivators for behavior change. Much research on values and health behavior change has been conducted in the context of motivational interviewing (MI), a patient-centered directive counseling method that enhances intrinsic motivation to change by helping individuals explore and resolve behavioral ambivalence (Miller & Rollnick, 1991; 2002). This method of counseling was first used in substance abusers, and since then, has been used in numerous settings, such as HIV prevention, smoking cessation, diet and exercise, and medication adherence (Hettema, Steele, & Miller, 2005). Motivational Interviewing has been shown to be effective in facilitating behavior change in over 70 clinical trials (Hettema et al., 2005) and has a specific component of the therapy that focuses on an individual’s values and its discrepancies with behavior.

Furthermore, with respect to the ability of changing an individual’s values orientation, studies in the field of values have found that merely reminding or activating a value (“priming”) can increase an individual’s behavior in pursuit of that particular motive or value (Bargh, Gollwitzer, Lee-Chai, Barndollar, & Trotschel, 2001; Hertel & Kerr, 2001; Maio et al., 2009). For example, in one particular study, when the value of ‘helpfulness’ was primed, participants were more likely to offer help to an experimenter during a minor lab accident, as compared to those participants who were not primed (Macrae & Johnson, 1998). This also confirms the fact that in guiding adolescents through behavior change, targeting values may be a great way to indirectly change behavior without as much resistance.

With respect to prevention and intervention practices, it is essential to take individual differences into account when investigating adolescents’ behaviors and needs. Prevention and
intervention programs must pay attention to the population they target and consider the possible student differences. In order to best serve students, schools may want to conduct research on their own students to determine effective intervention based on the unique needs of their students. Certainly, intervention to target those with externalizing problem behaviors may not be effective for adolescents with internalizing problem behaviors. Furthermore, throughout high school, risk assessments should be regularly completed to determine the particular student needs within schools.

This sample represented a population that is often underrepresented in similar research. The adolescents were from high and low ability level schools, thus this study’s distinction between adolescents attending different ability level schools uniquely contributed to the current research literature. Across all three problem behaviors studied in this research, band three level adolescents (low ability school) had significantly more current smokers and alcohol users and more delinquency. In a Hong Kong study by Davies and colleagues (2004), positive school environments, as typically found in band one level schools, was found to be a protective factor in preventing adolescents from engaging in delinquent behaviors. These schools foster both psychological and intellectual development. Adolescents at high risk for delinquency were found to attend less favorable school environments (band three level schools).

For those adolescents who engage in problem behaviors, they must be given the opportunity to perceive that they are losing a lot because they are engaging in these risks. Adolescents must be given a greater opportunity to feel that they have something to lose by engaging in risk behavior. Those who perceive that they have little to lose (no hope because they are attending a low ability school), may be more likely to participate in risky activities. It is possible that programmatic efforts to stimulate an adolescent’s thinking and interest in academic
pursuits may be one of the most salient interventions we can provide. This is to ensure that adolescents’ experimentation with smoking, alcohol, and delinquent behaviors as part of normal development does not evolve into anti-social lifestyles which may limit their growth into adulthood. Programs that involve working with youth to increase the salience of opportunities that are incompatible with problem behaviors are encouraged. Similarly, several programs that emphasize positive youth development have proven to effectively reduce adolescent risk behavior, including Raising Healthy Children (Catalano et al., 2003), the Seattle Social Development Project (Hawkins et al., 2007; Oesterie, Hill, Hawkins, & Abbott, 2008), and Strengthening Families Program (Molgaard, Kumpfer, & Spoth, 1994).

Finally, this study has its implications for teachers, teacher educators, and school administrators. The ability to identify protective factors and screen for risk factors or problem behaviors will improve their ability to educate, counsel, and refer adolescents when needed. Furthermore, school administrators and teachers need to be aware of the problem behaviors that may be specific to their schools at a particular point in time. For example, in lower ability level schools (band three), problematic behaviors of smoking, alcohol use, and delinquency may be more salient than in higher ability level schools (band one) where internalizing psychological problem behaviors may be more prevalent.

In teacher education, the changing contexts of the adolescent and their family must be considered in its impact on adolescent learning and growth. Moreover, there is a need to reduce the stigmatization and discrimination against adolescents from lower ability level high schools, and to provide them with a more supportive school environment. As such, as trivial as it sounds, adolescents and their parents must also be educated on how to ask for help, especially in a culture where asking for external guidance is considered to be a source of family shame and
disgrace. In a culture where parents place high importance and give much attention to their adolescent’s education, the school may be a great entry point for providing parents with assistance, especially those parents who would otherwise be reluctant to obtain professional help. Consequently, a supportive school environment is needed for parents and adolescents. In such an environment, student or family problems may be revealed or detected, but more importantly, where guidance and assistance is readily available.

Furthermore, the context of the guidance should be different depending on the school, where in higher ability level schools, there should be a focus on internalizing problem behaviors (i.e., depression, anxiety), while in lower ability level schools there should be a focus on academic motivation and the propensity for engagement in problem behaviors. Another crucial point is that in order to foster a positive educational environment for these students, it is advantageous to borrow from Western experience, prevention and intervention strategies, but more importantly, it is imperative that these experiences and strategies must be adapted to suit the Chinese culture within the Hong Kong context.

Limitations of Study

This study has some limitations that should be noted. First, this study did encounter some questionnaire completion issues with certain variables, such as socioeconomical status, GPA, and religious involvement (i.e., significant omissions or multiple responses for the same question). Among those who did not correctly complete these questions, there were no significant differences in gender, school band level, and age. One possibility is that the adolescent did not understand the instructions for that specific question or did not know the actual response to be given (i.e., parent’s highest education level or job status). For the questions assessing socioeconomical status (i.e., type of employment, salary, highest level of education completed),
there were nine response choices for each of their parents (mother and father), with both columns side by side, confusion may have arose due to too many response choices and the physical layout of the responses. Future research may also consider having a parent complete these questions.

For the question assessing current GPA (i.e., “What kind of grades do you usually get?”), confusion in response may have also been due to the numerous response categories (i.e., 11 response choices: “Mostly A’s”, “A’s and B’s”, “Mostly A’s and B’s, and some C’s”, “Mostly B’s”, etc). Furthermore, some students may not have been aware of their current GPA, since the questionnaire was given in the month of January, when mid-term exams were just about to begin. More importantly, it would be interesting to find out if there was anything that was remarkable about those students who chose not to answer or chose multiple responses to these questions (i.e., shame/guilt in having lower grades, or in their socioeconomical status).

A single question assessed religious involvement: “How many times have you gone to church or religious or spiritual services during the past six months?” (six response categories). Comprehension of the question may have been the main issue for missing or multiple data. Additional questions should have been incorporated into the questionnaire packet; for example, questions regarding religious involvement that goes beyond asking about frequency (i.e., importance of religious beliefs in their lives, asking for divine guidance or help, and their belief in God or the Divine). In general, future research should also provide question examples to aid in the comprehension of the question.

Another limitation is that this study’s design did not control for the possibility of a social desirability effect (Davis, Thake, & Vilhena, 2009; Ross & Fernández-Esquer, 2005). This is true for both the band one and band three level schools. The questionnaires were anonymous (i.e., teachers were not present, only the research assistant), however, participants may have been
concerned with confidentiality as the questionnaires were completed in a classroom setting surrounded by their peers. For adolescents attending the band one level school (high ability school), where academic achievement and exemplary behavior is expected, they may be more likely to underreport the extent of their involvement in smoking, alcohol use, and delinquency. For adolescents attending the band three level school (low ability school), they may feel pressures of conforming to peer standards of the normalcy of reporting problem behaviors. Therefore, participants in the study may have indicated lower or higher levels of problem behaviors to conform to perceived social norms. Unfortunately, social desirability was not measured in this study; thus, future research should include a measure of social desirability or may have students complete questionnaires in a different location, such as, community centers or at their home (i.e., mail in responses).

Finally, this current study had a large sample size, which may have increased the power to detect statistical differences (i.e., inflating the results), so even very small differences may have been detected. If a smaller sample had been used the same findings may not be observed. This study was mostly exploratory, the combination of these variables have not been examined in this particular sample in the literature; thus, the use of a more stringent \( p \) level \( (p \leq .01 \) as compared to the current level of \( p \leq .05 \)) may be more appropriate for future research. Finally, conducting the study with a different, perhaps smaller, sample may lead to slightly different findings. For example, a high risk-taking sample may be used, such as with other low ability level or alternative schools or in more specific samples such as those who do not attend school (drop outs), are incarcerated, or in clinical treatment for addictions or psychological problem behaviors.
Directions for Future Research

Scientific evidence on the patterns and causes of youth problem behavior, both qualitative and quantitative, is essential for developing rational and effective responses to the problem. While an understanding of the phenomenon of problem behaviors has greatly progressed, there are still gaps that remain in the study of Chinese adolescents (especially those from Hong Kong) and problem behaviors, which future empirical research should complete.

The results of this study reveal some areas for future research that are likely to provide further insight into adolescent problem behavior. First, it is clear that longitudinal studies that begin with children before adolescence and that follow them through to adulthood are imperative. Data on the antecedents to smoking, alcohol use, and delinquency need to be collected before the adolescent has engaged in problem behavior, so that evidence of causal effects may potentially be examined. Furthermore, the effects of developmental growth and life-changing events may have its effect on an adolescent’s values system (Bardi et al., 2009), thus further supporting the need for longitudinal research designs.

Second, though the current research utilized the literature in a number of inter-related fields to formulate the essential variables which were to be included in the regression analyses, the list of independent variables did not include several key factors which have been implicated in adolescents’ decision to engage in problem behaviors. For example, the literature on adolescent problem behaviors clearly show that peer modeling and the frequency and quality of parental monitoring/supervision and relationships are all strong correlates to problem behavior development (Brook, Brook, Zhang, & Cohen, 2009; Cookston, 1999; Darling, Cumsille, & Martinez, 2008; Duangpatra, Bradley, & Glendon, 2009; Ellickson, Tucker, & Klein, 2008; Hoeve et al., 2009; Jessor et al., 1995; Le et al., 2009; Monahan, Steinberg, & Cauffman, 2009;
Nelis & Rae, 2009). Studies in Hong Kong have shown that negative peer influence is one of the strongest predictors for problem behaviors (i.e., delinquency, smoking, alcohol use, substance use), while family variables were found to be protective against these deviant behaviors (Abdullah & Ho, 2006; Cheung et al., 2007; Cheung, Liu, & Lee, 2005; Cheung & Ngai, 2007; Cheung & Tse, 2008; Davis et al., 2004; Griffiths et al., 2006; Lai, Ho, & Lam, 2004; Leung et al., 2009; Liu & Fung, 2005; Lou & Shek, 2006; Ngai et al., 2007; Shek, 2007; Wong, Lok, Lo, & Ma, 2008). It is possible that critical variables such as these confounded the relationship between current study variables. Thus there is a need for further refinements to this study’s theoretical basis for future research.

Third, it would be an interesting expansion of this research to replicate this study with a high risk-taking sample, such as with other low ability level or alternative schools or in more specific samples such as those who do not attend school (drop outs), are incarcerated, or in clinical treatment for addictions or psychological problem behaviors. Those adolescents are at higher risk for participation in problem behaviors and therefore the effects of protective factors and risk factors may be very different for them. Another expansion would be a more intricate study looking specifically at those adolescents who choose not to engage in problem behaviors, abstainers, or those who just experiment with problem behaviors, to identify factors that uniquely protect them from engaging in any problem behaviors.

Fourth, since this research was mostly exploratory all those variables that were significantly correlated with the outcome variables were entered into the regression analysis together as one block. An expansion to the current research should examine precisely each variable’s unique contribution to the total variance.
Lastly, it may be interesting in future research to study the relationship between Hong Kong adolescent problem behaviors and a teacher’s or parent’s contribution to the problem (i.e., stereotypes, parenting style, and teacher/parent personality traits). An interesting point evolving from this research is that lower band level students had significantly more incidences of engagement in problem behavior. Thus, teachers’ and parents’ perception on adolescent problem behavior should also be examined, especially adolescents attending differing ability level schools. One thought is that teachers’ and parents’ perceptions of adolescents attending lower ability level schools may have demonstrated some prejudicial stereotypes that could indirectly affect behavior. This may in part be attributed to the constraint that only problematic behavioral cases come to the notice of teachers and parents. Cultural values within Hong Kong schools and family environments seem to be continually evolving and being negotiated. Teachers’ and parents’ role in their support for the adolescent in changing cultural values may have to be defined and redefined.

