Chapter 6

General Discussion

When people are faced with information that links their specific behavior to increased risk for health problems, they often respond defensively and are less likely to accept the threatening health information. Although defensive responding to threatening health information is likely to keep worries at a safe distance, it may also prevent people from protecting their personal health. From the perspective taken in this dissertation, people at-risk respond defensively because they are highly motivated to protect their positive self-image as a good and sensible person. This proposition follows from self-affirmation theory (Steele, 1988). An important prediction from this theory is that if people can restore their global sense of self-integrity by drawing upon alternative self-resources unrelated to the specific threat (i.e., “self-affirm”), they should be less likely to respond defensively to the threatening health information and more likely to accept the information.

While previous research confirmed that self-affirmation can increase acceptance of threatening health information (e.g., Harris & Napper, 2005; Reed & Aspinwall, 1998; Sherman et al., 2000), insight into how self-affirmation affects the processing of threatening health information remained lacking. Therefore, the first aim of the research reported in this dissertation was to fill this gap by systematically examining the impact of self-affirmation on health information processing. Additionally, the conditions under which self-affirmation positively affects health information processing and results in adaptive responses had not been specifically addressed in previous research. There may be boundary conditions to the positive effects of self-affirmation, under which self-affirmation is ineffective or even backfires. We proposed that the impact of self-affirmation on information processing would vary as a
function of the level of self-threat people experience when faced with threatening health information. Thus, the second aim of the research reported in this dissertation was to examine the moderating role of self-threat level regarding the impact of self-affirmation on the processing of threatening health information.

In sum, the purpose of this dissertation has been to advance our understanding of how and when self-affirmation makes people more responsive to threatening health information. In this chapter, we will start by summarizing the empirical findings obtained in Chapters 2 to 5. Next, we will consider the implications and contributions of these findings. Finally, we will raise potential limitations of the research reported in this dissertation and provide directions for future research.

**Summary of the Empirical Findings**

The research reported in the empirical chapters was designed to examine how self-affirmation affects the processing of threatening health information. We hypothesized that the effect of self-affirmation on information processing is likely to vary as a function of the level of self-threat. Specifically, in Chapter 1 we argued that self-affirmation would increase extensive, careful information processing under moderate self-threat conditions, but would decrease extensive, careful processing of threatening health information under low and high self-threat conditions. Conceptualizing self-threat level as participants’ vulnerability to a health risk, and varying the health risk across studies, we obtained repeated evidence for this prediction.

*Chapter 2 – How Self-Affirmation Affects Health Message Derogation*

In Chapter 2, we examined the impact of self-affirmation on the processing of threatening health information under low and moderate self-threat conditions. Information processing was assessed by measuring participants’ level of message derogation, that is, an
explicit measure of defensive information processing (Witte, 1992). On the basis of the assumption that self-affirmation decreases defensive processing of threatening health information, we predicted that self-affirmation would decrease message derogation under moderate self-threat conditions (i.e., for participants at-risk). In line with the observation that self-affirmation can reduce the motivation to process information when participants do not feel particularly threatened (Briñol et al., 2007), we predicted that self-affirmation would not affect message derogation under low self-threat conditions (i.e., for participants not at-risk). Consistent with these predictions, at-risk participants who were given the opportunity to self-affirm, derogated the threatening health information less, while self-affirmation had no effect among participants not at-risk.

Additionally, Study 2.1 investigated the impact of self-affirmation on screening behavior (online risk testing behavior). Unlike behaviors directed at maintaining one’s health (e.g., exercising) that are typically seen as involving little or no risk because they encompass little uncertainty, screening or detection behaviors potentially inform people of a severe health problem and are typically considered high risk as they encompass high uncertainty (Devos-Comby & Salovey, 2002; Rothman & Salovey, 1997). While there is some evidence that self-affirmation can positively affect health-promoting behavior (Epton & Harris, 2008), no study to date tested whether self-affirmation can promote screening or detection behavior. As predicted, we found that self-affirmation increased intentions to do an online risk test and promoted online risk test taking among at-risk participants (i.e., moderate self-threat condition), and decreased intentions and online risk test taking among participants not at-risk (i.e., low self-threat condition). The findings of Study 2.1 further suggest that for at-risk participants, the effect of self-affirmation on intentions to take precautions was mediated by the decrease in message derogation. In addition, intentions to engage in precautionary behavior mediated the impact of self-affirmation on screening behavior.
Chapter 3 – How Self-Affirmation Affects Explicit Health Information Processing

