Factors influencing the decision to commit violence in Thai male juvenile offenders: A phenomenological study [version 1; peer review: 2 approved with reservations]

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Abstract
Background: Violence is a social problem that affects the physical and mental health of adolescents. For a long time, Thailand has adopted strategies formulated by the World Health Organization to reduce violence but has been unsuccessful. The aim of the current qualitative study was to understand the decision of adolescents to commit violence and to identify factors contributing to violence among male juvenile delinquents.

Methods: Data were collected from 50 male juvenile offenders at the Department of Juvenile Observation and Protection detention facilities located in 5 regions of Thailand through in-depth interviews focusing on delinquent violence committed in the past year.

Results: Adolescents who decide to use violence have been associated with and live in environments where they face conflicts in their neighborhood and violence in their community. Mostly, juveniles were found to drop out of school, engage in abuse and supply of drugs, consume alcohol, and experienced domestic violence problems and family divorce. Juvenile offenders typically experience and learn about violence from family and peers, which creates a positive attitude toward violent behavior in them. These offenses can be categorized into intentional violence, which involves seeking revenge or resolving prior conflicts and requires premeditation, and unintentional violence, which results from a situation escalating quickly and usually requiring no preplanning, such as insults, conflicts, power struggles, self-defense, or protecting peers.

Conclusions: A violence prevention model and guidelines need to be introduced into Thailand’s youth health care system. This study identified a lack of both decision-making skills and socially adequate adjustment to difficult situations among adolescent perpetrators as precursors to violent behavior.

Keywords
decision, perpetration, violence, adolescents, delinquency
Introduction

Violent behavior and delinquency have become a major global public health issue (WHO, 2016). According to the World Health Organization (WHO), 43% of homicides are committed by juvenile offenders every year, and most occur among youth aged 10–19 (WHO, 2016). Fighting and bullying are evidently common among adolescents. The rate of adolescent homicides saw a greater decrease in high-income countries than in low- and middle-income countries during the 2000–2012 period (WHO, 2016). Guns are the number one cause of violence and death in juvenile homicide cases (Gudlaugsdottir et al., 2004; Reingle et al., 2013; WHO, 2016). For each adolescent killed, many more sustain injuries (WHO, 2010) that often require hospital treatment. Firearm attacks end more often in fatal injuries than assaults involving fists, feet, knives, and blunt objects. Adolescent violence greatly increases the costs of health, welfare, and criminal justice services; reduces productivity; and decreases the value of property (WHO, 2016).

Adolescents may experience violence at any time and place. Causes of violence are deeply rooted in pre-established social and cultural structures of human existence. Contributing factors to violence include individual factors prescribing aggressive behaviors such as family relations and conflicts (Herrenkohl et al., 2012), and other cultural or external factors that may induce violence (Krug et al., 2002). Several studies on adolescents suggest that the intention to use violence or violent behavior is associated with a number of individual, family, peer, gang, and contextual factors (Gudlaugsdottir et al., 2004; Henry, 2012). Almost all studies agree that males are more likely to commit violence than females (Gudlaugsdottir et al., 2004; Henry, 2012). This is because females have better capacity for stress management and solve problems in situations that are less likely to cause a serious incident than males (Bennett et al., 2005). Some studies report rates of crime against age; a sharp increase in criminal activity in mid-adolescence followed by an equally sharp decline in these rates in early adulthood have been noted (Blonigen, 2010).