Conclusion

The present study contributes to the existing literature in four major ways. First of all, the present study provided current prevalence rates of problem behaviors in a population of Hong Kong adolescents. The findings obtained from this study, both descriptive and statistical, provide a profile of Hong Kong adolescent smoking, alcohol use, and delinquency patterns. Second, the study provided additional support for the theoretical positions of Problem Behavior Theory, Sensation Seeking Theory, and Values Theory in this population of adolescents. Thirdly, the study is the only one to investigate values orientation and problem behaviors in a sample of adolescents in Hong Kong. Lastly, the study is the only one to investigate the difference in
problem behaviors between differing ability level schools in Hong Kong (high and low level school).

Findings emphasize the importance and confirm past literature that school environment (different ability level of school), sensation seeking traits, psychological problem behaviors, and values orientation as significant predictors of problem behavior. Theoretically, this study is among the first to test the predictive value that integrates these predictors in a sample of Hong Kong adolescents. Although several of these relationships have been examined individually in past research, the integration of these factors resulted in valuable insights into which adolescents are more prone to engage in problem behaviors.

Over the past three decades, a great amount has been learned about the nature and causes of adolescent problem behaviors and how to prevent them. This knowledge, although based mainly on research from western culture, provides a foundation from which to develop successful programs to prevent adolescent problem behaviors. However, more attention is merited for the investigation of engagement in problem behaviors in Hong Kong adolescents. Based on the present state of knowledge, the current study findings and recommendations, if implemented, should lead to greater understanding and more effective prevention and treatment of adolescent problem behaviors.

The detrimental effects of adolescent problem behavior are broad and far-reaching, from victims of juvenile crimes to health care providers to school systems, to the adolescent’s own family, health, and future. As this study shows, the predictors of problem behavior and means for prevention/intervention remain dramatically underexplored in adolescents living in Hong Kong. This study attempts to take a small but significant step toward enhancing that understanding and to identify directions for future research that may be fruitful in continuing that effort.
APPENDIX A

WAYNE STATE UNIVERSITY

COLLEGE OF EDUCATION

ADOLESCENT HEALTH AND DEVELOPMENT
QUESTIONNAIRE

INSTRUCTIONS

1. Please answer the questions in the order they appear in the booklet.

2. Fill in the circle next to your best answer or circle your best answer to each question.

3. There are no right or wrong answers. Please be as truthful as you can.

4. Your answers will be completely confidential. No one but the researchers will ever see your answers. Your name is not on any of the pages.

5. You have the right to skip any question that you do not want to answer.

6. You can stop filling out the questionnaire at any time you wish.

We hope you enjoy taking the questionnaire!

PLEASE GO TO PAGE 1 AND BEGIN ANSWERING THE QUESTIONS.
The following questions are about your background.

1. What sex are you?  □ Male    □ Female

2. How old are you now?    □ 13  □ 14  □ 15  □ 16  □ 17  □ 18  □ 19

3. In what month were you born?
   □ Jan    □ March    □ May    □ July    □ Sept    □ Nov
   □ Feb    □ April    □ June    □ Aug    □ Oct    □ Dec

4. What grade are you in?  □ Form 1  □ Form 2  □ Form 3  □ Form 4  □ Form 5
   □ Form 6  □ Form 7  □ Already graduated

5. What kind of grades do you usually get?  □ Mostly A’s
   □ A’s and B’s
   □ Mostly A’s and B’s, and some C’s
   □ Mostly B’s
   □ Mostly B’s and C’s
   □ Mostly B’s and C’s, and some D’s
   □ Mostly C’s
   □ Mostly C’s and D’s
   □ Mostly C’s and D’s, and some F’s
   □ Mostly D’s
   □ Mostly D’s and F’s

6. Mark below all of the people you are living with this year.
   □ Mother
   □ Father
   □ Stepmother
   □ Stepfather
   □ Brothers or stepbrothers.  How many?  □ 1 □ 2 □ 3 □ 4 □ 5 or more
   □ Sisters or stepsisters.  How many?  □ 1 □ 2 □ 3 □ 4 □ 5 or more
   □ Foster parents
   □ Grandparents
   □ Aunts and/or uncles
   □ Your own child (or children)  How many?  □ 1 □ 2 or more
   □ Other people.  Who?  ___________________________________________

7. Do your parents live together?
   □ Yes
   □ No, they’re divorced
   □ No, they’re separated and not living together
   □ No, my mother is not alive
   □ No, my father is not alive
8. What is your race or ethnic group?
- Chinese from Hong Kong
- Chinese from Mainland China
- Mainland China
- Other

What? _______________________

9. What language is spoken most often in your home?
- Cantonese
- Mandarin
- Other

What? _______________________

10. How many hours a week do you spend working at a paying job?
- None
- 1-10 Hours
- 11-20 Hours
- More Than 20 Hours

11. How many times have you gone to church or religious or spiritual services during the past six months?
- Once a week or more
- 2-3 times a month
- About once a month
- About every other month
- Once or twice
- None in the past six months

This section asks about smoking.

12. Have you ever smoked a cigarette (not just a few puffs)?
- No, never
- Yes, but only once
- A few times
- More than a few times

IF YOU MARKED ONE OF THESE TWO CIRCLES, SKIP TO NEXT SECTION ON ALCOHOL, QUESTION 16.

13. Have you smoked cigarettes in the past 12 months?
- No
- Once or Twice
- A Few Times
- More than a Few Times

IF NO, SKIP TO QUESTION 16.

14. During the past month, how many cigarettes have you smoked on an average day?
- None at all
- Less than one cigarette a day
- Between 1 and 3 cigarettes a day
- Between 4 and 8 cigarettes a day
- About half a pack a day
- About a pack a day
- About 1 ½ packs a day
- About 2 packs or more a day

15. How old were you when you first smoked a cigarette? ________ Years Old

This section is about alcohol.

16. Have you ever had a drink of beer, wine, or liquor – not just a sip or a taste of someone else’s drink?
- Yes
- No
17. Have you had a drink of beer, wine, or liquor more than two or three times in your life – not just a sip or a taste of someone else’s drink?
   □ Yes   □ No ➡ IF YOU MARKED NO, SKIP TO QUESTION 22

18. During the past six months, how often did you drink alcohol?
   □ No ➡ IF YOU MARKED NO, SKIP TO QUESTION 22
   □ Once or twice in the past 6 months
   □ 34 times in the past 6 months
   □ About once a month
   □ Two or three times a month
   □ Once a week
   □ Two or three times a week
   □ Four or five times a week
   □ Every day

19. Over the past six months, how many times did you drink four or more drinks of beer, wine, or liquor when you were drinking?
   □ Never
   □ Once
   □ 2-3 Times
   □ 4-5 Times
   □ More than twice a week
   □ Once a month

20. Over the past six months, how many times has each of the following happened because you had been drinking?
    a. You’ve gotten into trouble with your parents because you had been drinking
    □ Never  □ Once  □ Twice  □ 3-4 Times  □ 5 or more Times
    b. You’ve had problems at school or with schoolwork because you had been drinking
    □ Never  □ Once  □ Twice  □ 3-4 Times  □ 5 or more Times
    c. You’ve had problems with your friends because you had been drinking
    □ Never  □ Once  □ Twice  □ 3-4 Times  □ 5 or more Times
    d. You’ve had problems with someone you were dating because you had been drinking
    □ Never  □ Once  □ Twice  □ 3-4 Times  □ 5 or more Times
    e. You’ve gotten into trouble with the police because you had been drinking

21. In the past six months, about how many times have you gotten drunk or “very very high” on alcohol?
   □ Never  □ 2 or 3 days a month
   □ Once  □ Once a week
   □ 2-3 Times  □ Twice a week
   □ 4-5 Times  □ More than twice a week
   □ Once a month
Think about how you see your future. I think the chances are:

<table>
<thead>
<tr>
<th>22. WHAT ARE THE CHANCES THAT:</th>
<th>Very Low</th>
<th>Low</th>
<th>About Fifty-Fifty</th>
<th>High</th>
<th>Very High</th>
</tr>
</thead>
<tbody>
<tr>
<td>22a. You will graduate from high school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>22b. You will have a job that pays well?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>22c. You will be doing the kind of work that you like?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>22d. You will have a happy family life?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>22e. You will be respected by other people?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

DURING THE PAST SIX MONTHS, HOW OFTEN HAVE YOU:

<table>
<thead>
<tr>
<th>23a. Cheated on tests or homework?</th>
<th>Never</th>
<th>Once</th>
<th>Twice</th>
<th>3-4</th>
<th>5 or more</th>
</tr>
</thead>
<tbody>
<tr>
<td>23b. Shoplifted from a store?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>23c. Damaged or marked up public or private property on purpose?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>23d. Lied to a teacher about something you did?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>23e. Taken something of value that doesn’t belong to you?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>23f. Stayed out all night without permission?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>23g. Lied to your parents about where you have been or who you were with?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>23h. Hit another student because you didn’t like what he or she did?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>23i. Carried a weapon, like a knife or gun, at school?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>23j. Made fun of or picked on other kids because they are different or not part of your group?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
24. Last school year, did you get suspended or expelled from school?  □ Yes  □ No

25. Have you ever been a part of a gang or a triad?
□ No, Never
□ Yes, I am currently involved in a gang/triad.
□ Yes, but not anymore.

These next questions are about different types of school and community activities.

26. Do you belong to any school clubs or organizations (besides sports teams), like the drama club, school newspaper, peer counselors, and so on?
□ Yes  □ No
If Yes, about how many hours a week do you spend in those activities? ______ hours

27. Do you belong to any community groups (like Boy Scouts or Big Sisters), or to any church groups (like choir, Bible study, or youth group)?
□ Yes  □ No
If Yes, about how many hours a week do you spend in those activities? ______ hours

28. Do you do any kind of volunteer work in the community?
□ Yes  □ No
If Yes, about how many hours a week do you spend in those activities? ______ hours
Person Profiles IVM

Here we briefly describe some people. Please read each description and think about how much each person is or is not like you. Put an X in the box to the right that shows how much the person in the description is like you.

1. Thinking up new ideas and being creative is important to him. He likes to do things in his own original way.

2. It is important to him to be rich. He wants to have a lot of money and expensive things.

3. He thinks it is important that every person in the world be treated equally. He believes everyone should have equal opportunities in life.

4. It's very important to him to show his abilities. He wants people to admire what he does.

5. It is important to him to live in secure surroundings. He avoids anything that might endanger his safety.

6. He thinks it is important to do lots of different things in life. He always looks for new things to try.

7. He believes that people should do what they're told. He thinks people should follow rules at all times, even when no-one is watching.

8. It is important to him to listen to people who are different from him. Even when he disagrees with them, he still wants to understand them.

9. He thinks it's important not to ask for more than what you have. He believes that people should be satisfied with what they have.

10. He seeks every chance he can to have fun. It is important to him to do things that give him pleasure.

11. It is important to him to make his own decisions about what he does. He likes to be free to plan and to choose his activities for himself.

12. It's very important to him to help the people around him. He wants to care for their well-being.

13. Being very successful is important to him. He likes to impress other people.
14. It is very important to him that his country be safe. He thinks the state must be on watch against threats from within and without.

15. He likes to take risks. He is always looking for adventures.

16. It is important to him always to behave properly. He wants to avoid doing anything people would say is wrong.

17. It is important to him to be in charge and tell others what to do. He wants people to do what he says.

18. It is important to him to be loyal to his friends. He wants to devote himself to people close to him.

19. He strongly believes that people should care for nature. Looking after the environment is important to him.

20. Religious belief is important to him. He tries hard to do what his religion requires.

21. It is important to him that things be organized and clean. He really does not like things to be a mess.

22. He thinks it's important to be interested in things. He likes to be curious and to try to understand all sorts of things.

