

Explore the Intention of Residents with Disability to Accept with Occupational Therapy Services at Home

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Abstract

In view of the increase of long-term care needs and the trend of aging in place in Taiwan, the profession of the occupational therapy plays an important role in enhancing the occupational performance of the residents with disability who live at home. This paper investigates the influence factors of residents' intention based on the theory of planned behavior. Sample data were collected from the latest post-service questionnaires database of occupational therapy service at home in Chiayi area in Taiwan provided by Chiayi City Occupational Therapists Association, 198 valid data were collected finally. There are positive effect on their intention to accept occupational therapy services at home on the residents' attitude, subjective norm and perceived behavioral control. In particular, the residents' attitude plays a greater role in affecting their intention. The residents' attitude and perceived behavioral control has a partial mediation effect on subjective norm toward their intention.

Keywords: Intention; Occupational The rapy Services at Home; Theory of Planned Behavior; Mediation Effect

1. Introduction

Many countries in the world face the truth that the long-term care needs are increasing. In Taiwan, the comprehensive medical care has extended the life expectancy of people, and the National Health Insurance has implemented since 1995. However, the medical care is not a panacea. When the residents suffer the diseases, accidents, heredity, aging or other issues, the high standard medical care has saved their lives, and they often need to face the consequences of partial loss of physical function, thus leading to the increasing demand of long-term care services, especially the population of increasing aging problems. According to the statistical report by Department of Statistics, Ministry of the Interior in Taiwan (2018), the average life expectancy of female has risen from 77.74y (1995) to 83.42y (2016) and the male has risen from 71.85y (1995) to 76.81y (2016). The statistics revealed that 7.1% of the total population was over 65 years old in September 1993. This figure was higher than the standard 7 % setting by the United Nations World Health Organization indicating that it has been become an "aging society" where the elderly population has increased rapidly. The proportion of elderly people in Taiwan has risen to 13.86% at the end of 2017, indicating that the percentage of elderly people is higher and higher. As we know, the elderly people usually have worse physical health condition resulting in the increasing demand of healthcare. When people cannot handle their activities of daily living, they often want to stay at home or in a familiar environment to get intensive care or some assistance from their caregivers, and the burdens of taking care of ten fall on the family members in traditional Taiwanese. The burdens of exhausting long-term care may cause the interaction between family members prone to deteriorate. Therefore, it is very important that the public sector must intervene on long-term care as earlier as possible.

In order to solve the increase of long-term care needs and the trend of aging in place, the Executive Yuan (2008) approved the decade plan of long-term care in Taiwan. Following the plan, the Legislative Yuan (2015) pass the law of long-term care services. The law of long-term care services has become an important fundamental law for future development of long-term care services. Tsai (2016) mentioned that the government has responsibility to establish a comprehensive long-term care system, thus the residents with disability can access the appropriate care services.

According to the decade plan of long-term care, local governments have to build the long-term care management center monitored by the central government. The job of care manager working on the long-term care management center is to manage every individual case. The qualification of care manager is at least experienced in one of nurse, social worker, nutritionist, physical therapist and occupational therapist. As a resident asking for care demand at home, the care manager must provide assessment services at home to identify what kind of resident's care is needed, to transfer the residents to the suitable professional groups and to regulate the quality of the services (Wen, 2011). According to the resident's social welfare identity, some residents need to pay some money for professional services fees and transportation expenses. The percentage of the services fees for low-income households are fully subsidized. The middle-low income households should pay 10% transportation expenses, but the professional services fees are fully subsidized. The general households should pay 10% professional services and fully transportation expenses (Department of Long-Term Care Management Center, Chiayi City Government, Taiwan, 2017)

The professions of the occupational therapy play an important role in the long-term care services. Occupational therapists can provide services at home or community. Occupational therapists mainly apply occupational science, theory and activities analysis to understand which factor influence the residents' occupational performance. Then, provide the residents with treatment plan include functional training, environmental barriers medication, guidance of using assistive devices and education caregivers. Occupational therapists make force to encourage the residents to participate in purposeful activities in order to learn the adaptive skills from the activities to improve their physiological and psychological functions and thus improve the quality of life (Chapparo & Rankab, 1997; Lai et al., 2009). The Chiayi City Occupational Therapists Association is comprised of a group of the occupational therapists who with professional licenses and is one of the long-term care services providers in Chiayi area in Taiwan, and was commissioned by the long-term care management center to provide the occupational therapy services at home to residents who live in Chiayi area, Rajagopaland Raquel (2015) indicated that consumer's consumptive experience would influence the future consumer's intention. When a person's intention is high, he or she is more willing and tends to exert a greater effort to perform the behavior. The same, if the residents realize the occupational therapy services at home are good for them. They would has more intention to accept the services. For this reason, Chiayi City Occupational Therapists Association implement the post- service questionnaires to understand what the factors influence the residents' intention to accept the occupational therapy services at home.

