Smoking Can't Hurt Me! and Other Death-Related Thoughts: a Test of Terror Management and Risk Perceptions

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Researchers are plagued with creating communications that can increase compliance with risk avoidance behaviors. A field experiment was designed to investigate the impact of mortality salience and self-esteem (TMT) on smokers’ willingness to comply with anti-smoking messages using health and social themes. “Social mortality”, emphasizing the loss of a relationship when one dies (as opposed to the health effects of smoking), was more effective at getting a wide range of smokers to indicate an intention to quit smoking. Our results show that mortality salience interacts with self-esteem to influence smoking tendencies. The public policy and theoretical implications of these findings are discussed.

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EXTENDED ABSTRACT

Consumer behavior researchers and public policy makers continue to be plagued with the problem of creating communications which can increase the probability of complying with risk avoidance behavior such as smoking. Using Terror Management Theory as a theoretical basis, we conducted a field experiment designed to investigate the impact of mortality salience and self-esteem on whether smokers will comply with anti-smoking messages anchored in varying health and social themes (Taubman Ben-Ari, et al.1999; 2000; Greenberg, et al. 1996). For individuals who smoke to enhance their self esteem, it is the threat of negative social consequences and not the threat of future health problems which matters most. We also investigate the impact of smoking self esteem (SSE) and mortality salience (MS) on health and social risk perceptions. In the field experiment, 150 smokers at a mall in southern California were asked to take part in an experiment. To test the differential effect of mortality salience on a wide range of smokers, we tested two types of actual PSAs (health effects and social death messages).

Data was analyzed through the use of 2physical vs. social mortality salience) by 2(high vs. low smoking self esteem) between subjects ANOVAs. We measured intention to quit smoking, health risks as they relate to oneself and others around you, social acceptability of smoking, and risk of familial loss. First, we found the significant MS main effect was driven by a significantly greater intent to quit smoking when exposed to the social death message. The significant interaction effect reveals that SSE impacts smoking intent for the social death and not the health effects appeal. This provides further support for the premise that health effects do not persuade smokers whereas the social death message reveals a generalized effectiveness across a wide range of smokers.

There was a significant mortality salience main effect for the health risk perceptions such that smokers exposed to the social death messages were more likely to perceive the risk of smoking to their health as significantly higher compared to those who saw the health effects message. As for the social acceptability measures, we found both significant mortality salience and smoking self esteem main effects and a significant interaction effect. The social death message resulted in lower social acceptability ratings while high SSE smokers believe that friends and family find smoking to be more acceptable than low SSE smokers. More importantly, high SSE smokers who saw the social death message viewed the social risks of smoking as significantly more severe than those who saw the health effects messages. This effect was missing for the low SSE smokers. The familial loss results mirrored the social acceptability results. Overall, it appears that the impact of seeing a social death message brings home the reality of the familial losses unlike the health effects messages. These effects seem to be enhanced when a smoker is high in smoking self esteem, which is predicted by TMT and the fear of death literature. Self esteem seems to have little if any effect on familial losses for those exposed to the health effects messages. The combination of high SSE and exposure to the social death messages seems to enhance the perception that one can die from smoking.

The idea of making mortality and the fear of death salient for smokers can influence their respective risk perceptions and risk taking behaviors (Pechmann, et al. 2003). We expanded the view of mortality salience by placing it into a continuum from physical loss to both physical and social relationships. This broadened approach to mortality salience was integrated into a framework to understand how smokers’ self esteem interacts with the anxiety of death influencing their risk perceptions and risk taking behaviors. Thus, based on TMT when smokers are faced with thoughts of death by the images created in the health effects PSAs, they produce active coping defenses as reflected in their maladaptive responses to these types of fear appeals through the continued willingness to engage in the risky behavior.

To increase the probability of informing smokers of the danger of smoking, public policy makers must at least be able to provide this group with the information about the risks. With the general public, this research demonstrated the efficacy of the social death messages in influencing smokers, in general, to consider the risks of smoking. Additionally, marketers should consider communication strategies that would minimize resistance to persuasion when mortality or death related thoughts are salient. Understanding the impact of TMT and risk perceptions as applied to marketing communication is critical. For example, communicating information on how to use a product correctly can result in attempts at counter-persuasion evoking a threat to someone’s cultural worldview.

By understanding the impact of how important smoking is to one’s self worth as well as the impact of making social and physical mortality salient, we may be able to provide guidance to policymakers (to develop persuasive anti-smoking messages) and to marketers (to provide persuasive marketing messages) to consumers (Maheswaran & Agrawal 2004).

References