Adolescents who have experienced more than four negative life events or exposure to violence in the past year and currently engage in substance and alcohol abuse are more likely to commit violence than adolescents with no negative life events or exposure to violence and no engagement in substance and alcohol abuse (Gorman-Smith & Tolan, 1998; Gudlaugsdottir et al., 2004; Henry, 2012; Loeber et al., 1998). Adolescent gang membership and associating with delinquent peers increases the likelihood that at-risk adolescents will engage in violent behavior and delinquency (Decker et al., 2013). The more risk factors for violence an individual possesses, the higher his or her likelihood is of joining a gang (Melde et al., 2012). Many studies indicate a number of risk factors including a history of prior violence, early onset of violent behavior, high levels of early aggression, low guilt, positive violent attitudes, negative school environments, and dropping out from school (Gorman-Smith & Tolan, 1998; Loeber et al., 1998). A cluster of risk factors in adolescents often explains the cause of violence, such as cases of sexually abused children that can commonly be traced back to poverty-stricken families in overcrowded inner-city neighborhoods in which they receive little attention from their parents (Herrenkohl et al., 2012; Krug et al., 2002).

Current study

The purpose of this study was to understand the phenomena underlying the violence committed by juvenile delinquents, who have a severe problem of violent behavior. Many studies have identified risk and protective factors through quantitative approaches in an attempt to explain adolescent violence. However, only a few studies explain violent behaviors in adolescents through qualitative analysis. In addition, other studies have examined the relationship among factors influencing violent behaviors and proposed interventions that have attempted to reduce the highest risk factors but have actually been unsuccessful. Finally, the issue of adolescent violent crime is significantly more severe and complex than other delinquencies, thus requiring a qualitative study that can accumulate key knowledge to better understand the decision made by adolescents.

Methods

Sources of data

Data were collected from December 2014 to April 2015 through in-depth interviews (Supplementary File 1). The questions asked about 1) general information, including age, education, occupation, family status, behavioral description, type of perpetration, and drug use; 2) method of violence; and 3) purposes and elements of the decision-making process. The questions were designed to allow key participants to provide significant information aligned with the study concept.

Participants

A total of 50 juvenile offenders were recruited from the Department of Juvenile Observation and Protection detention facilities located in five regions of Thailand. At any given time, each facility provides services to approximately 80 adolescent offenders, all of whom were sentenced by the court. The majority of the arrests involved intent to assault, carrying weapons with intent to harm, possession of firearms, sexual assault, and murder in some cases. Purposeful sampling was used to select participants aged between 15 and 19 who had a history of violence and arrests (excluding individuals who had been indicted and released or sent to other institutions by the court) and were detained at one of the five Department of Juvenile Observation and Protection detention facilities.
Ethical statement
All participants were informed about the voluntary and confidential nature of their participation in the study. All the information collected for the study was confidential; hence, it was not shared with the detention officers or permitted to affect the ongoing trial of the participants. Approval for the study was obtained from the Research Ethics Committee of Khon Kaen University (approval number HES71317). The Research Ethics Committee waived the requisition of written consent from participants and their parents, due to illiteracy and a high frequency of changing residence. Prior to interviewing, informed verbal consent was sought from the participants’ legal guardians (as approved by the Research Ethics Committee). Only the researcher was present during the interviews. The researcher began by introducing themselves, stating the purpose of the interview and seeking verbal consent to continue from the interviewee. The interviews were conducted in a private room and lasted 45–60 minutes per participant. The interviews were recorded, and notes were taken by the researcher. The recordings and transcript files were destroyed after the data analysis was completed.

Procedures
Step 1: Preparation for the interview. The researcher set up appointment dates and times to collect data from each target facility.

Step 2: Introduction to the interview. The researcher established a rapport with the participant by initiating conversation about living conditions and adjustment to the facilities. This strategy aimed to build trust and create a friendly vibe during the interview. The researcher then sought information about the participants’ history of violence, regardless of whether they were indicted. The researcher listened and sincerely acknowledged what the participants had to say while they shared their stories without imposing any opinion, suggestions, or judgment.

