Towards a Framework for Understanding Enduring Transformational Consumption Choices: A Mental Health Perspective

Abstract

Mental health involves an individual’s capacity to benefit from satisfying interpersonal relationships and educational opportunities, and is also fundamental to wellbeing, quality of life and overall productivity. However, despite the increased efforts of government and non-government bodies in endeavouring to overcome issues of mental-ill health, it remains a foremost public health concern. This paper conceptualises mental-health services as offering enduring transformational consumption qualities and presents a theoretical framework for investigating the factors that influence consumers’ adoption of mental-health services classified in this fashion. Propositions to guide future research and implications for theory and practice are also presented to facilitate the adoption of mental health services.

Key Words: Transformational Consumption Choices, Mental-Health, Adoption, Theoretical Framework
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Introduction

Despite the increased effort from government and non-government bodies in enhancing awareness and adoption of mental-health services, it remains a foremost national health priority area for governments worldwide (AIWH 2012; CDC 2011). Mental-illness has a substantial impact for an individual at a personal and social level with long-term suffering of mental-illness including a heavy burden in human suffering (e.g. stigmatisation), increased exposure to health risks, reduced workforce participation, lower income, living standards and quality of life (Costello et al., 2006; Gibb et al., 2010). This being the case, the implications associated with mental ill-health of people in society will have a substantial impact on the individuals’ quality of life and influence the overall wellbeing of the community and a nation’s productivity. Therefore, intervening in the earlier stages of the onset of mental-ill health can assist in minimising the illness from becoming entrenched long term and also reduce cases of comorbidity (Slade et al., 2009).

In the mental-health service system, the private and public government and non-government services, in conjunction with community based services seek to encourage consumers to make enduring cognitive and behavioural lifestyle changes (FNHP, 2009). As such, we argue that mental health services can be conceptualised as offering in what we term an ‘enduring transformational consumption choice’ (TCC). Enduring TCCs’ occur when marketers within an organisation are able to package a collection of physical resources, services, skills and experiences in a way that provides consumers with opportunities to undertake enduring self-change (Kleine et al., 2009; Pine & Gilmore, 1999). Due to the nature of the self-change, the consumer will experience an enhancement in their life-journey, as it is believed that the transformation will have a profound influence on the consumer’s identity (See Brown, 2009; Kleine et al., 2009). Thus, an enduring TCC provides potential consumers’ with the opportunity in undertaking permanent identity change (Kleine et al., 2009). Whereby these identity-related perceptions provide a foundation for consumers’ evaluation of how the enduring TCC in question (e.g. Higher education, health-care services, defence and public service enlistment) will impact their self-meaning and ultimately their intention to adopt the offering (Kleine et al., 2009; Pine and Gilmore 1999).

Beyond the lack of scholarly attention in the domain of health and marketing examining factors influencing intention to adopt a mental health offering, an emerging body of research has been conducted within consumer behaviour to investigating consumers’ decision to adopt transformational offerings which provide a conceptually rich approach relevant to the adoption of services in the context of mental health. In this emerging literature, three empirical studies have examined TCC in the context of transformations as an outcome of consumption and transformation expectations. For example, Arnould and Price (1993) and Kleine et al. (2009) referred to self-transformations as occurring to individuals self-concept and identity change arising from the consumption of the service offering. In later work, Richins (2011) empirically examined the transformative expectations consumers form on the outcomes they believe they will attain from the purchase of a desired consumer good. Despite these studies making important advancements to our understanding of TCC, there is a need to further improve our understanding regarding the decision making processes of enduring TCC’s that are attainable to the consumer that is sustained over time. Therefore, the purpose of this research is to extend our understanding of the factors that influence consumers’
decision making toward the adoption of an *enduring* TCC’ within the context of mental-health services (e.g. government and non-government bodies) which benefits the individual’s quality of life and contribution to society. Such an understanding will assist in informing transformative consumer research strategies and policy to influence the decision making process in the adoption and provision of mental-health services for public policy makers.

### Theoretical Framework

This section highlights an integrated theoretical model aimed at capturing a wider array of interrelated antecedents. In doing so, the theoretical framework aims to provide an understanding on consumers’ behaviour toward the adoption of an enduring TCC offered by mental-health services (Figure 1). As such, the theoretical underpinnings of the framework are drawn from the TPB (Fishbien & Ajzen, 1975; Ajzen & Fishbien, 1980), transformation expectations (Richins, 2011), social identity theory (Tajfel, 1974) and transformative consumer research (TCR, Mick et al., 2012) in order to aid in explaining the intended behaviour of consumers in their decision to adopt a mental-health service.

