

# Individualism and Authoritarianism Shape Attitudes Toward Physician-Assisted Suicide<sup>1</sup>

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We investigated the relation between value orientations and attitudes toward physician-assisted suicide (PAS) in 267 United States college students. We predicted that individualistic values, especially those having to do with control and self-determination, would lead to favorable attitudes toward PAS, and authoritarianism would lead to a rejection of PAS. A positive association between individualism and approval of PAS emerged which was moderated by attitude importance: People who did not endorse individualistic values did not have favorable opinions of PAS, regardless of how important the issue was to them. However, for individualists, PAS attitudes and attitude importance were positively related. Independent of individualism, authoritarianism was negatively related to PAS attitudes. Primarily for low authoritarianism, we found a correlation between attitude and attitude importance. The discussion focuses on the value-expressive function of death-related attitudes.

The issue of euthanasia and physician-assisted suicide (PAS) has received increasing attention over the years, in the public press as well as in scholarly literature (e.g., Pfeifer & Brigham, 1996). Medical and legal practices have changed as views of euthanasia and PAS have become more positive (e.g., Bachman et al., 1996; Hessing, Blad, & Pieterman, 1996; Ostheimer, 1980). Many people now view PAS as a matter of self-determination whereby terminally ill individuals take control over their own lives, rather than expose themselves to the uncertain and often painful process of dying under the control of others (cf. Quill, 1993). As a result, they conclude that it is neither illegitimate nor immoral that individuals, in order to avoid more personal suffering, decide to

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terminate their existence. In this research, we investigate the ideological underpinnings of such attitudes toward PAS. Specifically, we propose that they serve a value-expressive function for individuals who hold individualistic or authoritarian values.

### Individualism

Starting with the seminal work of Hofstede (1980), cross-cultural research has established individualism–collectivism as an encompassing framework to study cultural differences. Research within this paradigm has shown that individualists emphasize independence, self-reliance, and agency, rather than social integration or communion, and tend to pursue their self-interests rather than collective goals (e.g., Kim, Triandis, Kâgıtçibaşı, Choi, & Yoon, 1994; Triandis, 1995). Further, there is overwhelming consensus that the United States can be characterized as a highly individualistic society (e.g., Bellah, Madsen, Sullivan, Swidler, & Tipton, 1985; Hofstede, 1980; Kemmelmeier & Winter, 1998; Triandis, 1995). This implies not only that Americans are likely to endorse individualistic values, but also that in the United States individualism is a highly potent dimension that will shape Americans' social perceptions and behavioral choices (Dion & Dion, 1991; Han & Shavitt, 1994; Peng, Kemmelmeier, Burnstein, & Manis, 1996). We can expect, therefore, that individualism has an impact on one's views of life and death (cf. Mount, 1983).

In the United States, the issue of PAS is commonly framed in terms of individualistic values. Public discussion, for instance, focuses on the question to what extent individuals should have control over their own lives and an individual's right to die to end personal suffering. This framing of the PAS issue is not surprising, in light of a culture that champions individualism as a supreme cultural value.

Although individualism is highly pervasive in the United States, within the most individualistic culture there is considerable variation in the extent to which members of the culture endorse individualistic values, and this variation may be reflected in Americans' perceptions of the issue of PAS. Specifically, American individualists might be inclined to respond to the issue differently than those Americans who do not strongly endorse individualist values. We hypothesize that because people are able to express their values through attitudes toward PAS, individualism is an antecedent of positive attitudes toward PAS. That is, the stronger the person's individualistic values, the more favorable the attitude toward PAS. In line with this reasoning, Kears and Harris (1981-1982) in a national survey in the United States identified distal indicators of individualism and showed that they were associated with positive attitudes toward euthanasia, legal abortion, suicide, and PAS. Although supportive of the present hypothesis, this study did not assess individualist values, but relied on demographic variables

and attitudes about issues such as child-rearing or gun control, which are only indirectly related to individualism. Further, Kearl and Harris used an attitude index that collapsed respondents' evaluations of varying death-related issues, including suicide, abortion and euthanasia. This approach is problematic as it ignores the important distinction between PAS and euthanasia, and does not allow a detailed analysis of the basis of attitudes toward each of the two.