Chapter 3 examined in more detail how self-affirmation affects the processing of threatening health information under low, moderate, and high-self-threat conditions. Study 3.1 tested the assertion that a manipulation of vulnerability to a health risk induces a higher threat to the self than when vulnerability is measured. Consistent with our hypothesis, the results showed that participants who received false feedback regarding their high vulnerability level (i.e., manipulation of vulnerability) reported higher levels of perceived vulnerability to a health risk than participants who were classified as highly vulnerable based on measurements. Moreover, this study demonstrated that using different methods to assess participants’ vulnerability level (i.e., measurement vs. manipulation) enabled us to create three levels of self-threat: low, moderate, and high. In addition, Study 3.1 provided initial evidence that self-threat level moderates the effect of self-affirmation on information processing. Self-affirmation increased the number of critical thoughts participants reported under moderate levels of self-threat, and decreased the number of critical thoughts under conditions of high self-threat. These findings thus suggest that self-affirmation increases the extent of information processing for moderate self-threats, but decreases extensive, careful information processing for high levels of self-threat. However, no self-affirmation effect was found under low levels of self-threat. The absence of an argument quality manipulation and attitude measure may have limited our ability to detect this effect.

Studies 3.2 and 3.3 therefore assessed information processing following self-affirmation under different self-threat levels in a more robust way by varying the quality of the arguments in a health message and by examining the impact of these arguments on participants’ cognitive responses (Study 3.3) and attitudes (Studies 3.2 & 3.3). Past research has shown that extensive, careful information processing is indicated by a significant differentiation between strong and weak arguments in a message, whereas less careful processing is implied when this
differentiation is absent on the dependent measures (Petty & Wegener, 1999). It was hypothesized that self-affirmation would increase sensitivity to the quality of the arguments in the health information under moderate self-threat conditions. In contrast, we hypothesized that self-affirmation would decrease sensitivity to argument quality under low and high self-threat conditions. Study 3.2 demonstrated that, in the moderate self-threat condition, self-affirmation increased sensitivity to the quality of the arguments in the health information, consistent with the predicted increase in the extent and carefulness of information processing. Self-affirmed participants had more favorable attitudes when the message was supported by strong rather than weak arguments. In contrast, in the low and high self-threat conditions, self-affirmation decreased participants’ sensitivity to argument quality in the health information, consistent with the predicted decrease in the extent and carefulness of information processing.

Study 3.3 replicated these findings for moderate and high self-threat levels using an experimental manipulation of self-threat level across conditions. In addition, it was found that the effects of argument quality on attitudes observed among self-affirmed participants in the moderate self-threat condition and non-affirmed participants in the high self-threat condition were mediated by cognitive responses. Moreover, Study 3.3 ruled mood out as an alternative explanation as self-affirmation did not affect mood in this study. Together, the research reported in Chapter 3 provided strong evidence for our hypothesis that self-threat level moderates the effect of self-affirmation on the processing of threatening health information.

Chapter 4 – How Self-Affirmation Affects Implicit Health Information Processing

The information processing measures used in the preceding chapters (i.e., message derogation, cognitive responses, and attitudes) required participants to engage in a conscious retrieval process. To test whether we could replicate our previous findings using an information processing measure without any explicit reference to the self-threat, the studies
reported in Chapter 4 tested the impact of self-affirmation on the accessibility of threat-related cognitions by means of a lexical decision task. Increased (vs. decreased) extensive, careful processing of threatening health information following self-affirmation should make it easier (vs. more difficult) to encode threatening aspects of health information because these aspects no longer pose a threat to people’s self-integrity. Because information that is better encoded should be easier retrieved from memory (i.e., more accessible; Ashcraft, 2006; Carlston & Smith, 1996; Higgins, 1996), we hypothesized that self-affirmation would increase the accessibility of threat-related cognitions under moderate self-threat conditions, and would decrease the accessibility of threat-related cognitions under low and high self-threat conditions.

Indeed, Study 4.1 showed that, in the moderate self-threat condition, self-affirmation increased the accessibility of threat-related cognitions. Contrary to expectations, in the low self-threat condition, self-affirmation had no effect. Study 4.2 replicated the impact of self-affirmation on the accessibility of threat-related cognitions for moderate threats to the self. In contrast, and in accordance with our prediction, self-affirmation decreased the accessibility of threat-related cognitions under conditions of high self-threat. Because information that is less accessible will be less likely encoded and recalled (Carlston & Smith, 1996; Higgins, 1996), these findings suggest that self-affirmed people are less likely to integrate threatening information into the self-system in situations in which they experience a high threat to the self. Moreover, Study 4.2 included a measure of implicit affect to test for the possibility that implicit affect accounts for the observed impact of self-affirmation. However, as in Study 3.3, affect did not account for the present findings; no effects were found on the measure of implicit affect.