Step 3: The interview. The researcher began with the following important questions: “What crime brought you here?,” “Can you tell me what happened during that crime?,” “What is the most violent crime or incident you have inflicted on others? When, where, and how did it happen?,” “Were you or any other persons affected by that crime/incident?,” and “Why did you decide to use violence at that time?” The researcher’s duty was to acknowledge the participant during the interview while also closely observing facial expressions. The questions needed to be repeated or revisited at times in order to allow the participants to provide further details so that the researcher could obtain enough information to cover all the three study concepts (general information, method of violence, and purposes and elements of the decision-making process). The interview adopted a naturalistic inquiry style; therefore, there was no particular order to questioning, although notes taken had to conducted throughout for mapping the thinking process following transcription after completing each individual encounter. The participants were free to inquire about any acquired information at any point during the interview. In addition, the researcher disclosed the notes taken to the participants at the end of the interview.

Step 4: Conclusion of the interview. The interviews were concluded in case of the following: 1) the researcher felt that sufficient data had been collected; and 2) the researcher noted uneasiness, lack of interest, or constraint in the participant. The researcher used a tactic to conclude the interview by requesting the participant to sum up the main points, thoughts, and experiences that had been shared during the interview in order to prevent any misinterpretation. The process of interview conclusion also included reaffirmation of confidentiality, privacy of information collected and the fact that the provided information would not affect the participant’s ongoing trial.

Step 5: Data analysis, generating categories, and creating hypotheses from data. Once data were collected from the participants, the researcher used data coding to categorize information. The coding was organized into 1) acts: violent behaviors; 2) participation: the participant’s involvement in the incident, namely instigator or providing reinforcement to help friends; 3) relationship: status of relationship with those involved in the violence, such as close friend, lover, or relatives; and 4) setting: the violent crime context and the living environment context.

Data analysis
Once data were collected from the participants, the researcher used data coding to categorize information. Data analysis was conducted by considering the essence of the content and using the description to describe the phenomenon of adolescent violence (Russell, 1984).

Results
Participant background
The sample group was composed of all males with an average age of 16.58 years. All the selected adolescents were indicted with charges related to inflicting harm on others (assault, attempted murder, murder, and violation of the Firearms Act). Eight in ten adolescents came from broken homes. Half of the group had divorced or separated parents, and one or both parents were deceased. Half of the group also was raised by grandparents, or a parent and a step-parent (21%). Moreover, 28.8% of the adolescents lived independently without supervision. Reasons for broken homes were parents suffering from alcohol addiction, gambling, violent quarrels, financial disputes, or imprisonment of parents. Among those raised by grandparents or relatives, some were spoiled, some were brought up without any structure, and some were treated contemptuously by relatives. Without structure, adolescents were free to hang out with friends or at game shops, crawl pubs or join motorcycle gangs, begin drinking and using drugs, and enter gang fighting. Group acceptance and friendship guaranteed self-importance, safety, and stability, which compensated for the lack of love or the feeling of being unwanted that emerged from the separation of their parents. Those who lived
without supervision were either alone or with friends or lovers. Life without supervision implied making decisions and managing problems without guidance from adults.

Most participants decided on their own to drop out of school in the middle of a school year at middle or high school. Half of the participants left school owing to history of truancy, financial hardship, or indictment and detention, which resulted in absenteeism and missing exams. In total, 80% used illegal substances, with some starting as young as the age of eight. The most popular drugs were methamphetamine, cannabis, Kratom (*Mitragynaspeciosa*), inhalants, and Alprazolam. Most adolescents used more than one drug.

“I had to drop out of school because I had a fight with my friends. My mother was invited to meet the student welfare teacher because I got into fights twice a month.” (Northern Thailand)

“I always skipped classes to smoke with friends behind the toilet wall. I did not attend classes or do homework, so I failed all my exams.” (North Eastern Thailand)

“I always go to the back of the school toilet to smoke with friends. I do not attend classes and never complete my homework; I miss all exams.” (North Eastern Thailand)

