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by Stefano Puntoni, Steven Sweldens and Nader T. Tavassoli

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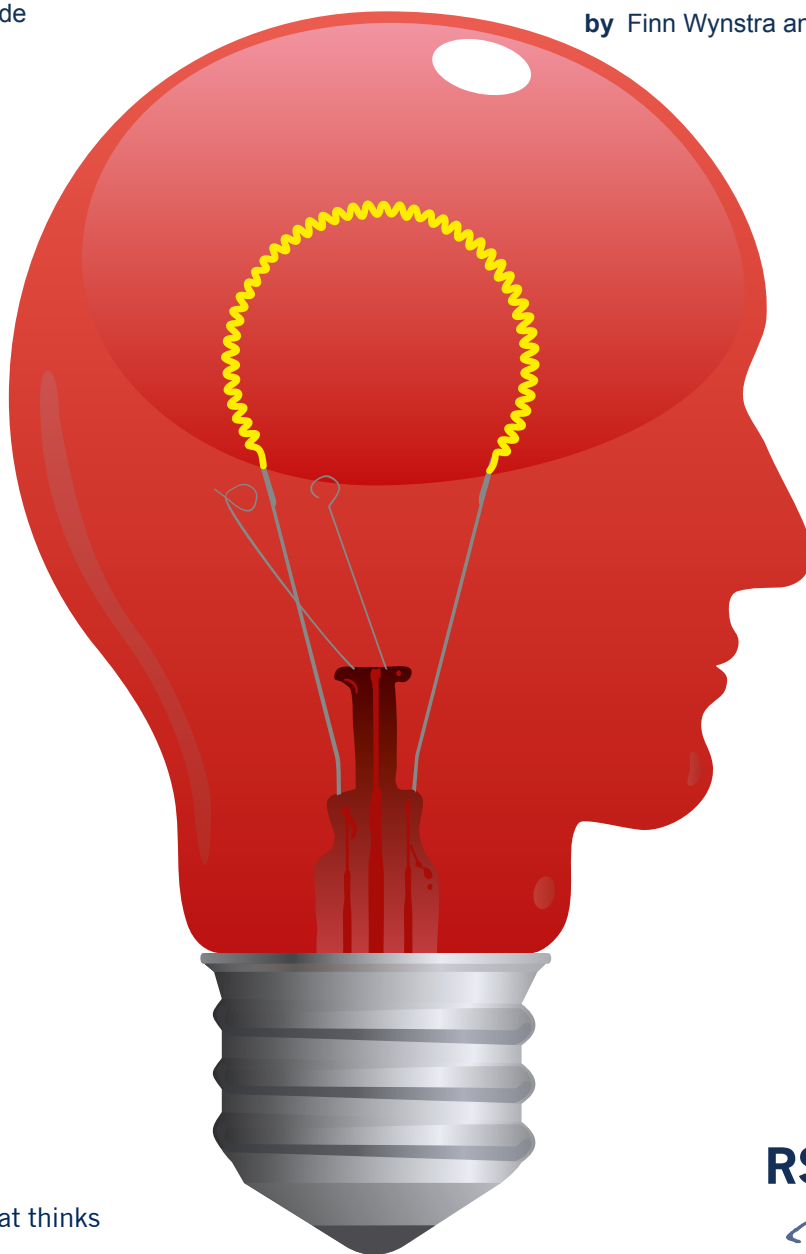
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Gender identity and breast cancer campaigns

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Concerning itself with understanding how marketing methods and tools can be of benefit to healthcare professionals, health marketing is an area of research that has grown substantially in recent years. Of much interest to the sector is whether awareness campaigns are effective in increasing the public's perceived vulnerability to any given disease.



The reason for interest in such campaigns is that as a rule, people are rarely inclined to take preventative measures against a disease unless they specifically perceive a threat to themselves. Whilst many medical conditions can affect everyone, others may be related to lifestyle – illnesses associated with smoking or overeating, for example – or they can be gender specific, such as ovarian cancer in women and prostate cancer in men. It is the association between gender and the perceived threat of a disease that we set out to understand when embarking on our research.

Every one of us has a number of identities and roles that make up our personalities. Among others, these include ethnicity, class and gender. The identities we adopt depend on the environments in which we find ourselves. At work, we typically take on an identity that is different from our roles at home as parent or spouse.

Gender cues

Cues in the environment – words and colours, for example – can increase the importance of gender as an identity for the audience targeted. Marketers, long aware of this fact, use such cues extensively in advertising. When placing gender cues in healthcare messages about breast cancer to encourage women to be more aware of their femininity, our expectation was that these would make women feel more alert to the risks of the disease and their own vulnerability to it.

Instead, we witnessed the opposite effect: gender cues made women feel less vulnerable. The same contrary effect showed itself when using the same cues to encourage women to donate to gender-specific charities. Instead of increasing donations, gender cues actually made women feel less inclined to give.