23. He believes all the world’s people should live in harmony. Promoting peace among all groups in the world is important to him.

24. He thinks it is important to be ambitious. He wants to show how capable he is.

25. He thinks it is best to do things in traditional ways. It is important to him to keep up the customs he has learned.

26. Enjoying life’s pleasures is important to him. He likes to ‘spoil’ himself.

27. It is important to him to respond to the needs of others. He tries to support those he knows.

28. He believes he should always show respect to his parents and to older people. It is important to him to be obedient.
29. He wants everyone to be treated justly, even people he doesn’t know. It is important to him to protect the weak in society.

30. He likes surprises. It is important to him to have an exciting life.

31. He tries hard to avoid getting sick. Staying healthy is very important to him.

32. Getting ahead in life is important to him. He strives to do better than others.

33. Forgiving people who have hurt him is important to him. He tries to see what is good in them and not to hold a grudge.

34. It is important to him to be independent. He likes to rely on himself.

35. Having a stable government is important to him. He is concerned that the social order be protected.

36. It is important to him to be polite to other people all the time. He tries never to disturb or irritate others.

37. He really wants to enjoy life. Having a good time is very important to him.

38. It is important to him to be humble and modest. He tries not to draw attention to himself.

39. He always wants to be the one who makes the decisions. He likes to be the leader.

40. It is important to him to adapt to nature and to fit into it. He believes that people should not change nature.

Thank you for your cooperation!
Sensation Seeking Scale – form V (SSS-V)

Interest and preference test

*Directions*: Each of the items below contains two choices A and B. Please indicate which of the choices most describes your likes or the way you feel. In some cases you may find items in which both choices describe your likes or feelings. Please choose the one which better describes your likes or feelings. In some cases you may find items in which you do not like either choice. In these cases mark the choice you dislike least. Do not leave any items blank. It is important you respond to all items with only one choice, A or B. We are interested only in your likes or feelings, not in how others feel about these things or how one is supposed to feel. There are no right or wrong answers as in other kinds of tests. Be frank and give your honest appraisal of yourself.

<table>
<thead>
<tr>
<th></th>
<th>A.</th>
<th>B.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I like “wild” uninhibited parties.</td>
<td>I prefer quiet parties with good conversation.</td>
</tr>
<tr>
<td>2.</td>
<td>There are some movies I enjoy seeing a second or even third time.</td>
<td>I can’t stand watching a movie that I’ve seen before.</td>
</tr>
<tr>
<td>3.</td>
<td>I often wish I could be a mountain climber.</td>
<td>I can’t understand people who risk their necks climbing mountains.</td>
</tr>
<tr>
<td>4.</td>
<td>I dislike all body odors.</td>
<td>I like some of the earthy body smells.</td>
</tr>
<tr>
<td>5.</td>
<td>I get bored seeing the same old faces.</td>
<td>I like the comfortable familiarity of everyday friends.</td>
</tr>
<tr>
<td>6.</td>
<td>I like to explore a strange city or section of town by myself, even if it means getting lost.</td>
<td>I prefer a guide when I am in a place I don’t know well.</td>
</tr>
<tr>
<td>7.</td>
<td>I dislike people who do or say things just to shock or upset others.</td>
<td>When you can predict almost everything a person will do and say he or she must be a bore.</td>
</tr>
<tr>
<td>8.</td>
<td>I usually don’t enjoy a movie or play where I can predict what will happen in advance.</td>
<td>I don’t mind watching a movie or play where I can predict what will happen in advance.</td>
</tr>
<tr>
<td>9.</td>
<td>I have tried marijuana or would like to.</td>
<td>I would never smoke marijuana.</td>
</tr>
<tr>
<td>10.</td>
<td>I would not like to try any drug which might produce strange and dangerous effects on me.</td>
<td>I would like to try some of the drugs that produce hallucinations.</td>
</tr>
<tr>
<td>11.</td>
<td>A sensible person avoids activities that are dangerous.</td>
<td>I sometimes like to do things that are a little frightening.</td>
</tr>
<tr>
<td>12.</td>
<td>I dislike “swingers” (people who are uninhibited and free about sex).</td>
<td>I enjoy the company of real “swingers.”</td>
</tr>
<tr>
<td>13.</td>
<td>I find that stimulants make me uncomfortable.</td>
<td>I often like to get high (drinking liquor or smoking marijuana).</td>
</tr>
</tbody>
</table>
14. A. I like to try new foods that I have never tasted before.
   B. I order the dishes with which I am familiar so as to avoid disappointment and unpleasantness.

15. A. I enjoy looking at home movies, videos, or travel slides.
   B. Looking at someone’s home movies, videos, or travel slides bores me tremendously.

16. A. I would like to take up the sport of water skiing.
   B. I would not like to take up water skiing.

17. A. I would like to try surfboard riding.
   B. I would not like to try surfboard riding.

18. A. I would like to take off on a trip with no preplanned or definite routes, or timetable.
   B. When I go on a trip I like to plan my route and timetable fairly carefully.

19. A. I prefer the “down to earth” kinds of people as friends.
   B. I would like to make friends in some of the “far-out” groups like artists or “ punks.”

20. A. I would not like to learn to fly an airplane.
    B. I would like to learn to fly an airplane.

21. A. I prefer the surface of the water to the depths.
    B. I would like to go scuba diving.

22. A. I would like to meet some persons who are homosexual (men or women).
    B. I stay away from anyone I suspect of being “gay” or “lesbian.”

23. A. I would like to try parachute jumping.
    B. I would never want to try jumping out of a plane, with or without a parachute.

24. A. I prefer friends who are excitingly unpredictable.
    B. I prefer friends who are reliable and predictable.

25. A. I am not interested in experience for its own sake.
    B. I like to have new and exciting experiences and sensations even if they are a little frightening, unconventional, or illegal.

26. A. The essence of good art is in its clarity, symmetry of form, and harmony of colors.
    B. I often find beauty in the “clashing” colors and irregular forms of modern paintings.

27. A. I enjoy spending time in the familiar surroundings of home.
    B. I get very restless if I have to stay around home for any length of time.

28. A. I like to dive off the high board.
    B. I don’t like the feeling I get standing on the high board (or I don’t go near it at all).

29. A. I like to date persons who are physically exciting.
    B. I like to date persons who share my values.

30. A. Heavy drinking usually ruins a party because some people get loud and boisterous.
    B. Keeping the drinks full is the key to a good party.

31. A. The worst social sin is to be rude.
    B. The worst social sin is to be a bore.
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>32.</td>
<td>A. A person should have considerable sexual experience before marriage.</td>
</tr>
<tr>
<td></td>
<td>B. It’s better if two married persons begin their sexual experience with each other.</td>
</tr>
<tr>
<td>33.</td>
<td>A. Even if I had money, I would not care to associate with flighty rich persons in the “jet set.”</td>
</tr>
<tr>
<td></td>
<td>B. I could conceive of myself seeking pleasures around the world with the “jet set.”</td>
</tr>
<tr>
<td>34.</td>
<td>A. I like people who are sharp and witty even if they do sometimes insult others.</td>
</tr>
<tr>
<td></td>
<td>B. I dislike people who have their fun at the expense of hurting the feelings of others.</td>
</tr>
<tr>
<td>35.</td>
<td>A. There is altogether too much portrayal of sex in movies.</td>
</tr>
<tr>
<td></td>
<td>B. I enjoy watching many of the “sexy” scenes in movies.</td>
</tr>
<tr>
<td>36.</td>
<td>A. I feel best after taking a couple of drinks.</td>
</tr>
<tr>
<td></td>
<td>B. Something is wrong with people who need liquor to feel good.</td>
</tr>
<tr>
<td>37.</td>
<td>A. People should dress according to some standard of taste, neatness, and style.</td>
</tr>
<tr>
<td></td>
<td>B. People should dress in individual ways even if the effects are sometimes strange.</td>
</tr>
<tr>
<td>38.</td>
<td>A. Sailing long distances in small sailing crafts is foolhardy.</td>
</tr>
<tr>
<td></td>
<td>B. I would like to sail a long distance in a small but seaworthy sailing craft.</td>
</tr>
<tr>
<td>39.</td>
<td>A. I have no patience with dull or boring persons.</td>
</tr>
<tr>
<td></td>
<td>B. I find something interesting in almost every person I talk to.</td>
</tr>
<tr>
<td>40.</td>
<td>A. Skiing down a high mountain slope is a good way to end up on crutches.</td>
</tr>
<tr>
<td></td>
<td>B. I think I would enjoy the sensations of skiing very fast down a high mountain slope.</td>
</tr>
</tbody>
</table>
Below is a list of items that describe kids. For each item that describes you now or within the past 6 months, please circle the 2 if the item is very true or often true of you. Circle the 1 if the item is somewhat or sometimes true of you. If the item is not true of you, circle the 0.

