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**To:** Office of Management and Budget (OMB)

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**Subject:** Generic Sub-study, **Self-affirmation and defensiveness to cancer risk information for the self vs. a close other**, under “A Generic Submission for Theory Development and Validation (NCI),” (OMB No. 0925-0645, Expiry Date 12/31/2014)

Background/ Need and Use for Information

The National Cancer Institute’s (NCI) Behavioral Research Program (BRP) is within the Division of Cancer Control and Population Sciences (DCCPS). BRP initiates, supports, and evaluates a comprehensive program of research ranging from basic behavioral research to the development, testing, and dissemination of interventions in areas such as tobacco use, screening, dietary behavior, and sun protection. The goal of BRP is to increase the breadth, depth, and quality of behavioral research in cancer prevention and control. BRP conducts varying programs of formative research to develop and validate cancer-related behavioral theories. This sub-study is a voluntary, low-burden, non-controversial, formative behavioral research project related to theory development and validation. Data collection for this project is authorized under 42 USC § 285 and 285a-1 (Section 410 and 412 of the Public Health Service Act).

In this proposed sub-study, we plan to refine and validate a theory regarding the role of the self-related and self-transcending psychological processes as experiences that can influence how individuals respond to messages related to one’s own cancer risks and the cancer risks to a significant/ close other (e.g., spouse, family member, or close friend). Using several survey conditions, we will conduct a study (Attachment A) that will help to refine a preliminary theory concerning the role of self-affirmation – affirming one’s self value – and receptiveness to information about one’s own cancer risk or the risk of a close other. We will examine whether our theoretical framework best predicts responses; this will be the first survey to attempt to refine and validate this theoretical framework.

This data will be collected through the [TESS](#) project, an opportunity for researchers to collect data at no charge to examine psychological theories and hypotheses. We submitted a proposal for this study to TESS, and it was peer-reviewed by two reviewers, who recommended that it be accepted for fielding at no cost to the NCI. Thus, we will be able to collect this data free of charge. TESS fields research through [GfK US](#), an internet survey company.

### **Self-affirmation, Self-related vs. Self-transcendent Processes, and Receptiveness to Health Risk Information**

Individuals tend to be defensive against information that suggests their behavior puts them at risk for diseases such as cancer, and often avoid or do not believe such a message. Individuals are motivated to derogate the message because it threatens one's sense of self-integrity to hold the belief that one would knowingly engage in a behavior that is counter to one's own best interest. Research has shown that self-affirmation, or the opportunity to affirm one's sense of integrity by reflecting on an important value (e.g., honesty, trust) and how one upholds this value in daily life, can reduce defensiveness to information about cancer risk. In short, when offered the opportunity to self-affirm, individuals are much more likely to engage in preventive health behaviors after they read a health communication about their risk for cancer.

One potential reason for self-affirmation's effectiveness is an ironic effect, allowing individuals to direct their attention away from the self and towards others (in a self-transcendent manner). If this is indeed the reason underlying the effectiveness of self-affirmation, it is possible that self-affirmation will not be beneficial when someone is presented with information about the cancer risks of someone close to them.

We plan to conduct a randomized, 2 (self-affirmation vs. no affirmation) x 2 (message related to health risks to self vs. close other) study. Consistent with previous studies, we predict that self-affirmation will increase receptiveness to a message about cancer risk for the self, compared to the no-affirmation self-risk condition. However, we predict that defensiveness against risk information for a close other will be higher in the no affirmation condition, compared to the self-affirmation condition. Examining this hypothesis will allow us to refine and validate our theoretical framework, and would set the stage for applied research to examine real-world implications.

### **Selected Readings**

For selected readings on self-affirmation, see Attachment B.

### **Participants, Methodology, and Research Instrument**

Respondents will be 500 individuals aged 40-70 who are standing members (i.e., survey participants) of the GfK US panel. GfK panel members will be eligible if they are aged 40-70, overweight, and have never been diagnosed with cancer (to ensure relevance to breast and prostate cancer risk, the topic of the health message). Individuals will also be screened for inclusion based on whether they report having an opposite-sex close relationship with another adult age 40-70 who is also overweight (e.g., opposite-sex spouse, close friend, or family member). GfK panelists will complete the survey as part of their membership on the panel; there is no remuneration for participating in this study. The survey (Attachment A) will be fielded

entirely online. Information will be kept secure to the extent permitted by law. Analyses will not yield results that can be generalized to the overall population.

Analyses will involve the association between the self-affirmation condition, the self-vs. other cancer risk information condition, and outcomes (including risk perceptions and intentions to seek information about cancer. We will disseminate our findings to relevant audiences –health psychologists/ public health researchers who capitalize on basic psychological science advances to develop efficacious health communications and interventions, and basic psychological scientists who study self-affirmation and affective experiences. We plan to disseminate findings at psychology or behavioral medicine conferences (Spring 2015), and hope to publish findings in specialized professional psychology, behavioral medicine, or judgment and decision-making journals (Summer 2015).

Other Considerations

The NCI Special Studies Institutional Review Board conditional approval for this study is attached (Appendix C). PII will not be collected in conjunction with these items.

Burden

A total of 500 participants will complete the survey, which has an anticipated length of 30 minutes; thus, the total hour burden is 250 burden hours. The screener for the study is not incorporated into the burden hours, as eligibility will be determined based on responses participants have already provided to GfK in previous panel surveys, outside the scope of this project and not at the request of the federal government. This effort will account for less than 4% of the total burden hours granted in the full generic OMB clearance package. To date, a total of 2,109 burden hours have been used of the 6,000 hours that were requested. Estimated cost to the Federal Government is \$1134 for staff (estimated based a program director (\$113,346 x 1% effort); survey incentives, cost for administration, and other survey-associated costs will be assumed by the sponsoring organization (TESS).

Estimates of Burden Hours					
Types of Respondents	Instrument	Number of Respondents	Frequency of Response	Average Time Per Response (Hours)	Total Hour Burden
General Public	Survey (Attachment A)	500	1	30/60	250
Total		500			250

List of Attachments

- A: Survey Instrument Screenshots
- B: Selected Readings
- C: IRB Approval
- D: Survey Items in Word Format