Message Framing: How good versus bad information affects our beliefs about physical activity

Purpose

To see how health risk information and different ways of framing physical activity messages may affect a person with SCI’s perceived personal risk for various health conditions.

Summary

- Disease (e.g., cardiovascular disease, diabetes, obesity) and psychological health risk information (e.g., depression, chronic pain, fatigue) was provided
- Good news messages (benefits of being physically active) OR bad news messages (risks of not being physically active) were matched with each disease and psychological health condition. For example:
  - **Good news:** adding physical activity to your day can help manage your pain
  - **Bad news:** by not adding physical activity to your day, you miss an opportunity to manage your pain
- Disease and psychological health risk information increased a person's perceived risk for the condition
- Psychological health risk information paired with bad news information had a greater impact on a person’s intentions to exercise and their confidence that exercising would reduce the risk of the condition than good news information

Possible Applications

- Pairing psychological health risk information with persuasive messages about the risks of inactivity can be a used as a strategy to help change intentions and beliefs about exercising

Research Abstract

Do you want the good news or the bad news? Gain- versus loss-framed messages following health risk information: The effects on leisure time physical activity beliefs and cognitions

**Objective:** The primary purpose was to examine the relative effectiveness of chronic disease and psychological health risk information combined with gain- versus loss-
framed leisure time physical activity (LTPA) messages for changing perceived personal risk, LTPA response efficacy (i.e., the belief that LTPA can effectively reduce risk), and LTPA intentions. A secondary purpose was to explore the relationship between message framing and cognitive processing.

**Method:** Baseline assessments of perceived risk for inactivity-related disease and psychological health problems, LTPA response efficacy, and intentions were measured among 96 individuals with spinal cord injury (SCI). Participants read population-specific information about the risk for inactivity-related disease and psychological health problems following SCI, and perceived risk was reassessed. Participants were then randomized to read LTPA response efficacy messages emphasizing the benefits of LTPA (gain framed) or the risks of inactivity (loss framed). Immediately following message exposure, cognitive processing (i.e., thought listing and message recall), LTPA response efficacy, and LTPA intentions were assessed.

**Results:** Changes in perceived risk were observed following exposure to health risk information. Changes in LTPA response efficacy and intentions were greater following loss-framed messages targeting psychological health compared with gain-framed messages. Greater cognitive processing was observed following loss-framed messages compared with gain-framed messages.

**Conclusion:** Following exposure to psychological health risk information, loss-framed messages may be more effective than gain-framed messages for eliciting cognitive processing and changing LTPA beliefs and intentions.