Theory of Plan Behavior proposed by Ajzenin 1985. This theory evolved from the Theory of Reasoned Action proposed by Fishbein and Ajzen in 1975 and is mainly used to predict and understand the behavior of human beings. It is widely used in consumer behavior, health care and other aspects of research. Theory of Planned Behavior indicated that the intention of behavior will be affected by the three variables include attitude, subjective norms and perceptual behavior control, that is, individual's intention to act influence by three factors. Is there any benefit to me in doing this? Does the opinion of others affect my intention to enforce? Am I able to do it? The purpose of this study are based on the Theory of Planned Behavior to investigate the resident's intention with occupational therapy services at home providing by Chiayi City Occupational Therapists Association and to analyze the relationships of attitude, subjective norm and perceived behavioral control toward the intention.

2. Literature Review

2.1 Aging in Place

Pastalan (1990) elaborated the concept of aging in place refers to being able to persist in one's current residence even when faced with increasing need for support due to life changes, such as declining physical health condition, widower hood, or loss of income. Many people work hard for a lifetime to find a place to settle down, rest, decorate it, make it to be one of the most comfortable places in the world and allow their family members to stay, rest, grow and heal. There is no doubt that when a person with disability, to stay in the familiar home is the first choice. Lee (2008) indicated that most elderly people prefer to stay in the same community or the same home as if it is a self-determined home environment. Since many homebound elderly people have multiple medical conditions, Vu et al.(2013) pointed out that executive function might be critical in managing their medical conditions. Iecovich (2014) reported that a common strategy to deal with the complex, varied, and growing needs of elderly population is aging in place. Therefore, in order to improve or maintain the residents' physiological and psychological functions, it is very important to help the residents to get the medical care services or consultation service at home.

2.2 Occupational Therapy Services at Home

To adapt the trend of aging in place, the professions of the occupational therapy play an important role in long-term care services and the trend of the global concept of the aging in place. In order to achieve the “independence of a person”, occupational therapists assist the residents to be independent in activities of daily living and successfully return to their community, family, workplace, regain the high quality of life, and to make decisions by themselves (Cheng et al., 2001). In recent years, there were many research topics about occupational therapy services at home. Partial studies identifying what the influence of the diseases to the residents’ activities of daily living and offer the suggestions for occupational therapists to set the optimal aims of the occupational therapy services at home (Bontje et al., 2012; Park et al., 2015). Some studies indicated the disadvantages of the residents with homebound and thought the occupational therapists provide the suitable occupational therapy programs to the residents and encourage the residents participate in purposeful activities can improve the homebound (Mountain & Craig, 2011; Yuen et al., 2011; Ishibashi et al., 2013; Sampaio & Ito, 2013; Lee et al., 2014; Musich et al., 2015). Others studies reported the benefit of living home and though the occupational therapy provide the home medical care services and the home modification evaluation services to residents with disability who living in their home, the quality of life can be improve (de Jonge et al., 2011; Aplin, de Jonge D & Gustafsson, 2015). From the above studies have shown that occupational therapy services at home has clinical benefits to the residents with disability.

2.3 Theory of Planned Behavior

The Theory of Planned Behavior has designed to forecast and clarify human behavior in particular situations (Ajzen, 1991). In the Theory of Planned Behavior, “Intention” refers to the individuals’ tendency to perform the behavior they want to do. The higher the individuals’ intention is, the more they have willing to make a greater attempt to behave (Fishbein & Ajzen, 1975). “Attitude” is the preferred degree assessed for a particular behavior. “Subjective norm” is a person’s judgment about general social pressure regarding to a behavior. “Perceived behavioral control” is the degree to which a person has an easy or difficult evaluation of a given behavior (Ajzen, 1991). In this study, the “Attitude” defined as to examine cognition and evaluation of a resident with disability about the service benefit, professionalism and affection of accepting occupational therapy services at home. The “Subjective norm” defined as to examine a resident with disability support received from family members, friends and others who will affect the resident’s intention for accepting occupational therapy services at home. The “Perceived behavioral control” defined as to examine a resident with disability in cognition regarding to the physical dysfunction, dependence in activities of daily living and other anticipated impediments. The “Intention” defined as a resident with higher behavioral intention would still choose to accept occupational therapy services at home and recommend the benefits of accepting occupational therapy services at home to someone in need.

