Understanding the Cognitive and Affective Mechanisms

that Underlie Proxy Risk Perceptions among Caregivers of Asthmatic Children

James A. Shepperd1, Nikolette P. Lipsey1, Thorsten Pachur2, and Erika A. Waters3

1 Department of Psychology, University of Florida

2 Max Plank Institute for Human Development, Berlin

3 Washington University in St. Louis

**Abstract**

**Objective:** Medical decisions made on behalf of another person—particularly those made by adult caregivers for their minor children—are often informed by the decision maker’s beliefs about the treatment’s risks and benefits. However, we know little about the cognitive and affective mechanisms influencing such “proxy” risk perceptions and about how proxy risk perceptions are related to prominent judgment processes and phenomena. **Methods:** Adult caregivers of minor children with asthma (*N*=132) completed an online, cross-sectional survey assessing (1) cognitions and affects that form the basis of the availability, representativeness, and affect heuristics, (2) endorsement of the absent-exempt and the better-than-average effects, and (3) proxy perceived risk and unrealistic comparative optimism of asthma exacerbation. We used the Pediatric Asthma Control and Communication Instrument (PACCI) to assess asthma severity. **Results:** Respondents with higher scores on availability, representativeness, and negative affect indicated higher proxy risk perceptions and lower unrealistic optimism (for representativeness only), irrespective of asthma severity. Conversely, respondents who showed a stronger display of the better-than-average effect indicated lower proxy risk perceptions, but did not differ in unrealistic optimism. The absent-exempt effect was unrelated to proxy risk perceptions and unrealistic optimism. **Conclusion:** Heuristic judgment processes appear to contribute to caregivers’ proxy risk perceptions and unrealistic optimism about their child’s asthma exacerbation risk. Moreover, the display of other, possibly erroneous, judgment phenomena appears to predict caregiver risk perceptions. Designing interventions that target these mechanisms may help caregivers work with their children to reduce exacerbation risk.

\*\*\*Article available on request from the author.\*\*\*