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>1. I act too young for my age</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>2. I have an allergy (describe:</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3. I argue a lot</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>4. I have asthma</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>5. I act like the opposite sex</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>6. I like animals</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>7. I brag</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>8. I have trouble concentrating or paying attention</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>9. I can’t get my mind off certain thoughts (describe:</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>10. I have trouble sitting still.</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>11. I’m too dependent on adults</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>12. I feel lonely</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>13. I feel confused or in a fog</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>14. I cry a lot</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>15. I am pretty honest</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>16. I am mean to others</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>17. I daydream a lot</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>18. I deliberately try to hurt or kill myself</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>19. I try to get a lot of attention</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>20. I destroy my own things</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>21. I destroy things belonging to others</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>22. I disobey my parents</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>23. I disobey at school</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>24. I don’t eat as well as I should</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>25. I don’t get along with other kids</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>26. I don’t feel guilty after doing something I shouldn’t</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>27. I am jealous of others</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>28. I am willing to help others when they need help</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>29. I am afraid of certain animals, situations, or places, other than school (describe:</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>30. I am afraid of going to school</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>31. I am afraid I might think or do something bad</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>32. I feel that I have to be perfect</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>33. I feel that no one loves me</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>34. I feel that others are out to get me</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>35. I feel worthless or inferior</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>36. I accidentally get hurt a lot</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>37. I get in many fights</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>38. I get teased a lot</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>39. I hang around with kids who get in trouble</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>40. I hear sounds or voices that other people think aren’t there (describe:</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>41. I act without stopping to think</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>42. I would rather be alone than with others</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>43. I lie or cheat</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>44. I bite my fingernails</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>45. I am nervous or tense</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>46. Parts of my body twitch or make nervous movements (describe:</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>47. I have nightmares</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>48. I am not liked by other kids</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>49. I can’t do certain things better than most kids</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>50. I am too fearful or anxious</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>51. I feel dizzy</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>52. I feel too guilty</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>53. I eat too much</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>54. I feel overstimulated</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>55. I am overweight</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>56. Physical problems without known medical cause:</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>a. Arthritis or pains (not headaches)</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>b. Headaches</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>c. Nausea, feel sick</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>d. Problems with eyes (describe:</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>e. Rashes or other skin problems</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>f. Stomachaches or cramps</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>g. Vomiting, throwing up</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>h. Other (describe:</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>57. I physically attack people</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>58. I pick my skin or other parts of my body (describe:</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>59. I can be pretty friendly</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>60. I like to try new things</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>61. My school work is poor</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>62. I am poorly coordinated or clumsy</td>
</tr>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>63. I would rather be with older kids than with kids my own age.</td>
</tr>
<tr>
<td>Item</td>
<td>Code</td>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>------</td>
<td>------</td>
<td>-------------</td>
<td></td>
</tr>
<tr>
<td>158</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>64</td>
<td>0</td>
<td>I would rather be with younger kids than with kids my own age</td>
<td></td>
</tr>
<tr>
<td>65</td>
<td>1</td>
<td>I refuse to talk</td>
<td></td>
</tr>
<tr>
<td>66</td>
<td>2</td>
<td>I repeat certain actions over and over (describe):</td>
<td></td>
</tr>
<tr>
<td>67</td>
<td>1</td>
<td>I run away from home</td>
<td></td>
</tr>
<tr>
<td>68</td>
<td>2</td>
<td>I scream a lot</td>
<td></td>
</tr>
<tr>
<td>69</td>
<td>0</td>
<td>I am secretive or keep things to myself</td>
<td></td>
</tr>
<tr>
<td>70</td>
<td>0</td>
<td>I see things that other people think aren't there (describe):</td>
<td></td>
</tr>
<tr>
<td>71</td>
<td>1</td>
<td>I am self-conscious or easily embarrassed</td>
<td></td>
</tr>
<tr>
<td>72</td>
<td>2</td>
<td>I feel silly</td>
<td></td>
</tr>
<tr>
<td>73</td>
<td>0</td>
<td>I can work well with my hands</td>
<td></td>
</tr>
<tr>
<td>74</td>
<td>2</td>
<td>I show off or clown</td>
<td></td>
</tr>
<tr>
<td>75</td>
<td>1</td>
<td>I am shy</td>
<td></td>
</tr>
<tr>
<td>76</td>
<td>2</td>
<td>I smoke less than most kids</td>
<td></td>
</tr>
<tr>
<td>77</td>
<td>0</td>
<td>I sleep more than most kids during day and/or night (describe):</td>
<td></td>
</tr>
<tr>
<td>78</td>
<td>1</td>
<td>I have a good imagination</td>
<td></td>
</tr>
<tr>
<td>79</td>
<td>2</td>
<td>I have a speech problem (describe):</td>
<td></td>
</tr>
<tr>
<td>80</td>
<td>1</td>
<td>I stand up for my rights</td>
<td></td>
</tr>
<tr>
<td>81</td>
<td>2</td>
<td>I steal at home</td>
<td></td>
</tr>
<tr>
<td>82</td>
<td>0</td>
<td>I steal from places other than home</td>
<td></td>
</tr>
<tr>
<td>83</td>
<td>2</td>
<td>I store things I don't need (describe):</td>
<td></td>
</tr>
<tr>
<td>84</td>
<td>1</td>
<td>I do things other people think are strange (describe):</td>
<td></td>
</tr>
<tr>
<td>85</td>
<td>0</td>
<td>I have thoughts that other people would think are strange (describe):</td>
<td></td>
</tr>
<tr>
<td>86</td>
<td>2</td>
<td>I am stubborn</td>
<td></td>
</tr>
<tr>
<td>87</td>
<td>0</td>
<td>My moods or feelings change suddenly</td>
<td></td>
</tr>
<tr>
<td>88</td>
<td>2</td>
<td>I enjoy being with other people</td>
<td></td>
</tr>
<tr>
<td>89</td>
<td>0</td>
<td>I am suspicious</td>
<td></td>
</tr>
<tr>
<td>90</td>
<td>1</td>
<td>I swear or use dirty language</td>
<td></td>
</tr>
<tr>
<td>91</td>
<td>2</td>
<td>I think about killing myself</td>
<td></td>
</tr>
<tr>
<td>92</td>
<td>1</td>
<td>I like to make others laugh</td>
<td></td>
</tr>
<tr>
<td>93</td>
<td>2</td>
<td>I talk too much</td>
<td></td>
</tr>
<tr>
<td>94</td>
<td>1</td>
<td>I tease others a lot</td>
<td></td>
</tr>
<tr>
<td>95</td>
<td>2</td>
<td>I have a hot temper</td>
<td></td>
</tr>
<tr>
<td>96</td>
<td>1</td>
<td>I think about sex too much</td>
<td></td>
</tr>
<tr>
<td>97</td>
<td>0</td>
<td>I threaten to hurt people</td>
<td></td>
</tr>
<tr>
<td>98</td>
<td>2</td>
<td>I like to help others</td>
<td></td>
</tr>
<tr>
<td>99</td>
<td>1</td>
<td>I am too concerned about being neat or clean</td>
<td></td>
</tr>
<tr>
<td>100</td>
<td>2</td>
<td>I have trouble sleeping (describe):</td>
<td></td>
</tr>
<tr>
<td>101</td>
<td>1</td>
<td>I cut classes or skip school</td>
<td></td>
</tr>
<tr>
<td>102</td>
<td>2</td>
<td>I don't have much energy</td>
<td></td>
</tr>
<tr>
<td>103</td>
<td>1</td>
<td>I am unhappy, sad, or depressed</td>
<td></td>
</tr>
<tr>
<td>104</td>
<td>2</td>
<td>I am louder than other kids</td>
<td></td>
</tr>
<tr>
<td>105</td>
<td>0</td>
<td>I use alcohol or drugs for nonmedical purposes (describe):</td>
<td></td>
</tr>
<tr>
<td>106</td>
<td>1</td>
<td>I try to be fair to others</td>
<td></td>
</tr>
<tr>
<td>107</td>
<td>2</td>
<td>I enjoy a good joke</td>
<td></td>
</tr>
<tr>
<td>108</td>
<td>1</td>
<td>I like to take life easy</td>
<td></td>
</tr>
<tr>
<td>109</td>
<td>2</td>
<td>I try to help other people when I can</td>
<td></td>
</tr>
<tr>
<td>110</td>
<td>0</td>
<td>I wish I were of the opposite sex</td>
<td></td>
</tr>
<tr>
<td>111</td>
<td>2</td>
<td>I keep from getting involved with others</td>
<td></td>
</tr>
<tr>
<td>112</td>
<td>0</td>
<td>I worry a lot</td>
<td></td>
</tr>
<tr>
<td>113</td>
<td>2</td>
<td>I am fond of animals (describe):</td>
<td></td>
</tr>
<tr>
<td>114</td>
<td>0</td>
<td>I enjoy music (describe):</td>
<td></td>
</tr>
<tr>
<td>115</td>
<td>2</td>
<td>I am a good listener (describe):</td>
<td></td>
</tr>
<tr>
<td>116</td>
<td>0</td>
<td>I am a good writer (describe):</td>
<td></td>
</tr>
<tr>
<td>117</td>
<td>2</td>
<td>I am a good reader (describe):</td>
<td></td>
</tr>
<tr>
<td>118</td>
<td>0</td>
<td>I am a good thinker (describe):</td>
<td></td>
</tr>
<tr>
<td>119</td>
<td>2</td>
<td>I am a good planner (describe):</td>
<td></td>
</tr>
<tr>
<td>120</td>
<td>0</td>
<td>I am a good speaker (describe):</td>
<td></td>
</tr>
<tr>
<td>121</td>
<td>2</td>
<td>I am a good listener (describe):</td>
<td></td>
</tr>
<tr>
<td>122</td>
<td>0</td>
<td>I am a good writer (describe):</td>
<td></td>
</tr>
<tr>
<td>123</td>
<td>2</td>
<td>I am a good reader (describe):</td>
<td></td>
</tr>
<tr>
<td>124</td>
<td>0</td>
<td>I am a good thinker (describe):</td>
<td></td>
</tr>
<tr>
<td>125</td>
<td>2</td>
<td>I am a good planner (describe):</td>
<td></td>
</tr>
<tr>
<td>126</td>
<td>0</td>
<td>I am a good speaker (describe):</td>
<td></td>
</tr>
</tbody>
</table>
美國韋恩州大學

教育學院

青少年健康與發展問卷調查

作答指引

1. 請跟隨本冊子問題次序作答。

2. 請圈出或在圈內填寫每題最佳答案。

3. 答案絕對沒有對錯之分，只要反映真實即可。

4. 所有提供的資料是絕對保密。除本調查的研究員外，其他人是不會知道作答內容。您的名字也不會在報告書的任何一頁上出現。

5. 如果你不想回答某些題目，您是有權跳答下一題。

6. 你也可以隨時停止作答。

希望你會喜歡參與這次調查
請由第一章開始作答。
下列問題是關於你的背景

1. 你的性別是   □ 男 ( )   □ 女 ( )

2. 你的年齡是   □ 13 歲
   □ 14 歲
   □ 15 歲
   □ 16 歲
   □ 17 歲
   □ 18 歲
   □ 19 歲

3. 你在那一個月份出生？
   □ 一月  □ 三月  □ 五月  □ 七月  □ 九月  □ 十一月
   □ 二月  □ 四月  □ 六月  □ 八月  □ 十月  □ 十二月

4. 現在你唸中學哪一班？
   □ 中一  □ 中二  □ 中三  □ 中四
   □ 中五  □ 中六  □ 中七  □ 已中學畢業 ( )

5. 你大部份的成績是？
   □ 大多數是 A ( )
   □ 有 A 也有 B ( )
   □ 大多數是 A 和 B，也有些是 C ( )
   □ 大多數是 B ( )
   □ 大多數是 B 和 C ( )
   □ 大多數是 B 和 C，也有些是 D ( )
   □ 大多數是 C ( )
   □ 大多數是 C 和 D ( )
   □ 大多數是 C 和 D，也有些是 F ( )
   □ 大多數是 D ( )
   □ 大多數是 D 和 F ( )
6. 今年和你同住的有 (請圈出所有同住的親人)
   □ 母親
   □ 父親
   □ 繼母
   □ 繼父
   □ 兄弟或姊妹。有多少人？ □ 1 □ 2 □ 3 □ 4 □ 5 或以上
   □ 姐妹或繼姊妹。有多少人？ □ 1 □ 2 □ 3 □ 4 □ 5 或以上
   □ 舅父或舅母
   □ 祖父母
   □ 姑母和叔叔
   □ 你自己有多少個孩子？ □ 1 □ 2 或以下
   □ 其他人。他們是誰？__________________________

7. 你的父母是同住嗎？
   □ 是的
   □ 不，他們已離婚
   □ 不，他們已分居，不一起生活
   □ 不，我的母親已離世
   □ 不，我的父親已離世

8. 你的族裔是甚麼？
   □ 生於香港的中國人
   □ 非生於香港的中國人：□ 來自中國 □ 來自國外
   □ 如非中國人請說明來自甚麼地方，國籍________________

8a. 你移居香港有多少年？_________
9. 你在家中最惯常讲的是那一種語言？
   □ 廣東話
   □ 普通話
   □ 其他 __________

10. 每一星期，你會花多少時間在有薪的工作上？
    □ 沒有工作
    □ 1-10 個小時
    □ 11-20 個小時
    □ 超過 20 個小時

11. a) 父母親的教育水平？
    父         母
    □   □ 小學尚未畢業
    □   □ 小學已畢業但未有升讀中學
    □   □ 有升讀中學，但沒有畢業
    □   □ 中學已畢業，但未有升讀大學(或同等程度的學府)
    □   □ 中學畢業後接受過職業訓練
    □   □ 有升讀大學，但沒有畢業
    □   □ 大學畢業
    □   □ 有研究院的教育程度
    □   □ 我不太清楚
11.b) 父親親的職業情況？

父母

□ □ 經理, 行政人員
□ □ 從商
□ □ 專業人士(如：教師, 醫生, 律師, 會計師)
□ □ 文員, 辦公室白領
□ □ 服務行業(服務員, 推銷員)
□ □ 從事漁農業(農夫, 漁夫)
□ □ 保姆
□ □ 清潔工作者
□ □ 建築工人
□ □ 工廠工人
□ □ 我不清楚
□ □ 其他

12. 在過去 6 個月期間你曾參與多少次教堂或一些宗教禮修活動？

□ 在過去 6 個月一次也沒有過
□ 一兩次(六個月內)
□ 大約隔月一次
□ 大約一個月一次
□ 一個月 2-3 次
□ 一週一次或以上

以下問題是關於吸煙

13. 你有沒有試過吸完一支煙(並非只吸幾口)？

□ 沒有, 從未試過
□ 有, 只試過一次
□ 有幾次
□ 超過幾次

**如果你選了兩個以上的答案，請跳過下一題有關酒精的第17題。**
14. 在過去 12 個月你有沒有吸煙？
   □沒有 (請跳答第 16 題) □
   □有試過一兩次 □
   □有幾次 □
   □超過幾次 □

15. 在過去一個月，你平均每天吸多少支煙？
   □一支也沒有 □
   □一日不到一支 □
   □一日 1 至 3 支 □
   □一日 4 至 8 支 □
   □大約每日半包 □
   □大約每日一包 □
   □大約一日至兩包半 □
   □大約一日至兩包或以上 □