3. Methodology

3.1. Research Model and Hypotheses

The research model considered in the present study was shown in figure 1.

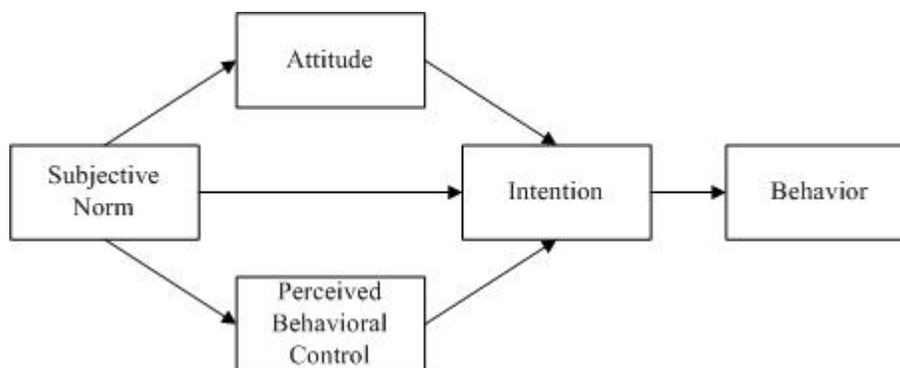


Figure 1: Research Model.

According to the research model as given in figure 1, there were five hypotheses considered as follows:

- H1. Attitude of residents with disability plays a positive role in affecting intention regarding to accept occupational therapy services at home.
- H2. Subjective norm of residents with disability plays a positive role in affecting intention regarding to accept occupational therapy services at home.
- H3. Perceived behavioral control of residents with disability plays a positive role in affecting intention regarding to accept occupational therapy services at home.
- H4. Attitude of residents with disability have a mediation effect between residents' subjective norm and the intention.
- H5. Perceived behavioral control of residents with disability has a mediation effect between residents' subjective norm and the intention.

3.2 Data Collection

In this study, we obtained approval from the Chiayi City Occupational Therapists Association (Approval No.33). The sample data was collected from the latest post-service questionnaires database of residents who have accepted occupational therapy services at home provided by Chiayi City Occupational Therapists Association. We received the latest post-service questionnaires data and the items from the Chiayi City Occupational Therapists Association. The items of post-service questionnaires were being measured on a five-point Likert-type scale to indicate respondents' agreement or disagreement with survey items. The level of agreements in the Likert-type scale utilized responses from 1 to 5, where 1: Strongly Disagree; 2: Disagree; 3: neither Agree nor Disagree; 4: Agree; 5: Strongly Agree. Finally, we obtained 198 valid data.

3.3 Data Analysis

In this study, we classified the items of post-service questionnaire for each construct based on the concepts drawn from related literature, and jointed effort by two experienced occupational therapists and a professional scholar addressed with content validity. Seven items for "Attitude" scale were classified based on the works by Ajzen (1991) as well as Blackwell, Engel and Miniard (2001). Five items for "Subjective norm" were classified based on the works by Ajzen (1991) and Kanuk and Schiffman (2000). Five items for "Perceived behavior control" were classified on the basis of the works by Ajzen (1991) as well as Taylor and Todd (1995). Four items for "Intention" were classified on the basis of the works by Ajzen (1991) and Zeithaml, Berry and Parasuraman (1996). Furthermore, six items including gender, age, marital status, educational level, social welfare and caregiver were all designed to collect in the demographic information. In the process of data analyses, we deleted three items not conform to the Nunnally's (1978) suggestion. If an item with standardized factor loading lower than 0.5, with value of corrected item to total correlation lower than 0.5, and the value of Cronbach's alpha if item deleted greater than value of Cronbach's alpha, the item should be deleted. The latest items for each construct contains seven items for "Attitude", four items for "Subjective norm", four items for "Perceived behavior control", three items for "Intention" and six items for collecting the demographic information. In this study, in order to identify the causal relationship of the variables, all of the data analyses were conducted using the SPSS version 18.0. Statistical analyses contain with descriptive analysis, factor analysis, reliability analysis, independent sample T test and one-way analysis of variance (ANOVA) and regression analysis.