Another pertinent study by Lee, Kleinbach, Hu, Peng, and Chan (1996) compared a sample from a collectivistic society (China) with one from an individualistic society (United States) and found no differences in attitudes toward euthanasia. Moreover, in their American sample, euthanasia attitudes were not associated with their measure of traditional family values. This result may seem somewhat surprising, as previous research has documented that more conservative individuals reject euthanasia and PAS (Ho & Penney, 1992; Ross & Kaplan, 1993-1994). However, although conservatism may be linked to traditionalism in general, traditional values pertaining to the family may imply little about one's PAS attitudes unless the issue of PAS is framed as an issue relevant to the family or a family-like collective.

As mentioned earlier, in American culture, the discussion of euthanasia and PAS mainly centers around individual suffering and an individual's right to die and rarely on the family or the community (Lee et al., 1996). Hence, in the American context, endorsement of individualistic values should be associated with favorable attitudes toward PAS, whereas endorsement of family or collectivist values need not be. It is important to note that individualism and collectivism have been shown to not be opposite ends of the same continuum, but instead two orthogonal dimensions. An individual's position on one dimension has little or no relationship to his or her position on the other (Bontempo, 1993; Gelfand, Triandis, & Chan, 1996; Oyserman, 1993; Singelis, 1994).

#### Authoritarianism

In the present research, we also examine right-wing authoritarianism as another possible antecedent of attitudes toward PAS (cf. Altemeyer, 1988). Authoritarianism continues to be a substantial predictor of attitudes toward contemporary social and political issues (Doty, Winter, Peterson, & Kimmelmeier, 1997; Peterson, Doty, & Winter, 1993). With its emphasis on law and order, adherence to religious and moral traditions and acceptance of traditional leadership authoritarianism seem incompatible with the notion of self-determination and individual control in matters of life and death (cf. Eckhardt, 1991; Gelfand et al., 1996). Since authoritarianism emphasizes the observance of accepted rules and standards as embodied in conventional morality and religion, and since PAS is considered morally problematic and is rejected by most religious traditions in the United States, individuals high in authoritarianism should be opposed to PAS.

### Individualism and Authoritarianism: Independent or Joint Effects?

Theorists generally agree that authoritarianism is incongruous with the pursuit of individual rights and liberties (e.g., Flanagan, 1987). Hence, it may not be surprising that Gelfand et al. (1996) proposed that authoritarianism is the conceptual opposite of individualism (see also Duckitt, 1989). If this is true, the effects of individualism and authoritarianism should not have independent effects. Rather, in a strong version of Gelfand et al.'s (1996) hypothesis, these two concepts are opposite ends of the same underlying dimension; hence, they should be redundant, and controlling for one dimension should eliminate the effects of the other. In a weaker version of this hypothesis, one would expect the effects of high individualism to be particularly pronounced when paired with low authoritarianism, and vice versa. The present investigation will explore these possibilities and contrast it with the assumption that there is no intrinsic link between the two concepts.

### Value Relevance and the Role of Attitude Importance

We propose that PAS attitudes serve a value-expressive function for individualists and authoritarians (Herek, 1986; Katz, 1960). Values refer to "general and enduring standards" in people's belief systems (Kinder & Sears, 1985, p. 674) that, once engaged, may lead people to take a particular position on social issues (Rokeach, 1973). This prediction is based on a vast body of literature showing that individuals are motivated to avoid cognitive inconsistencies that may emerge from contradictory implications of values and opinions on specific issues (e.g., Abelson et al., 1968). In particular, Heider's (1958) balance theory and Festinger's (1957) dissonance theory have been found useful to explain the consistency between value orientations and social perceptions (e.g., Granberg, 1993; Judd & Krosnick, 1989).

Another line of research suggests that attitudes toward specific social issues are derived from or constrained by ideologies (Converse, 1964, 1970). That is, people's commitment to abstract values and ideas serves as a template to help them understand and interpret concrete social and political issues. Note that both consistency approaches and ideology approaches predict that social values and opinions on issues should be closely related. Since public discussion in the United States frames the issue of PAS as one of self-determination with regard to one's own death, *individualists may express their personal values in the way they view the issue of PAS. Specifically, individualism should be associated with positive attitudes toward PAS; likewise, authoritarianism should be associated with a rejection of PAS.*

From early on, research on attitudes has found that the strength with which people hold certain attitudes and beliefs has important implications for attitude

structure and formation. Generally speaking, people's value orientations have a stronger impact on how they frame an important than an unimportant attitude issue (Abelson, 1988; Boninger, Krosnick, Berent, & Fabrigar, 1995).<sup>3</sup> This prediction holds, regardless of whether one favors a consistency or ideology approach to account for the attitude-value congruency. For example, cognitive-dissonance theorists have argued that the intensity of discomfort associated with cognitive inconsistency is, to a large extent, a function of the subjective importance of the two attitudes (Festinger, 1957). Likewise, people are more likely to elaborate on the specific implications of their values for the perception of social issues to the extent that these issues are central to them (Judd & Krosnick, 1989; Krosnick, 1988, 1990). In short, if people do not care about an issue, they are less likely to express an attitude that is tightly linked to their values than if they do care about it.