Such counter-intuitive results require confirmation, which we established in studies conducted across a number of sample groups using different experiments and variables. This led us to the conclusion that, in the case of breast cancer, using cues to increase the importance of gender as an identity for women can have a negative effect.

This is very surprising as campaigns promoting awareness of breast cancer use gender cues extensively. Pink – associated as a feminine

colour – is widespread in such campaigns (for example, the slogan “Think pink”), and the pink ribbon is synonymous with the fight against the disease.

Research insights

Volunteers participated in a series of what they believed were unrelated studies: the purpose being to determine whether gender cues influenced how women perceived their vulnerability to breast cancer. The first study required participants to write two essays about either gender or another personal characteristic.

Next, our volunteers completed a health-related study in which we asked how they perceived their risk to various medical conditions including heart disease, lung and breast cancer. Our intention was to determine whether those writing an essay about gender provided relatively high or low personal risk estimates for breast cancer compared to the group whose essay topic was not gender-related. What we found is that the volunteers who had written about gender felt less likely to contract breast cancer than the second study group.

Continuing our research, we mocked up two magazine advertisements for breast cancer awareness. The first was gender neutral: it deliberately avoided use of the colour pink and language

that referred to women directly. For the second, we created a gender-focused advertisement that used the colour pink, including a pink ribbon, addressed women directly, and carried an image of a woman. The “pink” advertisement we had designed very much in keeping with those placed in the media by breast cancer charities.

gender-specific cause – ovarian cancer – were given.

Participants who had written essays about gender were about half as likely to donate to the gender-specific cause than those who had written about something else. From this we were able to conclude that gender cues can also influence the likelihood of whether

“Using cues to increase the importance of gender as an identity for women can have a negative effect.”

Those who saw the “pink” advertisement expressed a lower personal risk to contracting breast cancer than those who viewed the gender-neutral version. As with the results from our earlier studies, this was not what we expected. This caused us to wonder if there were behavioural consequences to asking the sample group about their perceived vulnerability to breast cancer straight after they had seen the advertisements.

To check for this we ran additional experiments. In one of these, when their essays had been completed, volunteers were told that as a reward for participation, a donation would be made on their behalf to a charitable cause. Several options including one

or not women will donate to gender-specific causes.

Two websites were the focus of attention in another study. One specifically had its content targeted at a female audience whilst the other was a general interest site. Three banner advertisements, one promoting make-up, another promoting breast cancer awareness, and a gender-neutral advertisement, were prominent on both sites.

Volunteers, having read the stories on each site, were questioned on what they had seen. We asked whether they could recall the banner advertisements and specifically their subject matter. Those seeing the breast cancer advertisement on the gender-specific ►

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website were significantly less likely to recall it than those viewing it in the neutral environment. The results show that, in addition to advertising copy, managers of breast cancer awareness campaigns must carefully consider the media context of their advertisements.

From this research, we learn that the presence of what appear to be innocuous gender cues commonly used in breast cancer awareness

The unexpected reactions in our studies stem from the fact that the gender cues used in breast cancer campaigns trigger defensive responses in women. Psychologists know that when dealing with information perceived as threatening, we sometimes cope through a process of denial. Another common response is to not acknowledge the threat or to try to rationalise it away.

cues that increase a woman's sense of self-worth.

Breast cancer messages designed to make a woman feel good about herself at the outset are less likely to trigger natural defence mechanisms. This is effective because we use self-esteem as a resource when coping with threats.

For those with responsibility for developing and promoting breast cancer awareness campaigns, understanding how the defence mechanisms work, learning how to avoid triggering them - or disabling them instead - will provide invaluable insights into how such campaigns can be made more effective. ■

“The use of the colour pink may have deleterious rather than positive effects.”

campaigns, such as the colour pink, may have deleterious rather than positive effects. These gender cues can create in women feelings that they are less vulnerable to breast cancer. Gender cues also cause less attention to be paid to awareness campaigns and create a situation where the target audience is less inclined to donate money to breast cancer causes.

Defence mechanisms

Breast cancer is a disease that women are understandably terrified of contracting. In one study, we asked participants how afraid they were of the disease and almost without exception the level of fear indicated registered at the end-point of our scale.

The gender cues used in breast cancer awareness campaigns remind women that they should be alert to what is a dangerously real and very frightening threat, one from which they could die. Hence, this is why we see evidence that such campaigns can trigger women's natural defence mechanisms.

So how can healthcare marketers develop more effective awareness campaigns? In some of our studies, we changed certain conditions in order to disable the defensive mechanisms of our volunteers. One way to achieve this is by allowing women to acknowledge their fear of the disease before asking how vulnerable to it they felt. Another method is to precede exposure to messages with

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