4. Analysis and Interpretations

4.1 Demographic Information

Among the 198 valid data, 52.02 percent of the respondents were female and 91.41% were above 65 years old. 46.97 percent of the respondents were married, and 34.34% were illiterate. About seventy-two percent of the respondents belong to general households, and most caregivers were family members of residents with disability. Detailed description of the respondents' characteristics was shown in table 1.

Table 1: Sample Demographic Information

Measure	Item	Frequency	Percent
Gender	Male	95	47.98
	Female	103	52.02
Age	Below 49 (contained) years	9	4.55
	50-64 years	8	4.04
	65-69 years	22	11.11
	70-74 years	25	12.63
	75-79 years	53	26.77
	80-84 years	38	19.19
	85-89 years	27	13.64
	Above 90 (contained) years	16	8.08
Marital status	Married	93	46.97
	Single	24	12.12
	Widowed	79	39.90
	Divorce	2	1.01
Educational level	Illiterate	68	34.34
	Literacy	16	8.08
	Elementary school	54	27.27
	Junior high school	26	13.13
	Senior high school	18	9.09
	Above college (contained)	16	8.08
Social welfare	General households	143	72.22
	Middle-low income households	24	12.12
	Low income households	31	15.66
Caregiver	Self	9	4.55
	Spouse	49	24.75
	Son	50	25.25
	Daughter in law	26	13.13
	Daughter	37	18.69
	Parents	6	3.03
	Others	21	10.61

4.2 Factor Analysis and Reliability Analysis

The Kaiser-Meyer-Olkin (KMO) value and Bartlett's test of sphericity are employed to exam the variable suitability for factor analysis. According to Kaiser(1974) suggestion, the KMO value should be greater than 0.7 and represents the lower net correlation coefficient, thus the more common factor among the different construct the more suitable for factor analysis. In this study, KMO value of attitude is 0.928, subjective norm is 0.819, perceived behavioral control is 0.775 and intention is 0.763, each construct's KMO value is greater than 0.7 and Bartlett's test of sphericity is significant that implies it is suitable for factor analysis. The results of factor analysis for each construct were shown in table 2. For the seven items of attitude, all the factor loadings are greater than 0.5 and threaten value is 6.639 with sum of variance explained of 94.848%. All the factor loadings are greater than 0.5 and the eigen value is 2.863 with sum of variance explained of 71.584% for the four items of subjective norm. For perceived behavioral control, the four factor loadings are greater than 0.5 and the eigen value is 3.054 with sum of variance explained of 76.340%. The three factor loadings are greater than 0.5 and the eigen value is 2.780 with sum of variance explained of 92.678% for intention. All the items should not be deleted, and one principal factor was extracted for each construct. To examine the reliability, Cronbach's alpha was conducted for each construct. According to the literature suggested, the value of Cronbach's alpha should be greater than 0.7, representing a higher internal consistency. From table 2, all the values of Cronbach's alpha are greater than 0.7, which implies a high degree of internal consistency.

Table 2: Results of Factor Analysis and Reliability Analysis

Construct	Item	Factor Analysis			Reliability Analysis
		Factor Loading	Eigen Value	% of Variance	
Attitude	Occupational therapy services at home can reduce the caregiver's loading.	0.989	6.639	94.848%	0.991
	Occupational therapy services at home can improve the relationship of family members.	0.987			
	Occupational therapy services at home can fit the resident's real need.	0.979			
	Occupational therapy services at home can maintain the Resident's esteem.	0.977			
	Occupational the rap is tcanlink with other professions for residents	0.969			
	Occupational therapist service attitude eissatis factory.	0.966			
	Occupational therapy services at home can improve the quality of life.	0.950			
Subjective norm	Medical staff's recommendation will affect the willingness to accept the occupational therapy services at home.	0.872	2.863	71.584%	0.863
	Support by friends and relatives will affect the willingness to accept the occupational therapy services at home.	0.855			
	Care manager's recommendation will affect the willingness to accept the occupational therapy services at home.	0.850			
	Support by family members will affect the willingness to accept the occupational therapy services at home.	0.805			
Perceived behavioral control	Accept the occupational therapy services at home due to Physical dysfunction.	0.929	3.054	76.340%	0.884
	Accept the occupational therapy services at home due to activities of daily living dependent.	0.913			
	Chiayi City Occupational Therapists Association can provide timely, suitable and convenient occupational therapy services at home.	0.841			
	The amount of government subsidies will affect the resident's will in gness to accept the occupational therapy services at home.	0.807			
Intention	I want to recommend the benefits of occupational therapy services at home to people in need.	0.973	2.780	92.678%	0.952
	I would still choose to accept occupational therapy services at home providing by Chiayi City Occupational Therapists Association rather than other providers.	0.964			
	I would still choose to accept occupational therapy services at home if I need.	0.951			

4.3 Means Analysis

Means analysis including independent sample T test and one-way ANOVA was done to determine if the demographic characteristics were statistically significant difference for each construct.