#### The Role of Social Identity

As defined by Tajfel (1981) social identity theory is “the part of the individual’s self-concept which derives from their knowledge of a social group (or groups) together with the value and emotional significance of that membership” (p. 255). Therefore, the formation of an individual’s social identity emanates from their group membership (Ellemers et al., 1999) and also the groups to which the individual aspires to belong to (Sedikides & Brewer, 2001). Salient social identities function to provide guidance to consumers with regard to the appropriate cognitive and behavioural actions they should engage in (Terry et al., 1999). In doing so, consumers’ will assess their potential and current actions in group terms, in order to effectively signal not only to themselves but also to other members within the in-group of their belongingness, and thus validate their social identity (Hogg, 2000). Furthermore, through the process of assessing their actions through group terms, inter-group social boundaries are developed whereby consumers are aware of the distinctions between in-group
and out-group norms (Eagly & Chaiken, 1993). Thus, a consumer will be more inclined to engage in a target behaviour (e.g. adopting mental-health service care), if she or he perceives that this particular behaviour is in alignment with the norms and values of the in-group to which they are or desire to be a part of. This is due to social identity influencing the normative behaviour, whereby individuals are motivated to comply with group norms so as to maintain their sense of self (Hagger et al., 2007) and enhance their self-esteem (Hogg, 2000; Tajfel, 1974). Based on the literature regarding social-identity, we propose in Figure 1 that social-identity will influence intended behaviour through group identification and subjective importance of the group. Thus:

P1: Customers’ social-identity will positively influence their Attitude toward the Adoption of Mental-Health Service Care

The Role of Consumer Service Brand Awareness & Attitudes
Brand awareness refers to the familiarity and strength of consumers’ brand memory, which is reflected by the ease in which potential consumers’ are able to recognise and correctly associate the brand with a specific good or service (reference) within different conditions. Service brand awareness as discussed by Berry (2000) is developed through an organisations’ controlled marketing communications (i.e. advertising) and through uncontrolled external communications (i.e. word of mouth). Brand awareness is argued to play a critical role in consumer decision making as a result of its influence in consumers’ consideration set of brands and also on brand image (Keller, 1993; O’Cass & Grace, 2003). Specifically, an enhanced state of brand awareness is believed to increase the likelihood with which a brand enters into the consideration set of a consumer, whilst also influencing decisions made about consideration set brands, even in the instance when no brand image (association) is prevalent. Further, it is believed that the state of awareness consumers’ hold of specific brands assists in influencing the strength and formation of the image (association) of the brand in question (Keller, 1993). Based on the above discussion the following propositions are advanced:

P2: Consumer based brand awareness will positively influence the relationships between (a) attitude toward mental-health service care, (b) Attitude toward adopting mental-health service care and (c) mental health service image

Consumer attitudes are a critical variable in consumer behaviour and marketing research, due to its ability to predict consumers’ engagement in a specific behaviour (Um & Crompton, 1991), and also on its influence in understanding the actual behaviour performed by the consumer (Fishbien & Ajzen, 1972; Ajzen, 2001). Attitudes are determined by an individual’s personal beliefs of the salient outcomes and an evaluation of the outcomes associated with the specified object or behaviour (Ajzen, 1988, 1991). As such they are described as the degree to which an individual possess a positive versus negative feeling with regard to certain objects, behaviours, organisations, brands or an evaluation of these components (Eagly & Chaiken, 1993; Zajonc & Markus, 1982). The construction of an individual’s attitude occurs through their direct experience with the object or behaviour, and also through their exposure to knowledge and messages from external others, which may act to temporarily influence their existing values associated with a particular attitude structure (Reed et al., 2002). As such, it is inferred that when a consumer experiences a favourable attitude toward the service brand; it will have a direct transfer onto the consumers’ attitude toward the adoption of the target behaviour. Further, positive attitudes toward the service brand have found to influence their intention to adopt the service brand (O’Cass & Grace, 2003). Thus the following proposition is advanced:
P3: Customers favourable attitude toward mental health service care will positively influence the relationship between (a) attitude toward the adoption of mental-health service care and (b) their intention to adopt mental-health service care

An individual is more likely to form a positive attitude toward a target behaviour (e.g. condom usage), if he or she believes that adopting the behaviour will lead to positive outcomes (e.g. more enjoyable sex) and prevent or reduce the likelihood of negative outcomes (e.g. may prevent STI’s), thus influencing their intention to adopt the target behaviour (Ajzen 1991; Albarracin et al. 2001). Based on the above discussion, as shown in Figure 1, it can be argued that individuals’ with positive attitudes will positively influence their intention to adopt mental-health service care, in contrast to those with negative attitudes. This reasoning leads to the following proposition:

P4: Customers’ favourable attitude toward the adoption of mental-health service care, will positively influence their intention to adopt mental-health service care

