

## COMPARISON AS A BASIC COMPONENT OF COMMUNICATION RESEARCH: A CALL TO ACTION

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Gerend and Shepherd (2012) recently published an article comparing the predictive efficacy of two health behavior theories: the health belief model and the theory of planned behavior. In other words, the goal of the article was to test which theory explained more variance in the outcome (HPV vaccination, in this case). Many scholars have published strong arguments in favor of this research design (e.g., Noar & Zimmerman, 2005; Slater & Gleason, 2012), yet comparative studies remain relatively rare. So rare, that Brewer and Gilkey (2012) felt the need to write a commentary about Gerend and Shepherd's work primarily to argue that scholars were failing to pursue this essential research design.

The benefits of a comparative design have been articulated by others (Slater & Gleason, 2012), but it appears that communication scholars are still struggling to consistently deliver this form of research. This is unfortunate as comparative designs should be standard for our discipline. In fact, every issue of our top-tier journals should feature articles reporting comparative designs. Of course, other fields are also struggling with this research design which creates an opportunity for leadership if we can seize it.

Four obstacles may explain this situation. First, communication researchers

are failing to integrate comparison into their design. There are several ways to design sound theory comparisons, but the basic approach is to identify two or more theories and include high quality measures for all of the variables postulated by those frameworks. For example, if a scholar wants to compare the health belief model and the theory of planned behavior, then he/she should

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measure perceived threat (susceptibility, severity), barriers, benefits, self-efficacy, cues to action, attitudes/beliefs, social norms, and behavioral control. One can choose to compare them as descriptive models (e.g., Gerend & Shepherd, 2012) or as process models explaining the relationship between independent and dependent variables (e.g., Jones et al., 2014).

Second, communication researchers may struggle to identify theories for comparative research. Theories that would clearly benefit from comparison include (but are not limited to) the health belief model, the theory of planned behavior, the theory of

normative social behavior, and the extended parallel process model.

Third, we need more theories that clearly articulate variables that explain the relationship between message features and outcomes. The development of those theories should include comparison. The optimal way to develop a new theoretical framework is to demonstrate how it compares to an existing framework. Does Jake's "Theory of Wonderful Communication Wizardry" outperform the theory of planned behavior at

predicting intentions to decrease texting and driving?

Fourth, we lack systematic pressure and encouragement to produce this research. One way to systematically increase comparative research designs is to cultivate an expectation at the thesis/dissertation level. If advisors believe that the field will expect to see comparison in a thesis/dissertation, then they will push their students to include this design feature. Alternatively, top-tier journals could devote space exclusively for the publishing of comparative research.

### Research Questions:

RQ1: Which theoretical framework explains the most variance in behavioral outcomes: the health belief model, the theory of planned behavior, the theory of normative social behavior, or the extended parallel process model?

RQ2: Is there an alternative theoretical framework that explains more variance in behavioral outcomes than the health belief model, the theory of planned behavior, the theory of normative social behavior, or the extended parallel process model?

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