The studies reported in Chapter 4 are the first to demonstrate the impact of self-affirmation in the area of less controlled, automatic cognitive responses to threatening health
information. Consistent with our theoretical analysis and extending our previous findings, the studies in Chapter 4 demonstrate that self-threat level also moderates the impact of self-affirmation on an implicit level. The findings underscore that self-affirmation may backfire on information processing for severe threats to the self.

Chapter 5 – How Self-Affirmation Affects Health Persuasion

Whereas the studies in Chapters 3 and 4 showed that self-affirmation decreases extensive, careful information processing under high self-threat conditions, Study 5.1 examined whether self-affirmation would similarly backfire on persuasive outcomes (attitudes, intentions to take precautions, and behavior) following a severe threat to the self. Although previous self-affirmation studies in the health domain have shown positive effects of self-affirmation on such persuasive outcomes (e.g., Harris & Napper, 2005; Jessop et al., in press; Sherman et al., 2000), we predicted that this would be limited to circumstances in which people experience a moderate threat to the self. Therefore, it was hypothesized that self-affirmation would increase persuasion under moderate self-threat conditions, and would decrease persuasion under high self-threat conditions. The results of Study 5.1 were consistent with this hypothesis. Under moderate self-threat conditions, self-affirmed participants reported more positive attitudes toward the health message, expressed higher intentions to take precautions, and requested more health information leaflets than non-affirmed participants, consistent with the predicted increase in persuasion. In contrast, under high self-threat conditions, self-affirmed participants reported less positive attitudes, expressed lower intentions, and requested less leaflets than non-affirmed participants, consistent with the predicted decrease in persuasion. The findings of Study 5.1 thus corroborate our reasoning that self-affirmation backfires for severe threats to the self.
Implications and Contributions

The research reported in this dissertation is the first that systematically examined the impact of self-affirmation on the processing of threatening health information under varying levels of threat to the self. Together, the present findings contribute to the understanding of how self-affirmation affects cognitive processing of self-threatening information in general, and how and when self-affirmation makes people more responsive to threatening health information in particular. The findings have implications for research examining the impact of self-affirmation on how people deal with threatening information as well as for research on the communication of health risk information.

Implications for Self-Affirmation Theory

Recently, different scholars have stressed the importance of examining potential moderating mechanisms to enhance our understanding of the effects of self-affirmation (Sherman & Cohen, 2006). The research reported in this dissertation has met this call by demonstrating that level of self-threat moderates the effect of self-affirmation on explicit and implicit measures of information processing. Specifically, whereas self-affirmation increases extensive, careful processing of information that is moderately threatening to the self, it decreases extensive, careful processing of information that poses a severe threat to the self. This finding has important implications for self-affirmation theory.

Although self-affirmation theory does not neglect the importance of self-threat level, the present findings do challenge its hypothesized outcomes when a self-threat exceeds a given self-affirmation. According to self-affirmation theory, “to effectively reduce the impact of a self-threat through self-affirmation, the self-images that are affirmed must be at least as important to perceived self-adequacy as the self-images that are threatened” (Steele, 1988, p. 291). This assumption implies that when the level of self-threat exceeds a given self-affirmation, self-affirmation should become less effective in counteracting the threat. Thus,
Steele’s (1988) theory predicts an ordinal interaction effect involving self-affirmation and self-threat (i.e., a reduction of the impact of self-affirmation under high self-threat conditions). In this dissertation, however, we argued that, under conditions of high self-threat, self-affirmation may actually reinforce concerns over self-integrity, rather than diminish them. That is, we predicted and found support for a disordinal interaction between self-affirmation and self-threat level (i.e., a reversal of the impact of self-affirmation under high self-threat conditions). Our findings thus imply that self-affirmation theory may be advanced by explicitly taking into account the possibility that providing severely threatened people with an indirect opportunity to self-affirm might backfire on responses to self-threats. Incorporating this notion also reconciles an apparent contradiction between previous work suggesting that self-affirmation generally increases extensive, careful processing of information that poses a threat to self-integrity (e.g., Cohen et al., 2000; Correll et al., 2004; Harris & Napper, 2005; Sherman et al., 2000) and other research findings indicating that self-affirmation can also decrease extensive, careful processing of threatening information (Koole et al., 1999; Schimel et al., 2004; Schmeichel & Martens, 2005).