Independent sample T test was adapted for gender, and one-way ANOVA with Scheffe's test of post-hoc comparisons was conducted for the remaining demographic items. The statistically significant differences were considered while $p < 0.05$. Among the six demographic items, the educational level of the residents with disability was significant related to the construct of subjective norm and intention. For construct of subjective norm, the mean of the educational level of illiterate was higher than those who were literacy. The reasonable explanation is when the residents with disability demand to accept occupational therapy services in their home and forth illiteracy, they need their family or others to assist them for required application procedures.

Therefore, the assistance received from family members, friends and others who would affect the intention of residents with disability to accept occupational therapy services at home. For construct of intention, the mean of educational level of illiterate was higher than those whom graduated from elementary school and these graduated from elementary school were higher than those graduated from senior high school. The reasonable explanation is when the educational level of a resident with disability is illiterate or elementary school, the ability to seek health care resources is poor. Therefore, when the government provides the resources of occupational therapy services at home, the residents' with educational level of the illiterate or elementary school has higher intention to accept occupational therapy services at home. The results of revealed is the educational level has an important influence on the residents with disability accepting occupational therapy services at home.

4.4 Regression Analysis

The five research hypotheses were tested by using regression analysis. As shown in table 3 and table 4, the standardized coefficients of attitude, subjective norm and perceived behavioral control of residents with disability were respectively given by 0.904, 0.793 and 0.849. All the results were statistically significant, so the three research hypotheses under consideration were not rejected. Finally, the attitude, subjective norm and perceived behavioral control of residents with disability all positively affected their intention regarding to accept occupational therapy services at home.

Four steps of analyzing mediation effect were established according to suggestions from past literature. First, we should identify that the independent variable is significant correlated with the dependent variable. Second, we should identify that the independent variable is significant correlated with the mediator. Third, we should identify that the mediator is significant correlated with the dependent variable. The last, we should build the mediator's mediation effect between independent variable and dependent variable (Baron and Kenny, 1986). It is considered that there are significant correlations between subjective norm and the intention of residents, between subjective norm and attitude, and between attitude and intention. Compare model 1 and model 4 in table 3, the coefficient of subjective norm declined from 0.793 to 0.226. So, we conclude that attitude has a partial mediation effect between residents' subjective norm and the intention.

Table 3: Mediation Effect Analysis (Mediator: Attitude)

Dependent Variable	Intention	Attitude	Intention	Intention
	Model 1	Model 2	Model 3	Model 4
Subjective norm	0.793***	0.779***		0.226***
Attitude			0.904***	0.727***
R	0.793	0.779	0.904	0.915
R ²	0.629	0.607	0.817	0.837
adj .R ²	0.627	0.605	0.816	0.835
F-value	331.762	302.240	873.025	499.914

*p < 0.05, ** p < 0.01, ***p < 0.001

There are significant correlations between subjective norm and the intention of residents, between subjective norm and perceived behavioral control, and between perceived behavioral control and intention. Compare model 1 and model 4 in table 4, the coefficient of subjective norm declined from 0.793 to 0.249. So, we conclude that perceived behavioral control has a partial mediation effect between resident's subjective norm and the intention.

Table 4: Mediation Effect Analysis (Mediator: Perceived Behavioral Control)

Dependent Variable	Intention	Perceived Behavioral Control	Intention	Intention
Independent Variable	Model 1	Model 2	Model 3	Model 4
Subjective norm	0.793***	0.855***		0.249**
Perceived behavioral control			0.849***	0.636***
R	0.793	0.855	0.849	0.859
R ²	0.629	0.731	0.721	0.737
adj .R ²	0.627	0.730	0.719	0.735
F-value	331.762	533.439	505.352	273.539

*p<0.05, ** p<0.01, ***p<0.001

4.5 Interpretations

Empirical results from this study offer us some knowledge about how the six demographic items of the residents with disability will affect the attitude, subjective norm, perceived behavioral control and intention. The empirical results revealed that the lower educational level the residents with disability accepted, the poorer ability they have to complete application procedures of accepting occupational therapy services in their home. In order to improve the influence by the educational level of residents with disability, the government can provide a friendly diverse healthcare resources and convenient services to help them improving the intention of residents.