The Role of Perceived Behavioural Control
An individual’s motivation to perform the target behaviour is dependent upon the degree to which they feel confident in their own ability to perform the behaviour successfully (Armitage et al., 1999; Kraft et al., 2005). Hence, it can be inferred that an increase (decrease) in an individual’s perceived behavioural control will have a resulting increase (decrease) in the intention and likelihood of their undertaking the specified behaviour (Ajzen 1991; Armitage & Connor 2001). Furthermore, if an individual believes that they possess the requisite skills, resources and opportunities, then his or her intention to perform the given behaviour will be high, even in the case that they have formed negative attitudes and/or subjective norms toward the performance of the behaviour. Given this understanding, we argue that an individual with a higher perceived internal and external control has a greater likelihood in performing the target behaviour, specifically their intention to adopt mental-health service care as shown in Figure 1. Thus:

P5: The perceived behavioural control of a customer will positively influence their intention to adopt mental-health service care

The Role of Transformation Expectations
Transformational expectations are centred upon an individual personal belief that the self and/or their life domain will be altered in both a momentous and meaningful way, as the result of purchasing and using a specified product or service (Richins, 2011). These expected transformations are unique to each consumer, and are varied across several life domains including improvements to the self, to the amount of pleasure experienced, to their interpersonal relationships, and to the ease and efficiency in which consumers would be able to manage life tasks. Given the conceptualisation of consumers’ transformational expectations, it is reasonable to determine that desirable or undesirable transformation expectations associated with the adoption and consumption of a specific target behaviour, service or good, will influence a customers’ attitude toward and intention to adopt

Hence, as shown in Figure 1, we argue that the transformational expectations customers’ have toward mental-health service care, will have a predictive influence on their attitudes toward and intention to adopt this transformative service. This reasoning leads to the following proposition:

P6: The transformation expectations will influence the relationships between (a) Attitude toward Mental-Health Service Care and (b) Attitude toward the Adoption of Mental-Health Service Care
The Role of Mental-Health Service Brand Image
The brand associations consumers form are developed through their exposure to information provided through referent others (e.g. family and friends), marketing communication from the organisation and prior experience with the service provider (Kimpakorn & Tocquer 2010). These brand association function to form a total impression and image of a variety of service brand offerings (Keller 1993). Subsequently, the overall service brand image that consumers form assists in determining the expected outcomes of the service offering (Bloemer et al., 1998) and as such function to influence consumers attitude and intention to adopt the service (Kandampully & Suhartanto, 2000). Empirical work in the mental-health arena have identified that the perceptions potential and current consumers have, has significantly influenced their intention to seek help (Rickwood et al., 2005). Specifically, studies have highlighted that individuals held negative brand associations to the provider that were regarded as a deterrent to the adoption of professional mental-health care (Wilson et al., 2005). These negative brands associations included the belief that the professional treatment would not help at all, credibility issues associated with the provider and the perceived stigmatisation of the provider (Banfield et al. 2012; Gulliver et al., 2010). However, studies have also indicated that individuals who held positive brand associations of mental-health service providers were more inclined to seek their professional help (Booth et al., 2004). Thus, due to the importance associated with images influence on consumer behaviour, we argue that service brand image in the mental-health service system is critical in influencing individuals attitudes and intention to seek help and adopt mental-health service care as shown in Figure 1. This reasoning leads to the following proposition:

P7: Customers positive image toward the mental-health service provider will positively influence the relationship between (a) Attitude toward Mental-Health Service Care and (b) Intention to Adopt Mental-Health Service Care

Conclusion, Implications and Future Research
The proposed study represents a starting point which seeks to provide new insights into TCCs’ as a theoretical lens to better explain the antecedents that influence customers’ decision to adopt an enduring transformation in the mental-health context. Further, this study answers the call to research to undertake TCR that enhances consumer well-being and quality of life (Bazerman, 2001; Mick, 2006; Ozanne & Saatcioglu, 2008), whilst also undertaking a study within a context that remains a key priority area health area domestically and internationally. The theoretical framework in this study advances the current literature in consumer behaviour, identity theory and the transformative consumer research domain by extending the works of Kleine et al., (2009), Richins (2012) and Terry et al., (1999) in the conceptualisation of enduring TCCs’. Furthermore, an analysis of the literature indicates that no empirical work to date have used and simultaneously tested the specific combination of constructs that are proposed in the context of this study.

The study also aims to shed light on the effective development and enhancement of the social-marketing management framework for mental-health service providers. Therefore, practical implications of the study aim to inform practitioners in the manner to which mental health offerings are positioned to adolescents, the development of message frames for promotional strategies and the changes to the accessibility of the service to the consumer, which enhance consumers’ adoption of mental-health service offerings. Although, this paper has synthesised and extended the existing research on TCCs’ in the context of mental-health offerings, refinement of the theoretical framework developed here is the next stage in understanding consumers’ decision to adopt a mental-health service.
References


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