**Activity and participation in violent situations**

Most adolescents began using violence by engaging in bullying in their school or community. Nine out of ten participants were bullied and hence responded with violence or bullied others in the same school. School gangs easily clash, and this often escalated to violent confrontations. Some adolescents picked fights with their teachers, blaming them for pressuring or bullying them. Such bullying included using degrading language, such as insulting parents, teasing students to make them feel inferior, or more severe punishments such as throwing blackboard erasers at students. School bullying led to violence among adolescents. Half of the adolescents in this study reported being expelled in the middle of the school year because of frequent violent confrontations with friends, classmates, or teachers. At times, the violence involved getting into a brawl with the children of school administrators, or the disputants were severely injured and were admitted to hospital. These incidents forced some delinquents to never return to school. Without school and excessive time on their hands, some adolescents found work while others joined gangs with other delinquents. This acted as an entry point to a world full of risks of violence and other law violations.

In addition to bullying in a school, it was found that bullying outside of school also led to violence. Ten percent of the sample group escalated disputes by insulting and threatening with weapons such as spray shooting or throwing bottles while driving by on a motor bike near the homes of their rivals in order to create fear. Moreover, bullying through social media involved adolescents posting pictures of firearms, knives, and a message to challenge their rivals in order to show authority and threaten them to create fear.

“I had a physical fight with my friend at school for the first time after physical education class.” (Southern Thailand)

“My first fight was when I was 13 years old. I went with my brother next door. We were very close and often hung out together.” (Northern Thailand)

“My fights began when I was a high school student. There was a senior from another school threatening to hurt my friend, and I was called to help. We fought. Guns were fired. And we became arch enemies since then…” (Southern Thailand)

In conflict situations, adolescents need to decide how to respond. The decision depends on the situation and elements, both of which influence the choice to use or not use interpersonal violence.

“I had a fight with a teenager in the pub. After he left, I and my brother followed him and used a knife to stab him 3–4 times through his heart until he died.” (Southern Thailand)

“A teenager from other regions came to the local event. He teased my girlfriend. I got very angry, so I shot him after the event was finished” (Southern Thailand)

Adolescent decisions were divided into two scenarios: intentionally violent scenarios and unintentionally violent scenarios (Figure 1). In intentionally violent situations, adolescent perpetrators aimed to seek revenge, terminate the enemy, and resolve problems. Violence was justified as a means to an end for conflicts between gangs, villages, and enemies or rivals. The premeditation included a recruitment process, such as using social media; gaining more supporters; including a female bait to lure the rivals to a meeting point at times; and locating weapons, such as bombs, knives, and firearms. Each incident would be executed differently; for example, a bomb would be thrown to disperse the target group followed by stabbing and shooting, or a duel using guns or knives with the purpose to kill would be arranged.

In unintentionally violent situations or unplanned violence, the objective of using violence was often to show authority or self-defense in response to a threat, assist or rescue friends to prove gang spirit, insult, or respond to gang territory crossing. Victims were individuals who crossed gang territory or simply some strangers. Weapons used for self-defense included brass knuckles and pocket knives; guns; or anything that could be found, such as sticks, beer bottles, or other materials. The method of violence was fist fighting without weapons or using any item to inflict injury, punching with brass brackets, stabbing with knives, and shooting with guns.

Four out of ten adolescents committed violence in the streets, such as while riding motorbikes past rival gangs or crossing gang territories. The fighting involved knife fighting, gun shooting, use of sticks to assault, and motorcycle trapping. These street fights caused serious injuries resulting in admittance to the hospitals and death of two victims.
Elements of the decision to use violence involved other people, such as family members, relatives, peers, and lovers, owing to their close relationship with the adolescent. Those who had experienced violence were more likely to commit violence. Alcohol consumption and drug use were found to be among the key variables triggering adolescent violence. A large number of adolescent offenders committed violent crimes under the influence of substances and alcohol. Six in ten adolescent perpetrators spoke about easy access to weapons, and their own weapons, such as guns, Spatha or Samurai knives, brass knuckles, and bombs. Adolescents who hung out as a group and had rivals or enemies always carried weapons. They obtained these weapons by purchasing these on their own, from friends, making them themselves, trading with drugs, or borrowing. Weapons such as brass brackets, Spatha or Samurai knives, and pocket knives were affordable and easy to find in common marketplaces. Some adolescents produced homemade weapons such as bombs, homemade pen guns and cap guns, and Spatha or Samurai knives by using skills learned from friends or techniques from lessons taught at schools or jobs. In addition, adolescents knew the sources of distribution and purchasing processes of guns.

