

Approaches to Threatening Health Information

Overview

Perceptions that one is at risk for a health threat plays a major role in determining whether people will act to protect themselves from health and safety risks. People who judge (accurately or inaccurately) that they are not at risk are unlikely to take protective action. Why do some people attend to information about health risks and act to reduce their susceptibility while others deny their vulnerability to the risk? We predicted that there would be three distinctly different approaches that people would use response to threatening health information.

Different Response Approaches. The first approach, *control-based*, involves acknowledging one's susceptibility and acting to reduce one's vulnerability to the threat. With this approach, people will identify risks and ways to reduce the risk. They are attentive to the controllability of the threat and will act to reduce their risk. For instance, if a person with a primarily control-based response approach heard that they were at increased risk of skin cancer, that person would start to wear sunscreen and limit their midday sun exposure. In addition, these actions would make them feel less at risk.

People using a *denial-based* response strategy deny their susceptibility to a threat. Previous research has identified a number of ways that people defend themselves against threatening information by using strategies such as distancing oneself from a victim, not paying attention to a message, questioning the validity of the information, or denying the implications for one's self. People using denial-based approaches are more likely than others to use these defensive strategies to reduce their sense of risk. If a person employing this strategy heard they were at increased risk for skin cancer, they might continue to believe they were not at risk, and would not take measures to decrease their chances of getting skin cancer.

The *heightened sensitivity-based* approach involves overestimating one's risk for negative events. Those who use this approach to threat are acutely sensitive to their vulnerability. They are attentive to the controllability of the threat and take precautions to avoid it, but still feel vulnerable. In the situation in which a person heard they were at increased risk of skin cancer, that person would start to wear sunscreen and limit their midday sun exposure, but still feel that they were at high risk of getting skin cancer.

Participants

One hundred and nine college students and permanent residents of the local Claremont, California community took part. Participants were between the ages of 18 to 94; the average participant was 35. Sixty-four percent were female, and 46% were male. Most (64.2%) were Caucasian, 10.1% were Asian or Pacific Islander, 9.2% were Latino, and the remaining were from another ethnic background.

Key Findings

Different Response Approaches. Participants responded to several questions designed to measure how they respond to threatening health information. Participants were asked questions about each of the three response approaches mentioned above. We found strong support for our prediction that people used different response approaches to deal with threatening health information. Most people used a combination of several approaches. Thus, our findings demonstrate any one person can, and does, use all three response approaches. A single person might use each of these responses to different

degrees, and different situations may bring about different approach responses. In later studies, we will be studying how different people react to threats, and the extent to which different responses are used in different situations.

In addition, participants were asked questions about their perceptions of risk for several different negative health experiences, such as being diagnosed with gum disease or developing a drinking problem. As one would expect, use of a control-based or denial-based approach was associated with perceiving oneself as being at less risk for these experiences, while use of a heightened sensitivity approach was related to seeing oneself at greater risk for these experiences.

How Response Approaches Relate to Health Behaviors. The second goal of this research was to identify if and how using these different response approaches is related to engaging in more healthy behaviors. Participants answered a series of questions pertaining to how often they did several different healthy behaviors, such as wore a seatbelt, put on sunscreen, and exercised. As we expected, use of a control-based or heightened sensitivity-based response approach was associated with doing more healthy behaviors. A denial-based response approach was associated with doing fewer healthy behaviors. Taken with the findings presented above, these findings indicate that use of a heightened sensitivity-based response approach results in engaging in more healthy behaviors, but perceptions that one is still at risk for experiencing a negative health event.

How Response Approaches Relate to Anxiety. As stated above, we expected use of the different response approaches to be related to anxiety in different ways. Participants completed a short series of questions on their anxiety levels. Indeed, we found that, although use of a control-based or denial-based approach was not associated with anxiety, using a heightened sensitivity based approach was related to experiencing more anxiety.

Implications

Once again, thank you for taking part in this important research. We feel that these results are interesting and important, and have the potential to help people in our society react positively to threatening health messages. This framework for understanding how different people respond to risky situations and the factors that heighten or diminish the use of different response approaches is of great value to health educators, public health officials, and medical personnel who are working to motivate people to do more healthy behaviors. Our future research will focus on identifying those particular situations and methods by which people will be more likely to use a control-based approach. We could not have completed this study without your help, and look forward to conducting more research on this and related topics. We would be happy to answer any questions you have about this report, the findings, or the study in general. We can be reached by phone at (909) 607-7734, or by email at mss14747@pomona.edu.