Rogers (1996), while pointing out that virtually no research is available on the structural underpinnings of death attitudes, suggested attitude importance as a key moderator of the relationship between PAS attitudes and an individual's value orientations. In the present research, we follow this suggestion and hypothesize that the strength of the relationship between people's feelings about PAS and their degree of individualism or authoritarianism should depend on how important the issue of PAS is to them. Hence, individualism should lead to positive PAS attitudes and authoritarianism should lead to negative PAS views to the extent that the issue of PAS itself is important to the person. Statistically, this should result in an interaction between attitude importance and individualism, and an interaction between attitude importance and authoritarianism. At the same time, collectivism should be only weakly or not at all related to PAS attitude because in the American context, the issue of PAS is not framed as relevant to the welfare of the family, community, or society.

## Method

### *Overview*

Participants completed closed-ended measures assessing their attitude toward PAS and the subjective importance of this attitude. They then filled out measures of individualism, collectivism, and authoritarianism. We also solicited open-ended responses from our participants to examine what concerns about PAS would come to mind spontaneously, and to determine how these top-of-the-head responses are related to the value dimensions examined here.

<sup>3</sup>Although there is a growing literature on attitude strength (e.g., Petty & Krosnick, 1995), it is important to note that this concept is by no means homogeneous, but describes a collection of often *only moderately correlated dimensions* (Krosnick et al., 1993). Here we focus on attitude importance as a dimension that figures centrally in virtually all conceptualizations of attitude strength.

### Participants

A total of 274 undergraduate students at the University of Michigan participated in the present study in November 1995 in exchange for course credit. The majority of the respondents were female (64.4%).<sup>4</sup> The age range for the total sample was 17 to 23 years ( $M = 18.8$ ,  $SD = 1.03$ ). The ethnic and racial composition of the sample was typical for the student population at the University of Michigan (70.9% European American, 9% African American, 12.2% Asian American, 4.8% Latino/Latina).

### Materials

*PAS attitudes.* Since no published measure of attitudes toward PAS was available, we adapted four items from Lee et al.'s (1996) General Euthanasia Attitude Measure (derived from Rogers, 1996), replacing the word *euthanasia* with *doctor-assisted suicide*.<sup>5</sup> Sample items included "[PAS] is acceptable if the person is old and has a terminal illness," and "[PAS] is a humane act." We generated two additional items: "[PAS] should be acceptable in society" and "[PAS] is part of the individual's right to control his or her own fate." The resulting six-item scale was very reliable (Cronbach's  $\alpha = .86$ ). A principal-components analysis confirmed that a single factor accounted for most of the overall variance (63%). Participants indicated their responses on a 7-point Likert scale ranging from 1 (*disagree*) to 7 (*agree*). For a subset of the present sample ( $n = 56$ ), data on socially desirable responding were available. Scores derived from the PAS scale were not related to Paulhus' (1984) two-component inventory of socially desirable responding (self-deception component,  $r = .01$ ; impression management component,  $r = -.08$ ; both *ns*). Thus, we conclude that socially desirable responding is not a problem for our measure.

To explore the validity of the present PAS measure, we collected data from 99 undergraduates to examine the measure's relation to other death-related attitudes that, according to previous work, tend to converge with PAS. We found correlations with measures of attitudes toward suicide (5 items;  $\alpha = .84$ , from Rogers, 1996,  $r = .79$ ), euthanasia (5 items;  $\alpha = .72$ , from Rogers, 1996,  $r = .69$ ) and abortion (1 item;  $r = .76$ ). These results are consistent with those reported by previous research (e.g., Lester, Hadley, & Lucas, 1990; Ross & Kaplan, 1993-1994). Also, our PAS measure was negatively correlated with the Christian Orthodoxy Scale ( $r = -.60$ ; Hunsberger, 1989;  $\alpha = .96$ ). This finding parallels others showing

<sup>4</sup>All analyses reported here were performed including gender as an independent variable. However, since no gender effects emerged, this variable was omitted from the analyses.

