Abstract

This thesis investigates the effects of temporal frame and social distance on the effectiveness of message persuading HPV vaccination and on how various health beliefs are considered in forming vaccination intention. Using the Construal Level Theory (CLT), the Theory of Planned Behavior (TPB) and the Health Belief Model (HBM) as theoretical frameworks, this study examines the effects of framing HPV infection risk using different temporal frames and different social groups on (1) the judgment of potential risk, (2) the evaluation of vaccination, (3) the intention to get vaccinated, (4) how attitude towards the vaccination, subjective norm of the vaccination, perceived controllability of finishing the vaccination and self-efficacy affect vaccination intention, and (5) how beliefs about the benefits and costs of the vaccination affect attitude, subjective norm, controllability, and self-efficacy. A 2 (temporal frame: Year frame vs. Day frame) × 2 (social distance: Women in General vs. Female Students) between-subject factorial experiment was conducted on 150 college female students to test the research hypotheses. Data were analyzed with ANOVAs and moderated multiple regressions. In addition, this study tested an integrated model that combines TPB and HBM variables to predict vaccination intention as an explorative analysis.

Results revealed that: first, using shorter temporal frame and more proximal social group to describe the infection risk caused higher level of perceived threat than longer temporal frame and more distant social group did; second, more proximal social distance led to stronger intention of receiving the vaccine than more distant social distance did; third, shorter temporal frame and closer social distance caused more attention to be put on the “how” aspects (e.g., perceived costs) of the vaccination, whereas longer temporal frame and more distant social distance caused more weight to be put on the “why” aspects (e.g., perceived benefits). Furthermore, the integrated model was proved to be an effective model in explaining the variation in college female
students' vaccination intention.

Practically, these findings imply that (1) using shorter reference time period and more proximal social group to indicate the infection risk could be more effective in inducing perceived threat; (2) because temporal frame and social distance have impacts on the relationships among the health beliefs, the evaluation of the beliefs, and the intention, it is suggested that message persuading vaccine adoption could underline specific attributes of the vaccination behavior in conjunction with information about the reference time period and social distance of the HPV risk; (3) an integrated model combining TPB and HBM components may provide a more thorough explanation for understanding college female students' intention to accept HPV vaccine.