

# I Will Recommend a Salad but Choose a Burger for You: the Effect of Decision Tasks and Social Distance on Food Decisions for Others

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How to cite: Lei, J., & Jiang, Y. (2025). I will recommend a salad but choose a burger for you: The effect of decision tasks and social distance on food decisions for others. *Journal of Applied Business & Behavioral Sciences*, 1(1), 95–114.

<https://doi.org/10.63522/jabbs.101005>

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## Abstract

While food decisions are usually personal, consumers often need to make these decisions for other people. In this research, we examine how consumers make food decisions under two decision tasks (recommendation vs. choice) and for others who are socially distant or close to themselves. We argue that consumers focus on others' preferences when choosing on others' behalf, whereas they focus on decision justification when recommending to others. In three experimental studies we show that consumers make different choices versus recommendations for others, and this difference is more pronounced in the decisions for distant (vs. close) others. These findings contribute to the literature on decision making and food consumption by identifying the conditions under which consumers are likely to make healthy or unhealthy food decisions for other people. These findings also provide practical implications for consumers to make (better) decisions for others and assess the decisions that others have made for them.

**Keywords:** Food decision; Food consumption; Decision task; Social distance; Decision making for others

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## 1. Introduction

While food decisions are usually personal, consumers often need to make these decisions for other people on many occasions (e.g., Akkoc & Fisher 2014; Biswas et al., 2025; Laran, 2010; Liu et al., 2012; Wright et al., 2024). Will consumers choose a different food option for a friend from what they would recommend to the same person? Meanwhile, these decision recipients, or “others”, can be friends, family, or acquaintances, varying in different levels of closeness or social distance. For example, we like to advise others and are often asked for recommendations when dining with family and friends. Food bloggers and influencers often recommend new food and drink to their followers and their followers often take their recommendations. We buy or order food for family daily (Wright et al., 2024) and occasionally do so for acquaintances when organizing social events with many guests. Given

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Received 21 March 2025; Revised 28 April 2025; Accepted 28 April 2025

the ubiquity of consumer food decisions for others, they have been identified as a research priority by the Duke-Ipsos Research Center & Think Tank (Liu et al., 2019).

Due to the importance of food decision making on consumers' long-term health, many previous studies have examined how consumers make food decisions for themselves (e.g., Dhar & Simonson, 1999; Rishika et al., 2022; Wilcox et al., 2009; VanEpps et al., 2016). The food that is ordered for us or recommended to us is also an important part of our overall food intake, yet not much research has examined how consumers make food decisions for other people. Of the few studies that do examine these decisions for others, Laran (2010) shows that when consumers choose food for others, they focus on the pleasure goal and tend to make indulgent (unhealthy) decisions for others. Likewise, Lu et al. (2016) find that consumers are more likely to choose hedonic options (e.g., chocolate with smooth taste) than utilitarian options (e.g., chocolate with high energy) for others because they experience less guilt when choosing indulgent items for others than for themselves. However, it is not clear whether consumers would make the same decisions under different decision tasks (e.g., choice vs. recommendation) and for different types of others varying in social distance (e.g., close vs. distant others).

In this research, we advance our understanding of how consumers make food decisions for others by examining the effect of two decision factors: (1) the decision task (choice vs. recommendation) and (2) the social distance (distant vs. close) between the decision maker and the decision recipient. We argue that these two factors influence consumers' decision focus, which consequently affects consumers' food decisions for others. Findings from three experimental studies show that consumers do not always make indulgent yet unhealthy food decisions for others. Instead, their decisions for others depend on whether they focus on others' preferences or ease of justifying their decision. We show that consumers tend to focus on others' preferences when choosing on others' behalf but focus on justifying the decision when recommending to others. These different focuses lead to healthy or unhealthy food decisions for others in the choice and recommendation tasks. Furthermore, we show that this difference in decisions between choices and recommendations is greater for distant others than for close others, as consumers perceive less self-other difference with the latter. Theoretically, these results specify the conditions (decision task and social distance) under which consumers make a healthy or unhealthy food decision for others and identify the mechanisms (different decision focuses) through which these decisions are made. Practically, these results show the different influences of social groups on consumers' food consumption. We draw implications for how consumers can make (better) decisions for others and assess the decisions that others made for them.

In the following sections of the article, we first discuss the two decision focuses (others' preferences and decision justification) that influence consumers' decisions for others. We then explain how consumers' decision focus may differ in the choice versus recommendation tasks and the moderating effect of social distance. We test our predictions of how consumers make food decisions for others in two studies. In study 1, we examine the effects of decision task and social distance in a single consumption decision (snack decision). In Study 2a and Study 2b, we replicate the findings of study 1 in sequential consumption decisions (e.g., lunch and snack decisions) and demonstrate the mechanisms through which consumers make the different decisions for others.