<sup>5</sup>We preferred the term *doctor-assisted suicide* to *physician-assisted suicide*, as the former term was spontaneously used by several undergraduate students with whom we discussed the present project. Also, *doctor-assisted suicide* appears to be more commonly used in the media.

Table 1

*Results of Content Analysis of Open-Ended Responses*

Content category	Responses that mention content (%)
Right to die ("It is a human right to determine when to die.")	30.0
Compassion with suffering individual ("People should not be put through pain and suffering, but should die with dignity.")	19.9
Control ("People should have control over their lives and bodies and make their own decisions.")	18.8
Moral opposition ("PAS is murder no matter who does it or why they do it.")	6.9
Religious concerns ("Suicide/PAS is against my religious beliefs.")	5.4

*Note.* Multiple content codes were possible. Representative responses for each category are provided in parentheses.

that religious individuals tend to reject any interference with a natural course of life and death (e.g., Finlay, 1985; Ho & Penney, 1992).

*Attitude importance.* Using a 7-point Likert scale, participants also rated how important their views of PAS were to them personally. Similar to previous research on attitude importance (e.g., Judd & Krosnick, 1982; Krosnick et al., 1993), a single item was used to assess this construct ("My opinion on the topic of doctor-assisted suicide is very important to me.").

*Open-ended measure.* Subsequently, participants were provided with two blank lines in the questionnaire and were asked to write down, in an open-ended format, why they hold their particular view of PAS. Only a minority of respondents did not complete this measure (9%). Responses were coded into 10 distinct content categories by two coders. A small number of responses received multiple codes (8.6%), and 12.3% of the responses were not codable. Here we only report the five categories that were mentioned by at least 5% of our sample. Table 1 provides brief descriptions and frequencies for these categories.

*Individualism–collectivism.* We argued that, in the American cultural context, individualism but not collectivism should be associated with more favorable

attitudes toward PAS. Hence, it was crucial to measure these two dimensions independently. In the present study, participants completed a 10-item individualism and an 11-item collectivism questionnaire designed by Oyserman (1993;  $\alpha = .68$  and  $.74$ , respectively). Sample items on the individualism scale included "I am the same person no matter who I am with" and "I enjoy being unique and different from others in many respects." Sample items on the collectivism scale included "To know who I really am, you must see me with members of my group" and "I will stay in a group if they need me, even when I'm not happy with the group." These two scales were only slightly negatively correlated ( $r = -.12$ ). Kimmelmeier and Burnstein (1998) demonstrated that the scales have good convergent and discriminant validities with other individualism–collectivism scales (Bontempo, 1993; Singelis, 1994; Triandis, Bontempo, Villareal, Asai, & Lucca, 1988).

*Authoritarianism.* We also included a short version of Altemeyer's (1988) Right-Wing Authoritarianism (RWA) scale adapted from Haddock, Zanna, and Esses (1993;  $\alpha = .74$ ). The 10-item version is highly correlated with the complete 30-item scale ( $r = .90$ ; cf. Kimmelmeier & Burnstein, 1998). Sample items include "The way things are going in this country, it's going to take a lot of 'strong medicine' to straighten out the troublemakers, criminals, and perverts" and "A lot of our rules regarding modesty and sexual behavior are just customs which are not necessarily any better or holier than those which other people follow" (reverse coded).

## Results

We created new variables by coding whether a participant was in the top, middle, or bottom third of the distribution of the individualism, collectivism, or RWA scores. Attitude importance was not related to any of these indexes ( $r = .08$ ,  $.01$ , and  $-.07$ , respectively, all *ns*). Following Judd and Krosnick (1989), we then subdivided participants into thirds based on attitude importance. Subsequently, a  $3 \times 3$  (Individualism: Low, Medium, High  $\times$  Attitude Importance: Little, Medium, Great) ANOVA was performed on the PAS attitude scores.<sup>6</sup>

We found a positive association between individualism and approval of PAS,  $F(1, 258) = 10.35$ ,  $p < .001$ . Moreover, as commonly reported in the literature (e.g., Krosnick, 1988), the more important the issue of PAS was to the respondents, the more positively they felt about it,  $F(2, 258) = 10.47$ ,  $p < .001$ . As predicted, the two factors interacted with each other,  $F(4, 258) = 4.18$ ,  $p < .004$ . Figure 1 summarizes the cell means for individualism and attitude importance. What this interaction means can be most clearly shown by examining the patterns of correlations between importance and PAS attitudes at different levels

<sup>6</sup>We chose to divide our sample into thirds rather than halves, as a median split may conceal the presence of nonlinear effects (Stangor, 1998).