16. 你第一次吸煙時，你的年齡是多少？ ___________ 歲

這個部分是關於喝酒習慣

17. 你是否有過啤酒、葡萄酒或烈酒？(只喝一口或試飲的不算)
   □沒有 □有 □

18. 你是否有過啤酒、葡萄酒或烈酒兩至三次？
   (只喝一口或試飲的不記) **若答沒有，請跳到第 23 題繼續回答。**
   □沒有 □有 □
19. 在過去六個月內，你有幾經常喝酒？

- [ ] 一次也沒有
- [x] 若答一次也沒有，請跳答第 23 條繼續作答。
- [ ] 在過去六個月內有一至兩次
- [ ] 在過去六個月內有三至四次
- [ ] 大約一個月一次
- [ ] 一個月兩至三次
- [ ] 一周一次
- [ ] 一周兩至三次
- [ ] 一周四至五次
- [ ] 每天

20. 在過去的六個月，當你喝酒時，有多少次是會喝上四杯或以上的呢？

- [ ] 沒有喝酒
- [ ] 一次
- [ ] 2-3 次
- [ ] 4-5 次
- [ ] 一個月一次
- [ ] 一個月兩至三次
- [ ] 每周一次
- [ ] 每周兩次
- [ ] 每周兩次以上
21. 在過去的六個月，有幾多次因你喝酒而發生以下情況？

<table>
<thead>
<tr>
<th>情況</th>
<th>沒有</th>
<th>一次</th>
<th>兩次</th>
<th>3-4次</th>
<th>5次以上</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. 因你一直喝酒，與父母發生衝突</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. 你因喝酒而未做功課或學校內出現問題</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. 因為你一直喝酒而與朋友出現問題</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. 因為你一直喝酒而與你正在約會的人出現問題</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. 因為你一直喝酒而與警察發生問題</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

22. 在過去六個月內，你是否有喝醉或興奮？

<table>
<thead>
<tr>
<th>比例</th>
<th>沒試過</th>
<th>一次</th>
<th>二至三次</th>
<th>四至五次</th>
<th>一個月一次</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

23. 想一想，你自己的將來是怎樣的？我認為有很大機會是：

<table>
<thead>
<tr>
<th>情況</th>
<th>非常低</th>
<th>低</th>
<th>一半</th>
<th>高</th>
<th>非常高</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
24. 在過去的六個月內你幾經常：

<table>
<thead>
<tr>
<th>行動</th>
<th>從沒有</th>
<th>一次</th>
<th>二次</th>
<th>三至四次</th>
<th>五次或以上</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. 考試或功課作弊</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b. 有店內偷竊？</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>c. 曾經將公共或私人</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>的地方加以破壞或塗污？</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. 對一名教師撒謊</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>隱瞞自己的事</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. 曾拿取不屬於</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>自己的東西</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. 未得父母同意</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>晚上不回家</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. 向父母隱瞞你去過</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>的地方及與你在一起的人</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. 因為某同學做過一些</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>你不喜歡的事，你曾動手打他</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i. 在校內曾攜帶如</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>刀仔、或有攻擊性的武器。</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. 取笑或愚弄一些與</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>自己不同或沒有埋你倆的人</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

25. 上個學年，你有沒有被停課或是給學校開除？

□否 □是

26. 你有沒有參加過黑幫或三合會活動？

□不，從未 □是的，我目前涉及黑幫或三合會。 □曾經是，但現在沒有。
以下問題是有關不同類型的學校及社區活動

27. 你屬於任何學校學會或組織 (除運動隊以外)，像劇社、校報、同儕輔導等等
   □ 否   □ 是
   如果是，那一周內，你花在那些活動的時間 _______ 小時

28. 你屬於任何社區組織 (像童子軍或者大姐姐計劃一樣)，或者到任何宗教小組 (像詩班，讀經小組，或青年團契組織) ？
   □ 否   □ 是
   如果是，那一周內，你花在那些活動的時間 _______ 小時

29. 你有參與任何種類志願社區工作嗎？
   □ 否   □ 是
   如果是，那一周內，你花在那些活動的時間 _______ 小時
人生價值觀調查

在這份問卷中，我們簡單地描述了一些人，請仔細閱讀每一段描寫人物的句子後，
選擇這個人與您相似的程序。

<table>
<thead>
<tr>
<th>1. 想出新主意、發揚創意對他來說很重要。他喜歡以自己獨創的方式做事。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. 富有對他來說很重要。他想要有很多錢和貴重的東西。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. 他認為世界上每個人都被平等的對待是很重要的。他相信人在生活中應該享有平等的機會。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. 表現自己的能力對他來說很重要。他希望受人敬佩。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5. 生活在安全的環境裡對他來說很重要。他會盡量避免危及他安全的任何事。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6. 他覺得嘗試生活中不同的事物是很重要的。他總是尋求嘗試新的事物。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>7. 他認為人們應該照顧別人的感受。他認為即使在沒有人注意的情況下，人們也應該隨時遵守規定。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>8. 聆聽與他不同的意見對他來說很重要。就算他不同意別人所說的，他也會試著去了解別人的意見。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>9. 他認為不想要超越你所能擁有的是很重要。他相信人應該知足。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>10. 他把握每個享受機會。做能帶給他樂趣的事對他來說很重要。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>11. 自己的事由自己做決定對他來說很重要。他喜歡自由的條約計劃，選擇自己想做的事</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>12. 助他身邊的人對他來說非常重要。他想要關心他們的幸福。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>13. 非常成功對他來說很重要。他喜歡令人留下印象。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>14. 國家安全對他來說很重要。他認為政府必須防範來自國內外的威脅。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>15. 他喜歡接受風險，他總是在尋求冒險經歷。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有點像我 □僅有一點點像我 □不像我 □完全不像我</td>
</tr>
<tr>
<td>16. 行為舉止合宜對他來說很重要。他避免去做別人認為是不對的事。</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>17. 有權責與發號司令對他來說很重要。他希望別人照他說的去做。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>18. 對朋友誠實對他來說很重要。他希望為親近的人付出。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>19. 他強烈的認為人類應該要保護大自然。照顧生態環境對他來說很重要。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>20. 宗教信仰對他來說很重要。他盡力的去遵守宗教的規範。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>21. 事物整齊有序對他來說很重要。他不喜歡把事情弄得一團亂。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>22. 他認為對事物感興趣是很重要的。他好奇而且喜歡尋根問底。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>23. 他認為世界人應該和平地相處。促進世界各族群的和平對他來說很重要。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>24. 他認為具有雄心大志很重要。他想要證明他的能力。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>25. 他認為最好是遵從傳統的方法做事。遵循習俗慣例對他來說很重要。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>26. 享受生活的樂趣對他是很重要的。他喜歡愛‘寵愛’自己。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>27. 回應他人所需對他來說很重要。他努力幫助他認識的人。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>28. 他認為他應該隨時尊重父母和長者。尊敬對他來說很重要。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>29. 他希望所有人都能夠受到公平的對待。即使是不認識的人。保護社會上弱勢的人對他來說很重要。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>30. 他喜歡飼養。刺激有趣的生活對他來說很重要。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>31. 他盡力避免生病。保持健康對他來說很重要。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>32. 他盡心對他來說很重要。他努力做善事比別人好。</th>
</tr>
</thead>
<tbody>
<tr>
<td>□非常像我 □像我 □有時像我 □僅有一點像我 □不像我 □完全不像我</td>
</tr>
</tbody>
</table>
33. 原諒曾經傷害過他的人對他來說很重要。他盡量去想別人好的方面，而不去怨恨別人。

<table>
<thead>
<tr>
<th>非常像我</th>
<th>像我</th>
<th>有點像我</th>
<th>僅有一點點像我</th>
<th>不像我</th>
<th>完全不像我</th>
</tr>
</thead>
</table>

34. 獨立對他來說很重要。他喜歡靠自己。

<table>
<thead>
<tr>
<th>非常像我</th>
<th>像我</th>
<th>有點像我</th>
<th>僅有一點點像我</th>
<th>不像我</th>
<th>完全不像我</th>
</tr>
</thead>
</table>

35. 政局穩定對他來說很重要。他關心社會秩序是否受到保護。

<table>
<thead>
<tr>
<th>非常像我</th>
<th>像我</th>
<th>有點像我</th>
<th>僅有一點點像我</th>
<th>不像我</th>
<th>完全不像我</th>
</tr>
</thead>
</table>

36. 時刻對別人有禮貌對他來說很重要。他盡量不去打擾或是惹惱別人。

<table>
<thead>
<tr>
<th>非常像我</th>
<th>像我</th>
<th>有點像我</th>
<th>僅有一點點像我</th>
<th>不像我</th>
<th>完全不像我</th>
</tr>
</thead>
</table>

37. 他很愛享受生活。過得寫意對他來說很重要。

<table>
<thead>
<tr>
<th>非常像我</th>
<th>像我</th>
<th>有點像我</th>
<th>僅有一點點像我</th>
<th>不像我</th>
<th>完全不像我</th>
</tr>
</thead>
</table>

38. 善良與謹慎對他來說很重要。他盡量不引起別人的注意。

<table>
<thead>
<tr>
<th>非常像我</th>
<th>像我</th>
<th>有點像我</th>
<th>僅有一點點像我</th>
<th>不像我</th>
<th>完全不像我</th>
</tr>
</thead>
</table>

39. 他總希望成為決策者。他喜歡做領袖。

<table>
<thead>
<tr>
<th>非常像我</th>
<th>像我</th>
<th>有點像我</th>
<th>僅有一點點像我</th>
<th>不像我</th>
<th>完全不像我</th>
</tr>
</thead>
</table>

40. 適應大自然的環境對他來說很重要。他認為人不應該改變大自然。

<table>
<thead>
<tr>
<th>非常像我</th>
<th>像我</th>
<th>有點像我</th>
<th>僅有一點點像我</th>
<th>不像我</th>
<th>完全不像我</th>
</tr>
</thead>
</table>

By Wayne 11 Jan, 2006
興趣及取向測驗

以下每題有兩項選擇，A 或 B。請你選出對你所喜愛的或你感興趣的描述。在某些情況下你會發現兩項選擇都描述出你所喜愛的或你的感覺。請選其中較恰當的描述。又在某些情況下你可能發現兩項選擇都沒有描述出你所喜愛的或你的感覺。請選擇其中較不會令你反感的一項。請不要漏空任何一題。

每題你只能選擇一個答案，或 A，或 B。我們只對你所喜愛的或你的感覺感興趣，請勿以別人對這些事情如何感興趣或一個人應當如何來感覺作答。問卷沒有對或錯的答案。請坦白地選出你的回應。