“There were fights almost every day. Before every fight, I would take an Amphetamine tablet. If I did not take them, I would not dare to do it—pulling the trigger.” (Southern Thailand)

“Every day, before going out for some entertainment, I would take two tablets of Alprazolam. I have stabbed people three times during night-outs. I have never waited to see if they died or not. I got very upset at my brother for warning me about taking Alprazolam before going out, so I tried to stab him with the knife too.” (Southern Thailand)

Apart from narcotics, the study found that alcohol is also another crucial variable dictating violent incidents among
juvenile offenders. Many juvenile offenders have committed crimes related to violence while being under the influence of alcoholic beverages, which are spirits and traditional herbal liquor. These groups of juvenile offenders consume alcoholic beverages with friends and later come out to fight and use violence, as the following examples indicate:

“Every day after work, I would go out to drink alcohol or beer. After I got drunk, I would dance in front of the stage and fight with others…” (Eastern Thailand)

“That night, I was drinking and got drunk in a shop in my village. A guy came in the shop to buy things. I borrowed his motorbike, but he did not want to give [it to] me. I got angry, so I hit his head with a stone.” (Northern Thailand)

Relationship

Other people, such as family members, peers, gangs, cousins, and lovers, influenced adolescents’ decision to use violence in both types of scenarios. Seven out of ten adolescents joined their peers and adolescents in their neighborhood to form gangs of four members or more. Half of them were in a gang with 4–10 members. 1 in 3 was in a gang with 11–20 members. 3 in 10 adolescents belonged to gangs with 30 or more members. Large-sized gangs engaged in selling illegal substances and motorcycle races. Most gang activities included drinking alcohol, nightclub crawling, drug abuse, and speed motorcycle racing. Adolescents deemed these activities as normal and in trend. Moreover, the activities they did together signified belonging, bravery, and an exhibition of talents. Most importantly, there was a transfer of violent culture. Gang violence was often triggered by cross-territory insults that led to conflict and fighting.

“Our group has about ten people. We love each other a lot. Nobody can mess with my friends. All my criminal cases are because of these friends.” (Southern Thailand)

“The closest person to me is my big brother. I love him a lot and can do anything for him. Nobody is allowed to hurt him because we only have each other.” (Southern Thailand)

“The beginning of my fight was because of one of my close brothers who had an arch enemy. He took me to my first fight. I was told that if I refused to fight, I would definitely get hit by his brass knuckles. So I had no choice.” (Southern Thailand)

Setting and neighborhood

Adolescents exhibiting violent behavior were found to live in high risk or vulnerable communities, such as communities with drug addicts and those near pubs, bars, snooker tables, karaoke bars, or gambling houses. These locations inevitably became meeting points or killing spots for gangs. Communities and youth living environments play an important role in making illegal behavior decisions and lead to violent decisions or conflicts with others.

Most juvenile offenders were stigmatized as delinquents and trouble makers. This indicates that community members also influence violence in juvenile offenders. If their group formations or deviant behaviors are being negatively judged by family or community members as trouble makers for the family or society, the stigma can put juvenile offenders under the pressure. This leads to vulnerability about peer pressure, and because peers provide them with confidence, they behave in a manner that takes both the pressure ad stigma into account.