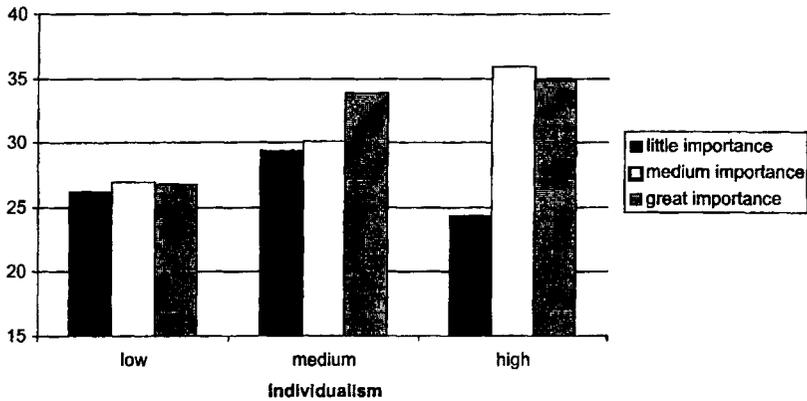


Figure 1. Attitude toward doctor-assisted suicide as a function of individualism and issue importance (index range = 6 to 42).

of individualism. For respondents in the lower third, the attitudes toward PAS did not vary as a function of attitude importance; that is, their PAS attitudes and attitude-importance scores were not correlated,  $r(104) = .01$ , *ns*. This suggests that attitude importance does not play a significant role in how people who are low in individualism think about PAS. However, in the top two thirds of the distribution, attitude importance contributed significantly to how respondents felt about PAS. For respondents with a medium or high level of individualism, there was a positive correlation between PAS attitudes and their importance,  $r(79) = .34$ ,  $p < .003$ , and  $r(86) = .38$ ,  $p < .001$ . However, the concrete pattern of results varied slightly between these groups. Among respondents with a medium level of individualism, there was a marked difference between the little- and great-importance groups ( $p = .002$ ), and a somewhat smaller difference between the medium-importance and great-importance groups ( $p = .068$ ), but no difference between the little-importance and medium-importance individuals ( $p = .22$ ). However, among respondents high in individualism, those who did not consider PAS important differed from the medium- and great-importance groups ( $p = .04$  and  $p = .002$ ), while the latter groups did not differ ( $p = .90$ ). In any case, these results are consistent with our prediction that increasing in attitude importance should lead to more favorable opinions about PAS in individualists.

Similar analyses involving our index of collectivism did not yield any significant effects. Given that collectivism can be seen as closely linked to traditional family values (e.g., Triandis et al., 1988), this replicates Lee et al.'s (1996) finding for their American sample.

With regard to authoritarianism, we performed a similar  $3 \times 3$  (Level of RWA  $\times$  Attitude Importance) ANOVA. In addition to a main effect for attitude

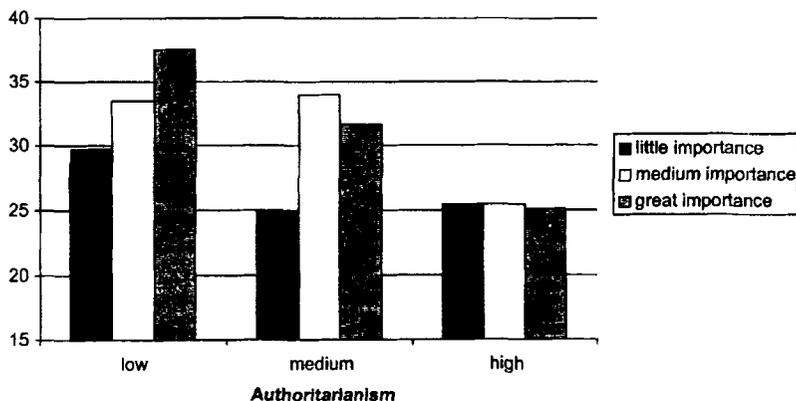


Figure 2. Attitude toward doctor-assisted suicide as a function of authoritarianism (RWA) and issue importance (index range = 6 to 42).

