The purpose of the study was to examine cross-cultural variation in the extent to which health judgment (i.e., self-rated health and health judgment of others) reflects actual physical health status and the culture-specific concept of health. Among possible mechanisms of the cultural effects on health judgments, cross-cultural differences in cognitive styles and lay theories of health were explored. A cultural priming methodology was used to experimentally replicate the differences between East Asian and European/Western cultures in the context of health judgments and related outcomes. In the current study, 253 East Asian American undergraduate students were randomly be assigned either to an East Asian (EA) or a European/Westerner (EW) condition; participants viewed a series of iconic images of the corresponding culture. Following the experimental manipulation, participants completed health judgments measures and cognitive style measures. Differences between those assigned to the EA and EW priming conditions were not found with respect to lay theories of health, cognitive outcomes and self-rated health. Further, there was little support for the proposed mediators, mediating the cultural effects on health judgments. Results of the multifactorial analysis of variance and a latent variable approach provided some support for the effect of cultural priming on the health judgment of others. This
project was a first attempt at replicating cross-cultural differences in health judgments and cognitive styles experimentally. The findings regarding potential cultural differences in illness perception and the subsequent effect on health judgments are certainly of importance. It remains to be seen whether similar cultural differences will be observed with respect to self-rated health, using older populations with a larger range of health-related experiences. Nonetheless, the statistically insignificant findings are also consistent with the dynamic and integrative nature of cultures.