Giving Empowerment and Gaining Compliance: The Effect of Dietary Prescription Types on Customers’ Compliance in Sport Service

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Fitness program contains exercise and dietary prescription. The success of weight loss through the use of the latter lies in customers’ compliance—their autonomous participation outside of the service organization (e.g., fitness center). However, little is currently known about how sport service providers can gain consumer compliance with their nutrition counselling. To bridge this scholarly gap, we investigate the impact of featured dietary prescriptions (i.e., empowered vs. paternalistic) on customers’ compliance intention. Further, the boundary condition for this effect is suggested.

Social cognitive theory—employed as the theoretical foundation of this research—posits that human behavior is a dynamic interaction between the environment, personal factors, and behaviors (Bandura, 1977). As an environmental condition in service creation and delivery, empowerment shifts consumers from passive to active participants (Auh et al., 2019). Empowered customers can select what behaviors to conduct in the service process (Fuchs et al., 2010). This discretion facilitates appreciating a sense of responsibility and control, so consumers put more resources into conducting empowered tasks (Macstravic, 2000). Thus, empowered (vs. paternalistic) dietary prescription might be more influential on customer compliance. As a psychological mechanism underlying this effect, social determination theory posits that when excessive control over individuals is avoided, perceived autonomy or psychological freedom would increase (Hesieh & Chang, 2016). Hence, empowered (vs. paternalistic) dietary prescription might lead consumers to indicate higher compliance intentions through increased perception of autonomy. Formally:

H1: Empowered (vs. paternalistic) dietary prescription will lead to a higher level of compliance intention.

H2: Perceived autonomy will mediate the influence of dietary prescription types on compliance intention.

Further, this mediation effect of autonomy may depend on customers’ self-efficacy. As a personal factor in social cognitive theory, self-efficacy is found to influence individuals’ perception and behaviors (Bandura, 1997; Ellen et al., 1991). Those with low levels of self-efficacy might feel more psychological freedom (i.e., autonomy) when paternalistic (vs. empowered) dietary prescription is given due to the uncertainty about their capabilities to organize and execute the courses of action. In contrast, those with a high level of self-efficacy might perceive more autonomy when empowered (vs. paternalistic) dietary prescription is conferred due to their belief in their ability to take initiative in their actions. Formally:

H3: Customers with a high (low) level of self-efficacy will perceive a higher level of autonomy when empowered (paternalistic) dietary prescription is conferred.

An experimental study (targeted N = 300) is in progress. A set of scenarios for manipulating two types of dietary prescription (i.e., empowered and paternalistic) is developed. Participants are instructed to report self-efficacy (Yim et al., 2012), perceived autonomy (Hsieh & Chang, 2016), and compliance intention. To test the three hypotheses, a moderated mediation analysis (SPSS PROCESS model 7; Hayes, 2013) will be employed with dietary prescription type as the independent variable, perceived autonomy as the mediator, self-efficacy as the moderator, and compliance intention as the dependent variable. Research findings, along with the theoretical and practical implications, will be discussed at the time of the presentation.