importance,  $F(2, 255) = 10.15, p < .001$  (already mentioned earlier), we found a main effect for level of RWA,  $F(2, 255) = 22.00, p < .001$ , such that high levels of RWA were associated with negative attitudes toward PAS. These main effects were qualified by an interaction,  $F(4, 255) = 3.91, p < .005$  (Figure 2). There was a positive correlation between attitude importance and PAS attitude for people low in RWA,  $r(90) = .42, p < .001$ . Among those low in RWA, the medium-importance group viewed PAS more favorably, compared to the little-importance group ( $p = .015$ ) and the great-importance group viewed it more favorably than did the medium-importance group ( $p < .001$ ). That is, at low levels of authoritarianism, high attitude importance was associated with positive PAS attitudes. This was also the case at medium levels of RWA, although the effect was somewhat weaker,  $r(92) = .33, p < .003$ . At this level of RWA, the little-importance group was much less in favor of PAS, compared to the medium- and great-importance groups ( $ps < .01$ ), while the latter two groups did not differ ( $p = .34$ ). For those with high RWA, we did not find any correlation between attitudes toward PAS and attitude importance,  $r(86) = .04, ns$ . Apparently, strong authoritarian values overrode any impact of attitude importance.

Next, we examined the joint effects of RWA and individualism on PAS attitudes. The two measures were negatively correlated,  $r(268) = -.34, p < .05$ . If authoritarianism and individualism constitute opposite ends of the same underlying dimension (as proposed by Gelfand et al., 1996), its impact on PAS attitudes, filtered through attitude importance, should be most pronounced in individuals who are high on RWA and, simultaneously, low on individualism. In the present framework, this would lead to the prediction of a three-way interaction. However, in a three-way ANOVA involving individualism, authoritarianism, and

attitude importance, only the two-way interactions reported earlier (Importance  $\times$  Individualism, and Importance  $\times$  Authoritarianism) emerged. The three-way interaction involving individualism, authoritarianism, and attitude importance was not significant ( $F < 1$ ).

Finally, we performed a series of ANCOVAs. We analyzed PAS attitudes as a function of attitude importance and individualism while controlling for authoritarianism. However, the effects were not altered. Similarly, when individualism was covaried out in an ANCOVA with authoritarianism and attitude importance as factors, results were essentially unchanged. Hence, individualism and RWA had independent effects on PAS attitudes. These results are in line with recent research that challenges Gelfand et al.'s (1996) notion of individualism being the opposite of authoritarianism (Kemmelmeyer & Burnstein, 1998). According to Gelfand et al., controlling for one variable should have eliminated the effects caused by the other.

When asked to list their reasons for holding their particular view of PAS, the majority of the participants provided responses that had to do with individuals' right to die, compassion with the suffering, and individuals' control over their own lives (Table 1). Only a small number of respondents mentioned moral or religious principles. This demonstrates that our assumption was correct that for most of our respondents the issue of PAS is framed in terms of individualistic concepts.

Finally, we compared those respondents who had provided a particular type of response with those who did not provide that response (Table 2). As expected, the first three concerns—individuals' right to die, compassion with the suffering, and individuals' control over their own lives—were associated with more favorable views of PAS. Also not surprisingly, responses involving traditional moral or religious approaches to PAS were linked to more negative PAS attitudes. More interestingly, individuals who mentioned that people have a right to die scored lower on RWA. Likewise, respondents who brought up moral or religious issues tended to be higher on RWA. Similarly, individuals with religious concerns were found to be lower in individualism, replicating earlier findings (Finlay, 1985; Ho & Penney, 1992). These data provide further evidence that the value orientations of individualism and authoritarianism influence how people frame an issue such as PAS, especially if the issue is significant for them.