This is not to say, however, that the moderating role of self-threat level as observed in the present research is at odds with the originally formulated theory. To the contrary, it seems to nicely fit with self-affirmation theory, and is also consistent with the premise that the self continually interacts with the environment (Kuhl, 2000; Kuhl & Koole, 2004; Nowak et al., 2000). Our findings suggest that self-affirmation promotes an information-processing mode that is most adaptive in a given context. When self-affirmation signals to a person that the self-system is able to cope with a threat, it increases extensive, careful information processing. In these conditions, self-affirmation stimulates integration of the threat into the self-system, thus enabling people to cope with a threat without freezing on its implications for self-integrity (cf. Sherman & Cohen, 2006). Conversely, when self-affirmation signals that
the self-system is not able to cope with a threat, it decreases the extent of information processing. In these conditions, self-affirmation ironically reinforces concerns over self-integrity. The increased discrepancy resulting from this unfortunate situation brings people back to where they started: on restoring the general integrity of the self. It is important to bear in mind that these opposite effects of self-affirmation both are a result of people’s strong desire to maintain global self-integrity, which is the main function of self-affirmation (Steele, 1988).

Another important contribution that follows from our results concerns people’s responses under the condition that the “very most important aspects of the self are threatened, so that there are no equally important alternative self-images” (Steele, 1988, p. 292). In this case, self-affirmations that are related to the provoking threat are assumed to be more effective than affirmations of less important, alternative self-images (Steele, 1988). Nevertheless, self-affirmation theory does not specify clear predictions about how people address the threat directly when such a highly important self-aspect is threatened. In order to restore a global sense of self-integrity in a direct manner, people can either defensively respond to the threat (e.g., by derogating threatening information), or they can adaptively respond to the threat (e.g., by accepting threatening information). Whereas health may be one of people’s most important self-aspects (e.g., see Chaiken et al., 1996; Sherman & Cohen, 2006), our results suggest that, when severely threatened, accommodating to the threat may be the best route to self-affirmation; in the absence of a self-affirmation manipulation, participants in our studies that faced a severe self-threat were quite responsive to the health risk information.

Implications for Health Persuasion

Previous research suggested that incorporating a self-affirmation in a health promotion campaign, for instance, by encouraging receivers of health promotion messages to reflect on a
personally important value could increase the effectiveness of these campaigns (e.g., Sherman et al., 2000). However, the research reported in this dissertation underscores the importance of carefully attending to self-threat level before deciding to adopt such a strategy. When people feel moderately threatened, self-affirmation may have positive effects on message processing and persuasion. Consistent with previous findings (e.g., Harris et al., 2007; Harris & Napper, 2005; Reed & Aspinwall, 1998; Sherman et al., 2000), our research suggests that, under these conditions, self-affirmation increases extensive, careful processing of health risk information, and promotes positive attitudes toward the health information, increases intentions to take precautions, and is likely to result in adaptive behaviors. However, when people feel highly threatened, self-affirmation seems to be a risky strategy that may decrease extensive, careful processing of important health information. Moreover, our research suggests that this decreased processing may backfire on people’s attitudes toward the health information, intentions to take precautions, and may result in maladaptive behaviors.

Nevertheless, many health promotion campaigns target people who are already aware that they are at-risk for the targeted outcome due to the way they act (e.g., smokers). Given that our research suggests that people are likely to feel only moderately threatened when they are classified as “at-risk” based on their actual behavior, self-affirmation may prove to be valuable in a real-world context. This would however require that frequently used self-affirmation procedures, which are sometimes relatively time-consuming to operationalize or lengthy to complete (e.g., writing about a personally important value), should be adjusted for more practical use (cf. Jessop et al., in press; McQueen & Klein, 2006). In this light, it is encouraging that a recent study succeeded to integrate a brief self-affirmation task into the text of a health promotion leaflet with positive effects on health-related cognitions and behavior (Jessop et al., in press). Additionally, health promotion campaigns using the internet and interventions providing tailored health information (e.g., Cassell, Jackson, & Cheuvront, 2006).
may relatively easy incorporate personalized self-affirmation tasks that could bring added value.