興趣與性向測驗

1. A. 我喜歡“狂野”派對。
   B. 我喜歡安靜的聚會，大家可以好好的談談話。

2. A. 有些我喜歡的電影，我會看二、三次。
   B. 我不可以忍受同一套電影看完再看。

3. A. 我時常希望成為一個攀山者。
   B. 我不明白為什麼有些人要冒險攀山。

4. A. 我不喜歡任何體味。
   B. 我喜歡一些身體的自然體味。

5. A. 經常見到一些熟悉的面孔令我覺得乏味。
   B. 我喜歡與熟的朋友在一起，那種舒服的熟悉感。
6. A. 我喜歡獨自去一個新城市探險，甘願冒迷路的險。

B. 如果我在一個陌生的地方，我會找人帶路。

7. A. 我不喜歡某些人做些事來唬嚇人，或者做些令人不好受的事。

B. 如果我可以完全估計到別人的行為與說話，我會覺得很悶。

8. A. 如果我一早就知道橋段，我不會享受這樣的電影或劇集。

B. 我不介意看一些早料到結局的電影或劇集。

9. A. 我試過 / 想試試吸食大麻。

B. 我永遠不會去吸食大麻。

10. A. 我不會試任何含有危險性或效用不明的藥物。

B. 我想試試一些令人產生幻覺的藥。

11. A. 聰明人會避免危險的活動。

B. 我有時會做一些稍為驚悚性的事。

12. A. 我不喜歡“開放”的人 (在性生活上沒有約束的人)。

B. 我喜歡一些比較開放的人。

13. A. 我覺得“刺激物”會令我不舒服。

B. 我時常會追求充分享刺激 (酗酒或吸食大麻)。

14. A. 我喜歡試新口味。

B. 我只點一些熟悉的菜式，以免失望或引起不愉快的感覺。

15. A. 我享受家庭影院，攝錄片或旅行幻燈片。

B. 看別人的家庭影院、攝錄片或旅行幻燈片令我覺得很悶。

|15|
16. A. 我會試學滑水。
    
    B. 我不會試滑水。

17. A. 我會試試滑浪。
    
    B. 我不會去試滑浪。

18. A. 我會喜歡一些沒有預設路線或行程的旅程。
    
    B. 如果我去旅行，我會詳細計劃路線及行程表。

19. A. 我喜歡結交「踏實」型的朋友。
    
    B. 我喜歡跟一些「另類」的人像藝術家或「龐客」(Punka)。

20. A. 我不會想駕駛飛機。
    
    B. 我希望學駕駛飛機。

21. A. 我喜歡在水面上多過潛入裏面。
    
    B. 我喜歡潛水。

22. A. 我希望認識一些同性戀的人(男或女)。
    
    B. 我想認識一些有同性戀嫌疑的人。

23. A. 我希望試試跳降落傘。
    
    B. 我不想從飛機跳出來，有沒有降落傘都沒有分別。

24. A. 我比較喜歡一些變化多的人。
    
    B. 我比較喜歡可靠及可估計的人。

25. A. 我對經歷沒有興趣。
    
    B. 我喜歡刺激的經歷及感覺雖然有時它們有些可怕，非傳統及甚至犯法。
26. A. 好的藝術品在於它的清晰、體態上的平衡美與及顏色的配合。

   B. 我時常在現代畫中發現“撞色”及不規則形態的美。

27. A. 我喜歡在家的熟悉環境中。

   B. 要我長期留在家中我會感覺不安。

28. A. 我喜歡高台跳水。

   B. 我不喜歡站在高跳板上的感覺 (我甚至不會走近)。

29. A. 我喜歡跟外表有吸引力的人約會。

   B. 我喜歡跟價值觀相似的人約會。

30. A. 豪飲通常會搞壞一個派對的氣氛，因為有些人會喧鬧生事。

   B. 好的聚會是讓賓客可以盡情豪飲。

31. A. 社交禮儀最要命的是無禮。

   B. 社交禮儀最要命的是問死人。

32. A. 一個人婚前應該有相當的性經驗。

   B. 未婚前後才經驗性比較好。

33. A. 就算我有錢，我也不會跟一些暴發戶來往。

   B. 我會想像自己與暴發戶一起四處尋樂。

34. A. 我喜歡牙尖嘴利的人，雖然他們會侮辱別人。

   B. 我不喜歡拿別人的感覺來開玩笑。

35. A. 電影中實在有太多性的描述。

   B. 我喜歡看電影中的性愛場面。
36. A. 幾杯落肚我會感覺很好。

   B. 要靠酒來振奮的人不對勁。

37. A. 我們穿衣要有一定的品味、清潔、及款式的要求。

   B. 我們談有個人的穿衣方式，有時甚至可以比較奇特。

38. A. 以小船長途航行是愚蠢的事。

   B. 我希望以精巧幹練的小船遠征。

39. A. 我對沉悶的人沒有耐性。

   B. 我發覺所有跟我談過的人都有一些有趣的地方。

40. A. 由高山滑雪下去是最容易有足傷的結局。

   B. 我會享受由高山滑下的感覺。
以下是作業的評估標準，請根據最近或過去六個月內的狀況，評定每項對你描述之準確程度：

非常準確或經常準確，請圈2；
接近或間中準確，請圈1；
不準確，請圈0。

<table>
<thead>
<tr>
<th>0 = 不準確</th>
<th>1 = 接近或間中準確</th>
<th>2 = 非常準確或經常準確</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 1 2 1. 我行為幼稚，與年齡不符</td>
<td>0 1 2 23. 我在學校不聽話</td>
<td></td>
</tr>
<tr>
<td>0 1 2 2. 我身體患有关節病。請描述：</td>
<td>0 1 2 24. 我胃口欠佳，吃得不好</td>
<td></td>
</tr>
<tr>
<td>0 1 2 3. 我經常爭辯</td>
<td>0 1 2 25. 我與其他人合得來</td>
<td></td>
</tr>
<tr>
<td>0 1 2 4. 我有哮喘病</td>
<td>0 1 2 26. 我做了不應該做的事也不感到內疚</td>
<td></td>
</tr>
<tr>
<td>0 1 2 5. 我的行為举止像異性</td>
<td>0 1 2 27. 我妒忌別人</td>
<td></td>
</tr>
<tr>
<td>0 1 2 6. 我喜愛動物</td>
<td>0 1 2 28. 當別人有需要時，我願意幫助</td>
<td></td>
</tr>
<tr>
<td>0 1 2 7. 我愛讀書</td>
<td>0 1 2 29. 我害怕某些動物，場合或地方(不包括學校)。請描述：</td>
<td></td>
</tr>
<tr>
<td>0 1 2 8. 我很難集中注意力</td>
<td>0 1 2 30. 我害怕上學</td>
<td></td>
</tr>
<tr>
<td>0 1 2 9. 我腦海中老是重複著某些事情，不能擺脫。請描述：</td>
<td>0 1 2 31. 我害怕自己會太多過分或做壞事</td>
<td></td>
</tr>
<tr>
<td>0 1 2 10. 我不能安坐</td>
<td>0 1 2 32. 我覺得自己必須很重看自重</td>
<td></td>
</tr>
<tr>
<td>0 1 2 11. 我過份依靠大人</td>
<td>0 1 2 33. 我覺得沒有其他人喜歡我</td>
<td></td>
</tr>
<tr>
<td>0 1 2 12. 我們相處寂寞</td>
<td>0 1 2 34. 我覺得別人都害我</td>
<td></td>
</tr>
<tr>
<td>0 1 2 13. 我感到自己被排斥，或茫然不知所措</td>
<td>0 1 2 35. 我覺得自己無用或自卑</td>
<td></td>
</tr>
<tr>
<td>0 1 2 14. 我經常哭泣</td>
<td>0 1 2 36. 我身體經常意外受傷</td>
<td></td>
</tr>
<tr>
<td>0 1 2 15. 我要寂寞</td>
<td>0 1 2 37. 我經常與人打架</td>
<td></td>
</tr>
<tr>
<td>0 1 2 16. 我對別人刻薄，斤斤計較</td>
<td>0 1 2 38. 我經常被人欺負</td>
<td></td>
</tr>
<tr>
<td>0 1 2 17. 我經常做白日夢</td>
<td>0 1 2 39. 我喜歡和有事生非的年青人來往</td>
<td></td>
</tr>
<tr>
<td>0 1 2 18. 我故意傷害自己或企圖自殺</td>
<td>0 1 2 40. 我聽到別人認為不存在的聲音或人聲。請描述：</td>
<td></td>
</tr>
<tr>
<td>0 1 2 19. 我要求別人經常注意自己</td>
<td>0 1 2 41. 我行事衝動，不經三思</td>
<td></td>
</tr>
<tr>
<td>0 1 2 20. 我破壞自己的東西</td>
<td>0 1 2 42. 我喜歡獨處多過與人一起</td>
<td></td>
</tr>
<tr>
<td>0 1 2 21. 我破壞別人的東西</td>
<td>0 1 2 43. 我說謊或欺騙</td>
<td></td>
</tr>
<tr>
<td>0 1 2 22. 我不聽父母的話</td>
<td></td>
<td></td>
</tr>
<tr>
<td>警戒行為</td>
<td>0 = 不準確</td>
<td>1 = 接近或間中準確</td>
</tr>
<tr>
<td>----------</td>
<td>----------</td>
<td>----------</td>
</tr>
<tr>
<td>44.  自我指揮</td>
<td>0 1 2</td>
<td>62. 我動作不協調或笨拙</td>
</tr>
<tr>
<td>45. 神經過敏或緊張</td>
<td>0 1 2</td>
<td>63. 我較喜歡和年紀比我大的年青人一起</td>
</tr>
<tr>
<td>46. 我身體某部分抽動或做出緊張的動作。請描述：</td>
<td>0 1 2</td>
<td>64. 我較喜歡和年紀比我小的年青人一起</td>
</tr>
<tr>
<td>47. 我發怒</td>
<td>0 1 2</td>
<td>65. 我拒絕與人交談</td>
</tr>
<tr>
<td>48. 我不喜歡年青人喜歡</td>
<td>0 1 2</td>
<td>66. 我不斷重複某些動作。</td>
</tr>
<tr>
<td>49. 有些事情我比大部分青年人做得好</td>
<td>0 1 2</td>
<td>67. 我離家出走</td>
</tr>
<tr>
<td>50. 我過度恐懼或焦慮</td>
<td>0 1 2</td>
<td>68. 我經常尖叫</td>
</tr>
<tr>
<td>51. 我感到頭痛</td>
<td>0 1 2</td>
<td>69. 我很堅強，有事不會說出來</td>
</tr>
<tr>
<td>52. 我過於感到内疚</td>
<td>0 1 2</td>
<td>70. 我看到別人認為不存的東西。請描述：</td>
</tr>
<tr>
<td>53. 我吃得過多</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>54. 我感到過份疲勞</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>55. 我身體過胖</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>56. 病因不明的症狀</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>a. 腦部痛楚（除頭痛外）</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>b. 頭痛</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>c. 作搐、作悶</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>d. 眼睛有毛病，請描述：</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>e. 出疹或其他皮膚病</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>f. 腹痛或其他抽筋</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>g. 嘔吐</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>h. 其他，請描述：</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>57. 我攻擊他人身體</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>58. 我抓弄皮膚或其他部位，請描述：</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>59. 我可以顧友善</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>60. 我喜歡嘗試新事物</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>61. 我功課差</td>
<td>0 1 2</td>
<td></td>
</tr>
<tr>
<td>0 = 不正確</td>
<td>1 = 接近或間中正確</td>
<td>2 = 非常正確或經常正確</td>
</tr>
<tr>
<td>-----------</td>
<td>-----------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>0 1 2 84. 我有些行動別人會覺得古怪，請描述：</td>
<td>0 1 2 108. 我喜歡隨遇而安</td>
<td></td>
</tr>
<tr>
<td></td>
<td>0 1 2 109. 在能力範圍內，我盡量幫助別人</td>
<td></td>
</tr>
<tr>
<td></td>
<td>0 1 2 110. 我想變成異性</td>
<td></td>
</tr>
<tr>
<td></td>
<td>0 1 2 111. 我盡量避免與人深入交往</td>
<td></td>
</tr>
<tr>
<td></td>
<td>0 1 2 112. 我有很多憂慮</td>
<td></td>
</tr>
<tr>
<td>0 1 2 86. 我很固執</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 1 2 87. 我的情緒或感受會突然變化</td>
<td>0 1 2 2n. 沒有父母允許，我擅自飲酒</td>
<td></td>
</tr>
<tr>
<td>0 1 2 88. 我喜歡與別人在一起</td>
<td>0 1 2 4n. 我不能從頭到尾做完一件事</td>
<td></td>
</tr>
<tr>
<td>0 1 2 89. 我多疑</td>
<td>0 1 2 5n. 沒有甚麼事情令我有樂趣</td>
<td></td>
</tr>
<tr>
<td>0 1 2 90. 我誹謗別人或講粗口</td>
<td>0 1 2 28n. 我在家、學校或其他地方犯規</td>
<td></td>
</tr>
<tr>
<td>0 1 2 91. 我想到自殺</td>
<td>0 1 2 54n. 我無故感到過份疲勞</td>
<td></td>
</tr>
<tr>
<td>0 1 2 92. 我喜歡引人發笑</td>
<td>0 1 2 56dn. 病因不明的症狀：</td>
<td></td>
</tr>
<tr>
<td>0 1 2 93. 我說話過多</td>
<td></td>
<td>眼睛有毛病(不包括可用</td>
</tr>
<tr>
<td>0 1 2 94. 我常戲弄他人</td>
<td></td>
<td>眼鏡矯正之問題)請描述：</td>
</tr>
<tr>
<td>0 1 2 95. 我的脾氣暴躁</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 1 2 96. 我對性的問題想得太多</td>
<td>0 1 2 75n. 我過份害羞或膽怯</td>
<td></td>
</tr>
<tr>
<td>0 1 2 97. 我想取要傷害他人</td>
<td>0 1 2 78n. 我注意力分散或容易分心</td>
<td></td>
</tr>
<tr>
<td>0 1 2 98. 我喜歡幫助別人</td>
<td>0 1 2 83n. 我收藏過多自己不需要的</td>
<td></td>
</tr>
<tr>
<td>0 1 2 99. 我過份注意清潔整齊</td>
<td>東西，請描述：</td>
<td></td>
</tr>
<tr>
<td>0 1 2 100. 我睡得不好，請描述：</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 1 2 101. 我曠課或逃學</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 1 2 102. 我的精力不足</td>
<td>0 1 2 99n. 我有吸煙、喝酒草或鼻煙</td>
<td></td>
</tr>
<tr>
<td>0 1 2 103. 我懶惰或浪費</td>
<td>0 1 2 105n. 我濫用藥物(不包括酒精或</td>
<td></td>
</tr>
<tr>
<td>0 1 2 104. 我比其他年青人更吵鬧</td>
<td>煙草)，請描述：</td>
<td></td>
</tr>
<tr>
<td>0 1 2 105. 我喝酒或濫用藥物，請描述：</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 1 2 106. 我盡量以公道持人</td>
<td></td>
<td></td>
</tr>
<tr>
<td>0 1 2 107. 我喜歡好的笑話</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