## Discussion

As predicted, individualistic values were associated with more favorable attitudes toward PAS. This effect was independent of authoritarianism, which itself had a negative association with PAS. Attitude importance interacted with individualism to determine PAS attitudes; only when the issue was considered important was the content of the attitude in line with individualistic values (cf. Krosnick, 1990). We suggest that PAS attitudes have a value-expressive function

Table 2

*Attitudes Toward Physician-Assisted Suicide, Individualism, and Right-Wing Authoritarianism as a Function of Categories Mentioned in Open-Ended Responses*

Content category		PAS attitude index <sup>a</sup>	Individualism <sup>b</sup>	Right-wing authoritarianism <sup>c</sup>
Right to die	Not mentioned ( <i>n</i> = 191)	27.56	5.13	-.55
	Mentioned ( <i>n</i> = 83)	32.31***	5.15	-.90*
Compassion	Not mentioned ( <i>n</i> = 219)	28.13	5.10	-.60
	Mentioned ( <i>n</i> = 55)	32.47***	5.29†	-.89
Control	Not mentioned ( <i>n</i> = 222)	28.23	5.10	-.62
	Mentioned ( <i>n</i> = 52)	32.31***	5.28	-.79
Moral opposition	Not mentioned ( <i>n</i> = 255)	29.96	5.15	-.71
	Mentioned ( <i>n</i> = 19)	16.16***	5.04	-.01**
Religious concerns	Not mentioned ( <i>n</i> = 259)	30.04	5.17	-.74
	Mentioned ( <i>n</i> = 15)	11.03***	4.54*	.77***

*Note.* This table compares respondents who mentioned a particular content in their open-ended responses with respondents who did not mention it. Significances indicate the difference of these two groups on three dependent variables (columns).

<sup>a</sup>Range = 6 to 36. <sup>b</sup>Range = 1 to 7. <sup>c</sup>Range = -4 to +4.

†*p* < .10. \**p* < .05. \*\**p* < .01. \*\*\**p* < .001.

in that they reflect a concern with issues of self-determination and control (cf. Katz, 1960). Collectivism, also assessed in the present study, was found to be unrelated to PAS attitudes. This is compatible with the notion that, in the United States, life-and-death decisions are thought mainly to involve individuals, rather than their communities or groups (e.g., Lee et al., 1996).

It is crucial to emphasize that the present findings do not provide evidence for a universal link between individualism and favorable views of PAS. Rather, we predicated this research on the observation that, in the context of United States culture, PAS is viewed in terms of individualistic themes, such as self-determination and self-interest. We argued that, because individualism is a value championed by the overall culture, it should be highly predictive for Americans' perceptions of the world, including matters of life and death (e.g., Dion & Dion, 1991; Han & Shavitt, 1994; Mount, 1983; Peng et al., 1996). At the same time, we expected and found that collectivistic values do not carry any weight in shaping PAS attitudes in the American context.

At a more general level, our analysis implies that, under different conditions (e.g., in collectivistic cultures), the value dimension of collectivism but not individualism should be associated with views of PAS and related issues. As an example for the more collectivistic basis of attitudes toward euthanasia in non-Western cultures, Lee et al. (1996) refer to the case of the Inuit who practiced and celebrated euthanasia (cf. Freuchen, 1961). Among the Inuit, old people were allowed to die when they could not travel, hunt, or work any more. This practice helped the group to overcome the shortage of food, and ensured the survival of the younger generations. This can be regarded as highly collectivistic, as the old and sick were willing to sacrifice their own lives for the benefit of their community. Based on our analysis, we would predict that in a society such as the Inuit society, collectivistic rather than individualistic values shape attitudes toward PAS and euthanasia.

Lee et al.'s (1996) data also provide some support for the notion that family values (which constitute an important aspect of collectivistic values) are predictive of death attitudes in a collectivistic society. In their Chinese sample, they found that family values were related to supporting euthanasia as a solution to the societal problem of overpopulation. However, in their American comparison sample, family values were not at all related to views of euthanasia. In sum, the present research is consistent with the notion that those values that are dominant within a culture are a central predictor of attitudes toward PAS and related issues.

For our analysis of the authoritarianism variable, we found the expected association with negative views of PAS. This is consistent with earlier work demonstrating that political conservatism was positively associated with anti-PAS beliefs. However, authoritarianism interacted with attitude importance differently than it did with individualism. Only low- and medium-RWA respondents evidenced a correlation between attitude importance and PAS attitudes, a finding frequently reported in the literature on attitude importance (e.g., Krosnick, 1988; Leippe & Elkin, 1987). No correlation between attitude and attitude importance was found at the highest level of RWA. This pattern is not compatible with the notion of a value-expressive function of PAS attitudes with regard to authoritarianism.