“The villagers look at me as a bad boy, an inhalant addict or a night partier.” (North Eastern Region)

Discussion

The phenomenon of adolescent violence by juvenile delinquents is complex and multi-faceted. Unlike other delinquencies, violent adolescents often escalate the level of disputes and degree of impact on the victim as well as the instigator. This is because violence is deemed as the most effective conflict resolution, which is also justified by the personal desire to seek violence; the belief that violence is a normal adolescent behavior; outcomes that can be measured, such as the injuries to the enemy or surrenders; and the conceivable power within the so-called territory.

Violence-seeking behavior in adolescents often originates from bullying in school (Olweus, 2011; Renda et al., 2011). This evidence highlights poor bullying prevention and management in school (Monks et al., 2009). Adolescents who are involved in bullying, either as a recipient or a perpetrator, often respond to provocations with violence, which then escalates to gang violence. In gangs, adolescents undergo initiation processes, which are designed to modify behaviors. Gang culture instills a belief system and normalizes violence and delinquency (Alleyne & Wood, 2010). The nature of violence eventually leads to criminal intent, including robbery, which involves premeditation (planning, identifying of victim) and fighting in public or expressive crime. This type of violence is an indication of a lack of adequate self-control.

Transition into adolescence involves drastic changes in hormones and, consequently, temperament. Responses to situations can involve extreme emotions or violence and lack of self-control. The decision to resort to violence is purposive (Monks et al., 2009) depending on the situation. Additional influences include peer pressure, family relations, neighbors, and community (Sherer & Sherer, 2011), and drug and alcohol use often fuels the intensity and decisiveness in committing violence (Baskin–Sommers & Sommers, 2006; Fagan et al., 2015; Gudlaugsdottir et al., 2004; Swamhn & Donnovan, 2004; Tyner & Fremouw, 2008). Moreover, adolescent offenders usually find it easier to access weapons than their peers (Bingenheimer et al., 2005).

Adolescents undergo transformation of physicality, mind, emotional maturity, and adjust to society, peers, and school as they transition into adulthood. It is important to understand that adolescents are naturally curious to try new things and often seek challenges. If violence is embedded in their environment – family, peers, schools, community, society – adolescents
would likely fall in the path of violence and delinquency with no regard to the consequences. Delinquent adolescents acquire different life skills than their law-abiding counterparts. Using violence to solve problems is a common value of the group, but is also related to other risk factors and use of illegal substances.

The findings of this study suggest that intervention programs should be offered to aid adolescent offenders during probation with emphasis to prevent repeat offenses, which could escalate to higher-level crimes in the future. Interventions must target and offer help to those who are developing life skills, such as decision-making skills, rejection skills, and problem-solving skills. This population lacks the opportunity to refine these skills, as they might have been neglected at a young age or due to childhood trauma and school dropouts. Environmental management is highly influential in these behaviors. Appropriate management and control of liquor stores, gambling places, games shops, and internet shops, as well as effective weapon control and limiting of weapon access to adolescent offenders should be implemented. Strict and clear policies and regulations will reduce risk factors, thereby creating community safety.

Limitations
The present sample included adolescent offenders who were detained at Department of Juvenile Observation and Protection detention facilities; therefore, they are not representative of all teens. In addition, the researcher could not evaluate during interviews other confounders such as mental health problems.

Conclusions
This study aimed to understand juvenile offenders’ decision to use violence in problem or conflict situations. Male juvenile offenders who had engaged in serious violence were chosen for the study. It was found that violent behaviors in male juvenile offenders originate from bullies in schools or communities, leading to behaviors of fighting or using violence in order to solve conflicts that occur among juvenile groups. The level of violence gradually escalates to serious violence, resulting in injuries or death in violent flights. Two types of decisions considered from various elements are made by male juvenile offenders when using violence, intentional use of violence and unintentional use of violence. However, the principal variables affecting both situations of decision in using violence are close friends and gangs, which eliminate their hesitancy to attack others in order to protect their friends, and the dignity of their group or gang. As the majority of juvenile offenders are from broken families, they consider their relationships within their groups of friends as something to be proud of, in order to replace the lack of love or respect received from families. It was found that most of the misbehaviors were engaged in under influences of narcotics and alcohol. Furthermore, the study found that these juvenile offenders possess the ability to produce deadly weapons such as guns, grenades, and sword-knives, and can immediately procure them if needed. Another interesting aspect is that these groups of juvenile offenders utilize fighting as a solution to manage issues between cliques or persons.