Importantly, however, the research reported in this dissertation suggests that when interventions provide people with tailored feedback regarding their high vulnerability to a health risk, employing a self-affirmation may backfire as recipients of such vulnerability information are likely to feel highly threatened. To the contrary, when severely threatened, people seem to be quite responsive to the health risk information without a self-affirmation. Our findings showed that under these circumstances, non-affirmed participants carefully processed the threatening health information, and were more likely to adaptively respond to this information than those who were self-affirmed. It should be emphasized that this finding contradicts the notion that people at-risk usually respond defensively to health risk information (e.g., Croyle et al., 1997; Kunda, 1987; Liberman & Chaiken, 1992).

Related to this issue, our findings suggest an inverted U-shaped relationship between vulnerability and information processing, with strongest defensive processing occurring for moderate self-threats. We tentatively propose that, under high self-threat conditions, reality constraints override simple rejection of the threatening information, thereby motivating intensive, careful information processing. This proposition is consistent with the idea that motivated reasoning is constrained by reality and rules of inference (Kunda, 1987; Pyszczynski & Greenberg, 1987). Of course, future research is needed to empirically test this account.

The currently observed pivotal role of self-threat level in response to threatening health information is consistent with previous research showing that the processing of health information mainly varies as a function of perceived vulnerability, rather than perceived or actual severity of the health risk (Das et al., 2003; De Hoog et al., 2005; Kruglanski & Klar, 1985; Weinstein, 1988). In the studies reported in this dissertation, we used different health
risks that likely differed in perceived severity. However, across studies, vulnerability (i.e., self-threat level) had a similar impact on health information processing, regardless of the actual severity of the health risk (i.e., type 2 diabetes, intestinal cancer, RSI, stress, or toxic beauty products). Consistent with previous research (e.g., Das et al., 2003; De Hoog, Stroebe, & De Wit, 2007), the present work thus suggests that when a health campaign succeeds in making its target audience feel highly vulnerable to the depicted health risk, rather than simply stressing the severity of this risk, it should be effective in changing people’s health-related cognitions and behaviors.

**Potential Limitations and Future Directions**

The research presented here provided a first systematic demonstration that self-threat level moderates the impact of self-affirmation on the processing of threatening information. Although we exclusively focused on the effects of self-affirmation and self-threat level within the domain of health messages, we believe that the findings reported in this dissertation extend to other domains as well. First, although most research has reported that self-affirmation increased cognitive openness to self-threats across a wide variety of domains and research paradigms (see Sherman & Cohen, 2006), there is evidence that self-affirmation can also decrease cognitive openness to self-threats (e.g., Koole et al., 1999; Schmeichel & Martens, 2005). Second, there is also evidence from other research domains that the effects of self-affirmation resources such as self-esteem are moderated by level of self-threat (Heatherton & Vohs, 2000; Vohs & Heatherton, 2001, 2003, 2004). In particular, self-threat level may be an interesting candidate in resolving similar empirical inconsistencies regarding the effects of self-esteem on responses to threats from cognitive dissonance (see Sherman & Cohen, 2006). However, future work is required to empirically establish whether the
moderation of self-affirmation effects by self-threat level applies to other research domains than the processing of health-related information.

In this dissertation, we both employed measurements of vulnerability and manipulations of vulnerability to a health risk to induce different levels of threat to the self. In Chapter 3, we reported a study that indeed confirmed that using these different methods enabled us to create the different levels of self-threat necessary to test our hypothesis. Future studies may want to manipulate the three levels of self-threat within one study, and cross this with a manipulation of self-affirmation. Such an approach would further warrant the reliability of the findings in this dissertation. However, the approach taken in this dissertation was motivated by the observation that previous research on self-affirmation in the health domain all employed the measurement method (e.g., Harris & Napper, 2005; Reed & Aspinwall, 1998; Sherman et al., 2000). By combining the different methods to induce different self-threat levels in our research, we could test the impact of self-affirmation on health information processing under conditions comparable to this previous research as well as extending it to conditions that induced higher levels of self-threat.

An important extension of the research presented here is to examine the motives underlying the effects of self-affirmation. Recent research suggests that - when not particularly threatened - self-affirmation prior to exposure to information may increase people’s confidence in their current views, thereby obliterating the motivation to process the information (Briñol et al., 2007). Under moderate self-threat conditions, self-affirmation presumably restored global self-integrity and increased the motivation to extensively, and carefully process the information (e.g., Correll et al., 2004). In this dissertation, we suggested that self-affirmation might reinforce concerns over self-integrity under high self-threat conditions, thus increasing feelings of psychological discomfort rather than decreasing them (Galinsky et al., 2000). Although the obtained findings are consistent with this interpretation,
our work is an initial investigation that did not directly test this account; therefore, future research is needed to test potentially mediating processes. For instance, future studies could measure the level of psychological discomfort participants experience following self-affirmation under varying levels of self-threat by including a self-report measure of psychological discomfort or a physiological measure of arousal (e.g., skin conductance; Elliot & Devine, 1994).