除上述項目外，請在下面描述任何有關你的感受、行為或興趣。
NOTICE OF EXPEDITED APPROVAL

To: Phebe Lam
Pediatrics
UPG Jefferson

From: Ellen Barton, Ph.D.,
Chairperson, Behavioral Institutional Review Board (B3)

Date: October 30, 2007
RE: HIC #: 107407B3E
Protocol Title: Values and Risk Behaviors in Hong Kong Adolescents
Sponsor:
Coeus #: 0710005339

Expiration Date: October 29, 2008

Risk Level/Category: No greater than minimal risk.

The above-referenced protocol and items listed below (if applicable) were APPROVED following Expedited Review (Category 7) by the Chairperson/designee for the Wayne State University Behavioral Institutional Review Board (B3) for the period of 10/30/2007 through 10/29/2008. This approval does not replace any departmental or other approvals that may be required.
- Information Sheet for 13-17 Year Olds (English and Chinese Versions)
- Information Sheet for 18 and 19 Year Olds (English and Chinese versions)
- Parental Permission/Research Informed Consent (English and Chinese versions)

- Federal regulations require that all research be reviewed at least annually. You may receive a "Continuation Renewal Reminder" approximately two months prior to the expiration date; however, it is the Principal Investigator’s responsibility to obtain review and continued approval before the expiration date. Data collected during a period of lapsed approval is unapproved research and can never be reported or published as research data.
- All changes or amendments to the above-referenced protocol require review and approval by the HIC BEFORE implementation.
- Adverse Reactions/Unexpected Events (ARUE) must be submitted on the appropriate form within the timeframe specified in the HIC Policy (http://www.hic.wayne.edu/hicpol.html).

NOTE:
1. Upon notification of an impending regulatory site visit, hold notification, and/or external audit the HIC office must be contacted immediately.
2. Forms should be downloaded from the HIC website at each use.

*Based on the Expedited Review List, revised November 1996
APPENDIX C

Research Information
Title of Study: Values and Risk Behaviors in Hong Kong Adolescents

Principal Investigator (PI):  Phebe Lam
Wayne State University-College of Education
(313) 745-4213

Purpose:
You are being asked to be in a research study that is examining the relationship between an adolescents values, personality and risk behaviors because you attend a high school in Hong Kong and are between the ages of 13 to 19 years. This study is being conducted at Wayne State University and at two high schools in Hong Kong.

Study Procedures:
If you take part in the study, you will be asked to fill out a questionnaire that will ask general questions about yourself, your values, your personality, and your risk behaviors. At anytime, you will have the choice to not answer the questions or to skip questions. You will fill out the questionnaire only one time at your school. It will take about 45 to 60 minutes for you to complete the questionnaire.

Benefits:
As a participant in this research study, there may be no direct benefit for you; however, information from this study may benefit other people now or in the future.

Risks:
By taking part in this study, you may feel uncomfortable thinking about and answering questions about your personality or risk behaviors. If you do, you can stop completing the questionnaire.

Costs:
There will be no costs to you for participation in this research study.

Compensation:
You will not be paid for taking part in this study.

Confidentiality:
All information collected about you during the course of this study will be kept without any identifiers. This means that you will not put your name on the questionnaire so you cannot be identified. The school and teachers will not know that you are participating in this study, and will not know what you answered on the questionnaire.
If you choose not to participate in the study, you may stay in the classroom and complete your homework or read a book. Your teacher will not be in the room. Once the research staff has reviewed the study with you, they will also leave the classroom. Once you have completed the questionnaire, you will place the questionnaire in the box provided by the research staff.

Voluntary Participation / Withdrawal:
Taking part in this study is voluntary, you may stop answering the questions at anytime.

Questions:
If you have any questions about this study now or in the future, you may contact Phebe Lam or one of her research team members at the following phone number (313) 745-4213. If you have questions or concerns
Submission/Revision Date: August 8, 2008
Protocol Version #: 1.0
about your rights as a research participant, the Chair of the Human Investigation Committee can be contacted at (313) 577-1628. If you are unable to contact the research staff, or if you want to talk to someone other than the research staff, you may also call (313) 577-1628 to ask questions or voice concerns or complaints.

Participation:
By completing the questionnaire you are agreeing to participate in this study.
研究資訊

研究题目：香港青少年的價值觀和危險行為

主研究員：

Phebe Lam
韋恩州立大學教育學院
電話：(313) 745-4213

目的：
我們現在請求你參加一項科學研究。該研究旨在發現青少年價值觀、人格和危險行為之間的關係。由於你是一名正在香港高中就讀的，年齡介於 13 至 19 歲之間的學生，所以你被選中參與這項研究。這項研究將在韋恩州立大學和香港的兩所高中內展開。

研究程式：
如果你參與這項研究，我們將請你填寫一份調查問卷。該問卷會問你一些一般問題和有關你的價值觀、人格以及危險行為的問題。在任何時候，你都有權不回答或者回避這些問題。你將僅在學校內完成這份問卷一次即可。你完成這份問卷所需要的時間大約為 45 到 60 分鐘。

益處：
作為這項研究的參與人，這項研究或許並不會給你帶來直接的益處。但從這項研究中收集的資訊現在或者將來可以使其他人受益。

風險：
參加這項研究時，你或許會對考慮和回答有關人格和危險行為的問題感到不快。在這種情況下，你可以停止回答這份問卷。

價錢：
如果參加這項研究，你不用支付任何費用。

報酬：
如果參加這項研究，你將不會得到報酬。

保密性：

提交/修改日期：2008 年 8 月 8 日
頁數：第二頁/共兩頁
草稿版本號：1.0

HIC 日期：12/06
在研究過程中收集到的所有有關你的資訊都不會記錄你的身份。也就是說，你不會在調查問卷上留下自己的姓名，所以你的身份也就不會被人所知。學校和老師都將不會通知你是否參與了這項研究，也不會通知你在問卷中回答了什麼。

如果你選擇不參與這項研究，你可以留在教室中看書或者寫作業。你的老師不會進入教室。當研究人員說明完相關事項後，他們也会離開教室。當你完成調查問卷後，你要把調查問卷放進研究人員提供的盒子中。

自願參與/自動退出：

你是否參與這項研究是完全自願的。你可以在任何時候停止回答問卷。

問題：

如果你現在或者將來對這項研究有任何問題，你可以聯繫 Phoebe Lam 或者她在研究團隊中的其他研究人員。你可以用電話的方式與他們聯繫。他們的電話是(313) 745-4213。如果你對做為調查參與者的權利有任何問題或者想取消，可以與我們校內的人類研究委員會的關係聯繫，電話是(313) 577-1628。如果你無法聯繫到研究人員，或者想與除研究人員外的其他人聯繫，你可以致電(313) 577-1628 來詢問問題、反應情況或投訴。

參與：

填寫調查問卷就表明你同意參加這項研究。
Research Information for Ages 18 to 19 Years
Title of Study: Values and Risk Behaviors in Hong Kong Adolescents

Principal Investigator (PI): Phebe Lam
Wayne State University-College of Education
(313) 745-4213

Purpose:
You are being asked to be in a research study that is examining the relationship between an adolescents values, personality and risk behaviors because you attend a high school in Hong Kong and are between the ages of 13 to 19 years. This study is being conducted at Wayne State University and at two high schools in Hong Kong.

Study Procedures:
If you take part in the study, you will be asked to fill out a questionnaire that will ask general questions about yourself, your values, your personality, and your risk behaviors. At anytime, you will have the choice to not answer the questions or to skip questions. You will fill out the questionnaire only one time at your school. It will take about 45 to 60 minutes for you to complete the questionnaire.

Benefits:
As a participant in this research study, there may be no direct benefit for you; however, information from this study may benefit other people now or in the future.

Risks:
By taking part in this study, you may feel uncomfortable thinking about and answering questions about your personality or risk behaviors. If you do, you can stop completing the questionnaire.

Costs:
There will be no costs to you for participation in this research study.

Compensation:
You will not be paid for taking part in this study.

Confidentiality:
All information collected about you during the course of this study will be kept without any identifiers. This means that you will not put your name on the questionnaire so you cannot be identified. The school and teachers will not know that you are participating in this study, and will not know what you answered on the questionnaire.
If you choose not to participate in the study, you may stay in the classroom and complete your homework or read a book. Your teacher will not be in the room. Once the research staff has reviewed the study with you, they will also leave the classroom. Once you have completed the questionnaire, you will place the questionnaire in the box provided by the research staff.

Voluntary Participation/Withdrawal:
Taking part in this study is voluntary, you may stop answering the questions at anytime.

Questions:
If you have any questions about this study now or in the future, you may contact Phebe Lam or one of her research team members at the following phone number (313) 745-4213. If you have questions or concerns.

Submission/Revision Date: August 8, 2008
Page 1 of 2
Protocol Version #: 1.0
about your rights as a research participant, the Chair of the Human Investigation Committee can be contacted at (313) 577-1628. If you are unable to contact the research staff, or if you want to talk to someone other than the research staff, you may also call (313) 577-1628 to ask questions or voice concerns or complaints.