Lastly, male juvenile offenders were found to lack decision-making skills as well as social adequacy. Therefore, creating a violence prevention model and formulating guidelines are crucial and should be assigned as part of juvenile health care systems. Additionally, studies regarding prevention that can resolve violence in juvenile offenders are required.

Data availability
Recordings and transcript files are not available. To maintain participant confidentiality, these files were destroyed immediately following data analysis. Themes and quotes from the data analysis are available in Thai. This data can be obtained on approval from the Ethical Committee of Khon Kean University. To apply, please visit the Ethical Committee of Khon Kean University webpage (https://eckku.kku.ac.th) or contact the corresponding author.

Consent
The Research Ethics Committee waived the requisition of consent from participants. Prior to interviewing, informed verbal consent was sought from the participants’ legal guardians.

Competing interests
No competing interests were disclosed.

Grant information
The author(s) declared that no grants were involved in supporting this work.

Acknowledgements
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Supplementary material
Supplementary File 1: Interview guide used in Thai with English translation.

Click here to access the data.
References


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Marta Talavera  
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The theme is interesting and relevant, but the sample size is too small to be able to generalize results.

Also, it would be necessary to provide a better social and economic contextualization. The bibliography needs to be updated with more recent references. The methodological description is not clear. The exhibition is not detailed as well as the subsequent analysis, so the results do not have sufficient foundation for the statistics.

Is the work clearly and accurately presented and does it cite the current literature?  
Partly

Is the study design appropriate and is the work technically sound?  
Partly

Are sufficient details of methods and analysis provided to allow replication by others?  
Partly

If applicable, is the statistical analysis and its interpretation appropriate?  
Partly

Are all the source data underlying the results available to ensure full reproducibility?  
Yes

Are the conclusions drawn adequately supported by the results?  
Yes

Competing Interests: No competing interests were disclosed.
I have read this submission. I believe that I have an appropriate level of expertise to confirm that it is of an acceptable scientific standard, however I have significant reservations, as outlined above.

Reviewer Report 29 June 2018

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Sang-arun Isaramalai
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1. Incongruency on the philosophical basis of the research methodology between qualitative and quantitative has existed- using the term "sample" in results - page 4 and in Limitation in page 8 including terms, representative & confounders.

2. Introduction- gap of knowledge was unclear-why need to explore those influencing factors, what have known and what need to be explored for resolving the problem.

3. Using qualitative data analysis, grounded theory, themes are expected to be emerging from the data themselves not from known categories.

4. The Procedures, page 4 need to take out the subject, the researcher.

5. Figure 1, Need to include influencing factors in the diagram and provide discussion on how those factors mediate or moderate the decision.

6. Discussion - page 7 need to explain why on the study findings not part of literature review.

7. Discussion page 8 - study results from qualitative research are not ready for utilization or designing intervention.

8. Conclusion - Not summary of the results, but need to focus on what was new knowledge emerging from the study, what confirmed existing knowledge.

Is the work clearly and accurately presented and does it cite the current literature?
Partly

Is the study design appropriate and is the work technically sound?
Partly

Are sufficient details of methods and analysis provided to allow replication by others?
Yes
If applicable, is the statistical analysis and its interpretation appropriate?
Partly

Are all the source data underlying the results available to ensure full reproducibility?
Yes

Are the conclusions drawn adequately supported by the results?
Partly

Competing Interests: No competing interests were disclosed.

Reviewer Expertise: Health promotion, occupational health, aged care, community health

I have read this submission. I believe that I have an appropriate level of expertise to confirm that it is of an acceptable scientific standard, however I have significant reservations, as outlined above.