Simultaneously, it offers us some knowledge of how the attitude, subjective norm and perceived behavioral control will influence the intention of residents with disability. The intention of residents with disability to accept occupational therapy services at home were affected positively by the construct of attitude, subjective norm and perceived behavioral control. In particular, the construct of attitude plays the greatest role in affecting the residents' intention. Among the seven items of attitude, the highest influenced factor loading is "Occupational therapy services at home can reduce the caregiver's loading", followed by "Occupational therapy services at home can improve the relationship of family members" and "Occupational therapy services at home can fit the resident's real need." Moreover, seemingly from the table 2. Traditionally in Taiwan, most of the care loading falls on family members and the long-term family caregiver's burden may cause the crisis of family relationship. In order to reduce the caregivers' daily loading, occupational therapists need to enhance the caregivers' skills for taking care of the residents such as transferring, knowledge of disease, communication technique, emotion control skills and so on. With the help of occupational therapists, residents and caregivers can improve their quality of life and family relationship. Occupational therapists should identify the demand of the residents with disability to help them realize the situation what they faced and effectively integrate the related service resources for improving their occupational performance. With the friendly, kind and suitable interventions in time, the residents can go outside more instead of confining themselves at home owing to the environmental, physical, and psychological reasons. The residents can steadily improve their quality of life and recognize the benefit of accepting occupational therapy services at home. "Medical staff's recommendation will affect the willingness to accept the occupational therapy services at home" is the highest factor loading among the four items of subjective norm. When the residents face their disability, the support or suggestions coming from the people who they trust will influence their intention to accept occupational therapy services at home, especially the suggestions coming from the medical staffs. Occupational therapists have to actively to share their clinical treatment experience, publish clinical empirical findings and so on to communicate with other medical staffs. That would make other medical staffs more willingness to refer the case to occupational therapists. Among the four items of perceived behavioral control, the highest factor loading is regarded as "Accept the occupational therapy services at home due to physical dysfunction", followed by "Accept the occupational therapy services at home due to activities of daily living dependent" and "Chiayi City Occupational Therapists Association can provide timely, suitable and convenient occupational therapy services at home". Residents might be aware of their poor abilities and expect to improve their quality of life through friendly provider's services. From the item of "The amount of government subsidies will affects the resident's willingness to accept the occupational therapy services at home", it appears that the government subsidies and residents' financial condition will influence their intention to accept occupational therapy services at home.

Finally, the item of “I want to recommend the benefits of occupational therapy services at home to people in need” is the highest factor loading among the three items of intention. Residents would like to share their experience to others about the benefit of accepting occupational therapy services at home. From the items of “I would still choose to accept occupational therapy services at home providing by Chiayi City Occupational Therapists Association rather than other providers” and “I would still choose to accept occupational therapy services at home if I need” show that if the residents promise in affirmation of occupational therapy services provide from the Chiayi City Occupational Therapists Association. Chiayi City Occupational Therapists Association can develop their loyal residents and beat the competition from other services providers.

Furthermore, the construct of attitude and perceived behavioral control have a partial mediation effect between the residents’ subjective norm and the intention. Although the support from family members, friends and other else will affect the residents’ intention to accept occupational therapy services at home, the degree of influence will be decline by the residents’ Positive or negative evaluation, awareness of self-efficacy and ease or difficult to access the external resources.

5. Conclusions

There are many differences of occupational therapy services’ work environments between working at the residents’ home and in the hospital. Occupational therapists should work under the limited equipment and spaces to provide the optimal professional services. Our findings from the study offer an important clinical application to implement occupational therapy services at home. First, mastering the needs of residents and caregivers, providing the efficient, real-time and convenient service helps to increase the residents’ professional approval and loyalty. Second, Proactive communication with other professionals staffs helps to enhance professional of occupational therapy. Third, patience, active, friendly and kind service helps to improve the medical relationship. Last, in order to increase the intention of residents to accept occupational therapy services at home, it is quite important for the applicant to get the reasonable subsidization and convenient services provided by public sectors.

6. Recommendations for Future Research

In view of the needs of long-term care gradually increased, home-based therapy is a current trend in long-term care services in Taiwan. The present study was therefore carried out to explore the occupational therapy services practiced at home. Because of the cross-sectional design of the study, future researches could be conducted with longitudinal data. In addition, the sample data was gathered within Chiayi area in Taiwan, so the results cannot be broadly generalized to other areas. In future study, someone maybe interested to investigate whether the differences exist or not in the different areas.

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