**Participation:**
By completing the questionnaire you are agreeing to participate in this study.
研究資訊(年齡18至19歲)

研究題目：香港青少年的價值觀和危險行為

主研究員：

Phebe Lam
韋恩州立大學教育學院
電話：(313) 745-4213

目的：

我們現在請求你參加一項科學研究。該研究旨在發現青少年價值觀、人格和危險行為之間的關係。由於你是一名正在香港高中就讀的、年齡介於13至19歲之間的學生，所以你被選中參與這項研究。這項研究將在韋恩州立大學和香港的兩所高中內展開。

研究程式：

如果你參與這項研究，我們將請你填寫一份調查問卷。該問卷會問你一些一般問題和有關你的價值觀、人格以及危險行為的問題。在任何時候，你都有權不回答或者回退這些問題。你將僅在學校內完成這份問卷一次即可。你完成這份問卷所需要的时间大致為45到60分鐘。

益處：

作為這項研究的參與者，這項研究或許並不會給你帶來直接的益處。但從這項研究中收集的資料現在或者將來可以被其他人受益。

風險：

參加這項研究時，你或許會對考慮和回答有關人格和危險行為的問題感到不快。在這種情況下，你可以停止回答這份問卷。

價格：

如果參加這項研究，你不用支付任何費用。

報酬：

如果參加這項研究，你將不會得到報酬。

保密性：

提交/修改日期：2008年8月8日
頁數：第2頁/共兩頁
草稿版本號：1.0

HIC日期：12/06
在研究過程中收集到的所有有關你的資訊都不會記錄你的身份。也就是說，你不會在調查問卷上留下自己的姓名，所以你的身份也就不會被人所知。學校和老師都將不會知道你是否參與了這項研究，也不會知道你在問卷中回答了什麼。

如果你選擇不參與這項研究，你可以留在教室中看書或者寫作業。你的老師不會進入教室。當研究人員說明完相關事項後，他們也會離開教室。當你完成調查問卷後，你要把調查問卷放進研究人員提供的盒子中。

自願參與/自願退出：
你是否參與這項研究是完全自願的。你可以在任何時候停止回答問題。

問題：
如果你現在或者將來對這項研究有任何問題，你可以聯繫 Phoebe Lam 或者她所在研究團隊中的其他研究人員。你可以用電話的方式與他們聯繫。他們的電話是 (313) 745-4213。如果你對做為調查參與者的權利有任何問題或者想法，可以與我們校內的人類調查委員會的主席聯繫，電話是 (313) 577-1628。如果你無法聯絡到研究人員，或者想與除研究人員外的其他人聯絡，你可以致電 (313) 577-1628 來詢問問題、反應情況或投訴。

參與：
填寫調查問卷就表明你同意參加這項研究。

APPROVAL PERIOD
OCT 3 07    OCT 2 08

HCC INVESTIGATION COMMITTEE

提交/修改日期: 2008 年 8 月 8 日     頁數: 第二页/共兩頁
單獨版本號: 1.0
HCC 日期: 12/06
Parental Permission/Research Informed Consent

Title of Study: Values and Risk Behaviors in Hong Kong Adolescents

Purpose:
You are being asked to allow your child to take part in a research study at their school that is being conducted by Phebe Lam in the College of Education-Theoretical and behavioral Foundations department from Wayne State University (Detroit Michigan, USA). The purpose of the study is to examine the relationship between values, personality, and risk behaviors in Hong Kong adolescents. Your child has been selected because he/she is a student studying at a Hong Kong high school and is between the ages of 13 to 19.

Study Procedures:
If you decide to allow your child to take part in the study, your child will be asked to answer a questionnaire that will ask general questions about them, their values, personality, and their risk behaviors. For example:

1) General questions about them ("How old are you?", "What grade are you in?")
2) Values questions: ("How important is it for you to behave properly?")
3) Personality questions: ("Are you shy?")
4) Risk behavior questions: ("Have you ever smoked a cigarette?")

At anytime, your child has the option of not answering the questions or skipping questions. They will be completing the questionnaire only one time at their school. The total time for your child to complete the questionnaire should be approximately 45 to 60 minutes. If you want to review the questionnaire that your child will be completing, the office of your child's school will have a copy.

Benefits:
There may be no direct benefits for your child; however, information from this study may benefit other people now or in the future.

Risks:
By taking part in this study, your child may feel uncomfortable thinking about and answering questions about their personality or risk behaviors. If they do, they can stop completing the questionnaire.

Costs:
There are no costs to you or your child to participate in this study.

Compensation:
You or your child will not be paid for taking part in this study.

Confidentiality:
All information collected about your child during the course of this study will be kept without any identifiers. This means that your child will not put their name on the questionnaire so they cannot be identified. The school and teachers will not know what your child answered on the questionnaire, or even if your child is participating in this study.

Voluntary Participation/Withdrawal:
Your child's participation in this study is voluntary and he/she can stop answering the questions at anytime.
Title of Study: Values and Risk Behaviors in Hong Kong Adolescents

Questions:
If you have any questions about this study now or in the future, you may contact Phebe Lam or one of her research team members at the following phone number (313) 745-4213 or by email at plam@med.wayne.edu. If you have questions or concerns about your rights as a research participant, the Chair of the Human Investigation Committee can be contacted at (313) 577-1628. If you are unable to contact the research staff, or if you want to talk to someone other than the research staff, you may also call (313) 577-1628 to ask questions or voice concerns or complaints.

Participation:
If you do not contact the principal investigator (Pl) within a 2-week period, to state that you do not give permission for your child to be enrolled in the research trial, your child will be enrolled into the research. You may contact the Pl by phone at (313) 745-4213; by email at plam@med.wayne.edu; or by fax at (852) 23369197.

Optional Tear Off
If you do not wish to have your child participant in the study, you may fill out the form and return it to your child's teacher.

I do not allow my child __________________________ to participate in this research study.

Name

Printed Name of Parent

Signature of Parent __________________________ Date __________________________

Submission/Revision Date: August 8, 2008  Page 2 of 2  Participants Initials

Form date: 1206
父母許可/研究知情同意書

研究題目：香港青少年的價值觀和危險行為

目的：
我們現在請求您允許您的孩子參加在其學校內進行的一項科學研究。來自康乃州立大學教育学院理論與行為基礎系的 Phoebe Lam（位於美國密歇根州底特律市）將從事這項研究。該研究致力於發現香港青少年價值觀、人格以及危險行為之間的關係。由於您的孩子是一名家在香港高中的學生，所以他們被選中參與這項研究。

研究程式：
如果您決定允許您的孩子參與這項研究，我們將請他/她填寫一份調查問卷。該問卷會問他們一些一般問題和有關他們價值觀、人格以及危險行為的問題。例子：
1. 一般的問題（“您的年齡？”，“您就讀那年級？”）
2. 價值觀的問題（“正當的行為對您有多重要？”）
3. 人格的問題（“您害羞嗎？”）
4. 危險行為的問題（“您有沒有吸煙過？”）

在任何時候，您的孩子都有權不回答或者回避任何問題。他們將僅在其學校內來完成這份問卷一次即可。完成這份問卷所需要的時間大致為45到60分鐘。如果您想閱讀您的孩子填寫的問卷，其學校的辦公室將會提供一份影印本給您。

益處：
這項研究或許不會給您的孩子帶來直接的益處。但從這項研究中收集的資訊現在或者將來可能會使其他人受益。

風險：
參加這項研究時，您的孩子或許將會對考慮和回答有關其人格和危險行為的問題感到不快。在這種情況下，他們可以停止回答這份問卷。

價格：
如果參加這項研究，您和您的孩子均不用支付任何費用。

報酬：
如果參加這項研究，您和您的孩子將不會得到報酬。

提交/修改日期：2007 年 10 月 29 日
頁數：第一頁/共兩頁
參與人姓名縮寫
表格日期：01/06
研究题目：香港青少年的价值观和危险行为

保密性：
在研究过程中收集到的所有有关您孩子的资料都不会记录他们的身份。也就是说，您的孩子不会在调查问卷上留下自己的姓名，所以他们的身份也不知会被他人所知。学校和老师都不会知道您的孩子在问卷中回答了什么，他们甚至不会知道您的孩子是否参与了这项研究。

自愿参与/自愿退出：
您的孩子是否参与这项研究是完全自愿的。他/她可以在任何时候停止回答问卷。

问题：
如果您现在或将来对这项研究有任何疑问，您可以联系 Phoebe Lam 或者她所在研究团队中的其他研究人员。您可以用电话或电子邮件的方式与他们联络。他们的电话是(313) 745-4213，电子邮件是 plam@med.wayne.edu。如果您对您做为调查参与者的权利有任何疑问或者想法，可以与我们校内的人类研究委员会的主席联系，电话是(313) 577-1628。如果您无法联络到研究人员，或者想与研究人员外的其他人联络，您可以致电(313) 577-1628 询问问题、反应情况或投诉。

参与：
如果您没有在两个星期中联络主研究者，来表明您不允许您的孩子参与这项研究，那么您的孩子将会被排除在研究之外。您可以通过电话与主研究者联络，电话是(313) 745-4213。您也可以使用电子邮件 plam@med.wayne.edu 或者传真(385) 23369197 的方式与他们联络。

退出选项：
如果您不希望您的孩子参与这项研究，您可以填写下面的表格并向您孩子的老师。

我不允许我的孩子______________________参与这项研究。

姓名

家长姓名

________________________________________

家长姓名

________________________________________

家长签字 日期

提交/修改日期：2008年8月28日

页数：第二页/共两页　　参与人姓名缩写__________

表格日期：01/05
REFERENCES


doi:10.1080/14789940802651757


for integrating smoking cessation services in substance use disorder treatment programs.

Clinical Psychology Review.


school students in Hong Kong. *International Journal of Behavioral Development, 22*, 847-869.


Tsai, Y. (2002). Aboriginal nurses' beliefs, attitudes, and values about sexuality in Taiwan. Western Journal of Nursing Research, 24, 803-814.


ABSTRACT

VALUES AND PROBLEM BEHAVIORS IN HONG KONG ADOLESCENTS

by

PHEBE KAREN LAM

May 2010

Advisor: Stephen B. Hillman, Ph.D.
Major: Educational Psychology
Degree: Doctor of Philosophy

The present study examined sensation seeking, psychological problem behaviors, values orientation, and problem behaviors of smoking, alcohol use, and delinquency among Hong Kong adolescents studying in high school of two different ability levels. Adolescents (N = 1385) from a band one and band three level high school in Hong Kong were assessed using the Sensation Seeking Scale Form-V (SSS-V), Youth Self Report (YSR), Portrait Values Questionnaire (PVQ), and the Adolescent Health and Development Questionnaire (AHDQ), along with several demographic variables (e.g., age, gender, grade level, employment).

Regression analyses were employed to determine the contribution of the significantly correlated variables in explaining each of the three problem behavior outcomes. For smoking behavior, regression analyses found that school band level, sensation seeking, externalizing problem behaviors, values orientation of openness to change, and alcohol use were all predictive of smoking behavior. Specifically, sensation seeking, externalizing problem behaviors, school band level, and alcohol use were reliable predictors of current smokers from never smokers, while the values orientation of openness to change, school band level, and alcohol use were reliable predictors of not-current smokers from never smokers. These variables accounted for a
total of 40% of the variance explaining smoking behavior category.

For alcohol use, regression analyses found that age, school band level, sensation seeking, internalizing problem behaviors, values orientation of openness to change, and self-transcendence, and the problem behavior outcomes of smoking and delinquency, were all predictive of alcohol use behavior. Specifically, age, sensation seeking, internalizing problem behaviors, school band level, values orientation of openness to change and self-transcendence, and smoking and delinquency were reliable predictors of current drinkers from never drinkers, while the school band level, sensation seeking, age, and smoking behavior were reliable predictors of not-current drinkers from never drinkers. These variables accounted for a total of 23.5% of the variance explaining alcohol use behavior category.

For delinquency, the following variables when entered into the linear regression equation were found to be predictors of delinquent behaviors: school band level, overall sensation seeking score, externalizing problem behavior score, values orientation of conservation, and the problem behavior outcomes of smoking and alcohol use. These variables accounted for a total of 31% of the variance explaining delinquency.

When examining the differences between adolescents who attend a band one or band three level school, there were significant findings with all three of the problem behavior outcomes. Adolescents studying at a band three level school were significantly more likely to be categorized as current smokers and drinkers, and also reported more delinquent behaviors. Implications of the results are discussed in the context of clinical applications and directions for future research.
AUTobiographical Statement

Phebe Karen Lam

Education

- Ph.D. in Educational Psychology, Wayne State University, 2010
- M.A. in Marriage and Family Psychology, Wayne State University, 2000
- B.A. Honours Psychology with Thesis in Psychology, University of Windsor, 1997
- B.Sc. in Science, University of Windsor, 1995

Professional Experience

- 2000 – present Project Director
  Wayne State University, School of Medicine,
  Pediatric Prevention Research Center, Dept. of Psychiatry
- 2003 – 2007 Psychologist
  Children’s Hospital of Michigan, Pediatrics HIV
- 2001 – present Adjunct Faculty
  Wayne State University, College of Education
- 2002 – 2003 Adjunct Faculty
  Marygrove College, Department of Psychology

Selected Peer Reviewed Publications and Posters