Related to this issue is the question how to ascertain whether or not people are self-affirmed. Theoretically, reflecting on personally important values should enable people to restore a global sense of self-integrity (Steele, 1988). However, to date, compelling quantitative manipulation checks are virtually absent in self-affirmation research (McQueen & Klein, 2006). If anything, studies (although not all) employing the AVL-subscales checked whether self-affirmed participants more often endorsed the manipulated value than those who were not self-affirmed. A few other studies included a single-item measure of self-feelings to check the effectiveness of the self-affirmation manipulation (Cohen et al., 2000, Study 3; Sherman et al., 2000, Study 1). In Harris and Napper (2005), independent judges rated the quality of the value essays written by the participants as a manipulation check. Most of the time, however, studies inferred the success of their manipulation from the obtained and predicted effects on the dependent measures (McQueen & Klein, 2006).

Recent research addressed this point by developing items that more systematically capture the degree to which participants are self-affirmed or not (Napper, Harris, & Epton, 2009). This research suggests that self-affirmed participants focus more on their positive, valued and important self-aspects, have more positive self-appraisals, and may feel less inferior than non-affirmed participants. If one takes these dimensions as indicative of the extent to which people view themselves as “adaptively and morally adequate” (Steele, 1988, p. 262), these findings indeed suggest that a manipulation of self-affirmation enables people
to restore a global sense of self-integrity. Future studies may benefit from including such measures to assess the success of the self-affirmation manipulation. Moreover, if self-affirmation reinforces concerns over self-integrity under high self-threat conditions, we would predict self-affirmation to have a negative impact on such a measure.

Importantly, awareness of the self-affirmation process has been argued to moderate the impact of self-affirmation (Sherman & Cohen, 2006). Since the way in which these newly developed items are framed may make participants aware of the purpose of the self-affirmation task (e.g., “The questionnaire made me think about positive aspects of myself”), a manipulation check may undermine the effectiveness of the manipulation, thereby making it difficult to test whether the proposed aspects mediate the effect of self-affirmation on responses to self-threats (Napper et al., 2009). Future research may therefore focus on developing more implicit manipulation checks. For instance, measuring participants’ reaction times to concepts related to the attributes proposed by Napper and colleagues might provide insight into whether self-affirmation makes particular self-defining concepts more accessible. Moreover, since self-affirmations are assumed to produce their effects in a non-conscious, subtle way (Sherman & Cohen, 2006), developing implicit manipulation checks of self-affirmation may be the most important direction for future research on this issue.

Another important question that follows from the research reported in this dissertation and previous research on self-affirmation concerns the role of mood. Our research ruled (self-reported and implicit) mood out as an alternative explanation for the observed effects of self-affirmation, consistent with most previous studies (see Sherman & Cohen, 2006; Steele, 1988), showing that mood does not account for the self-affirmation findings. Nevertheless, one study that used a different implicit measure showed that self-affirmation did influence implicit affect (Koole et al., 1999). Moreover, both self-affirmation and a positive mood seem to operate as a resource that people use to deal with threatening information, and similar
effects on persuasion have been demonstrated (e.g., see Das & Fennis, 2008; Raghunathan & Trope, 2002). Furthermore, mood may play an important role in self-regulatory processes (e.g., Aspinwall, 1998; Raghunathan & Trope, 2002) and in the integration of new information into the self-system (Baumann & Kuhl, 2002, 2003; Bolte et al., 2003). Thus, disentangling the effects of self-affirmation and mood constitutes an important agenda for future studies.

**Concluding Remarks**

In this dissertation we investigated how self-affirmation affects the processing of threatening health information. The results from the studies presented in this dissertation consistently show that self-affirmation may promote or impede extensive, careful processing of threatening health information depending on the level of self-threat. When moderately threatened, self-affirmation increases extensive, careful processing of relevant health information, making people more responsive to this personally important information. However, when facing a severe threat, self-affirmation decreases extensive, careful processing of relevant health information, making people less responsive to this personally important information. By investigating this topic, we hope to have contributed to our understanding of how and when self-affirmation makes people more responsive to threatening health information.