Assuming that authoritarianism has direct implications of one's views of PAS, we would have expected the absolute size of the attitude-importance correlation to increase. As in the case of individualism, such a pattern could have served as evidence that strong authoritarian values would have expressed themselves in a rejection of PAS, in particular if the issue was important to the person. Rather, we observed that high authoritarianism simply overrode the attitude-importance effect. A possible explanation for this result lies in the lower tolerance for ambiguity and higher need for consistency that has been documented for right-wing individuals (e.g., Eckhardt, 1991; Kimmelmeier, 1997). Individuals with strong authoritarian views may regard the evaluation of PAS as

a matter of principle, rather than one that leaves room for personal preference or idiosyncratic interpretation. If this is, in fact, the case, low subjective attitude importance should not be associated with lower levels of rejection of PAS, as found in the present study. It will be up to future research to examine the effects of authoritarianism on attitude structure and function (cf. Haddock et al., 1993).

While this research is consistent with the idea that individualists view PAS in terms of self-determination, the present data are far from definitive. In particular, they suggest but do not demonstrate unambiguously that PAS attitudes serve a value-expressive function. In fact, one might argue that the present pattern is compatible with the assumption that PAS attitudes serve a social-adjustive function for individualists. Since the public discussion of PAS in the United States is framed mainly in terms of individualistic themes, favoring PAS may be seen as a way of adapting to the view most prevalent in the social environment (cf. Katz, 1960; Snyder & DeBono, 1989).

However, there are reasons why an interpretation of the data as reflecting social adjustment is unlikely to hold. First, as documented in the cultural psychology literature, individualism emphasizes the distinctiveness and uniqueness of each person, and rejects conformity and conventionality. From this perspective, it is unlikely that those high in individualism are more strongly motivated to fit in with and assimilate to their social environment than are those low in individualism. If anything, it should be those high in collectivism who are especially sensitive to their immediate social environment (Ji, Nisbett, & Schwarz, 1998) and who want to make sure that they do not deviate from in-group norms (e.g., Triandis, 1995). For example, Yamaguchi, Kuhlman, and Sugimori (1995) measured collectivism in various cultures (including the United States) and found it to be associated with tendencies to affiliate with others, sensitivity to rejection, and motives highly conducive to social adjustment. However, as noted earlier, we found that collectivism is unrelated to PAS attitudes. Therefore, it is implausible that PAS attitudes served a social-adjustive function among our respondents.

Much of the research distinguishing social-adjustive and value-expressive functions of attitudes has relied heavily on the self-monitoring construct (SM; Snyder, 1974; Snyder & Gangestad, 1986). DeBono (1987) argued that attitudes seem to serve a social-adjustive function for high-SM individuals, while they serve a value-expressive function for low-SM individuals. However, Kimmelmeier (1996) found no significant correlations between SM and our individualism or collectivism measures. Equally low correlation coefficients were obtained for other measures of individualism–collectivism (Bontempo, 1993; Triandis et al., 1988). Hence, it is unlikely that the present effects were obtained because of a confounding of individualism with SM.

It is, of course, also possible that individuals for whom PAS is important tend to think more often about the issue and are more knowledgeable about it. Greater

amounts of thinking about an issue tend to produce greater consistency in people's attitudes and values, particularly among knowledgeable respondents (Judd & Krosnick, 1989). Thus, the observed interaction between individualism and attitude importance may not be the result of individuals wanting to express their values through their stand on social issues, but may simply be the result of preoccupation with the topic. Although future research should help to clarify this issue, these two views may often be inherently linked, as individuals spend more time thinking about issues that are relevant to their values (e.g., Celsi & Olson, 1988; Krosnick et al., 1993).

Another limitation of the present study is the fact that we did not vary the type-of-death attitude. Previous research has established a correlation between euthanasia attitudes and attitudes toward other death-related issues, such as suicide, abortion, and capital punishment (Finlay, 1985; Lester et al. 1990; Ross & Kaplan, 1993-1994). Although many of these attitudes seem to form clusters, the comparison of specific issues (e.g., active and passive forms of euthanasia) may give valuable cues as to how individualist values shape attitudes toward various kinds of death.

Finally, Lester (1996), in discussing the increase in assisted suicide, pointed out that individuals, while capable of killing themselves, nevertheless usually want others to participate in their suicides. He hypothesized that those with an internal locus of control would prefer suicide to assisted suicide, whereas the reverse should be true for individuals with an external locus of control. From the present perspective, this suggests that individualists have a high internal locus of control. Thus, we would expect individualists to evaluate self-suicide more positively than PAS. Future research should address this possibility.

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