## 2. Theoretical Background

### 2.1 Consumer Decision Making for Others

Research in decision making for others shows that people often make different, even opposite decisions for others than for themselves (e.g., Hsee & Weber, 1997; Kray & Gonzalez, 1999; Kray, 2000; Laran, 2010). Wright et al. (2024) provide a comprehensive review of the literature on how consumers make decisions for others, ranging from family members, friends to strangers. One explanation of why consumers make different decisions for others is that people believe that others have different preferences than they do themselves (Kray, 2000). For example, people believe that others are more variety-seeking (Choi et al., 2006) and risk-seeking (Hsee & Weber, 1997) and are motivated more by extrinsic rewards and less by intrinsic rewards than themselves (Heath, 1999). Because of the perceived self-other difference, people are less likely to apply their own preferences in the decisions for others. For example, in the framework of consumers' choices for others (Liu et al., 2019), consumers usually focus on decision recipients' preferences in the context of gift-giving and everyday favors or pickups. When consumers don't have a lot of knowledge about others, they tend to use their assumptions or beliefs about the generalized others' preferences to make the decision for others (Kray, 2000).

In addition to making decisions based on preferences, people also often need to justify or provide reasons for their decisions (Bettman et al., 1998). For example, a consumer may justify their decision for an expensive product over an economical option by stating that the former lasts longer and would ultimately save money. When it is difficult to justify a decision (e.g., for hedonic consumption), consumers may opt for an alternative decision (e.g., for utilitarian consumption) that is easier to justify (Okada, 2005). Research suggests that this need for decision justification is especially strong when consumers make decisions for others (Shafir et al., 1993; Slovic, 1975; Tetlock, 1992). This is because consumers feel more accountable for their decisions for others than those for themselves, and accountability makes consumers feel the pressure to justify their decisions as "socially acceptable" or "normatively correct" (p.591, Choi et al., 2006; Kray & Gonzalez, 1999).

Considering the above discussion, we believe when making decisions for others, consumers mainly focus on: (1) others' preferences and (2) ease of justifying the decision. If a food option that matches others' preferences but differs from what is normatively desired, these two decision focuses may lead to different decisions. Research in food consumption shows that, without having the specific information about others' preferences, consumers believe that others generally prefer tasty, less healthy food items (e.g., candy bars) over healthy, less tasty ones (e.g., fruits) because they think self-control is a learned skill and other people may not have as much self-control as themselves and thus tend to pursue the pleasure and indulgent goal (Laran, 2010). For example, restaurant staff usually recommend dishes and drinks based on taste rather than healthiness. Therefore, when consumers focus on others' preferences, they are more likely to select a tasty option over a healthy one for others. However, consumers also acknowledge that a healthy option offers long-term benefits, whereas an unhealthy one only brings short-term gratification at the cost of long-term health. This makes the healthy option appear more normatively desirable and easier to justify when it is presented as a parallel alternative to an unhealthy option (Fishbach & Zhang, 2008). Thus, when consumers focus on justifying the decision, they are more likely to select a healthy (over an unhealthy) option for others when presented with both options side by side. Given the opposing effects of these two decision focuses in food consumption, consumers' decisions for others will depend on whether consumers focus more on others' preferences or ease of justifying the decision. We propose that the relative influence of these two decision focuses depends on the decision task (choice vs. recommendation) and the perceived social distance between the decision maker and the decision recipient (distant vs. close).

## 2.2 Recommending versus Choosing for Others

When consumers make decisions for others, they may need to provide their recommendations (as an advisor) or to choose on others' behalf (as a surrogate consumer). Although these are two common yet distinct roles that consumers often undertake when making decisions for others, very few studies have explicitly examined the impact of these two different decision tasks on consumers' decisions, particularly in the context of food decisions. The decision-making research typically defines recommendation or advice as a suggestion for what the advisee should do (Harvey & Fischer, 1997; Kray & Gonzalez, 1999). Therefore, when consumers make recommendations to another person, although they may also consider the person's preference, they tend to focus on "what the person should do" in the situation (Dalal & Bonaccio, 2010). Research shows that the "what the person should do" mindset would make the advisor focus on the attribute (of the decision object) that is consistent with the prevailing norms relevant to the decision and easily justifiable (Kray & Gonzalez, 1999; Tversky et al., 1988). For example, people are more likely to recommend a job that is more self-fulfilling (but less well-paid) over a job that is better paid (but less self-fulfilling) to others, because they rate self-fulfillment as a more important, norm-based attribute than salary (Kray & Gonzalez, 1999). In addition, when consumers are asked to "advise others" in a recommendation task, they are conscious of the fact that their "advice" may be regarded as reflecting their own behavior or perception. Meanwhile, it is eventually up to the decision recipient to decide whether to follow the recommendation or not. This lack of real consequence in a recommendation task makes consumers likely to simply recommend a normatively "correct" option to live up to the advisory role and to project themselves in a more positive light for impression management (Leary, 1995; Schlenker & Weigold, 1992).

In the context of food consumption, consumers are generally advised that they should pursue the health goal for long-term benefits rather than the pleasure goal for short-term gratification. Specifically, unhealthy food items are typically regarded as the vices and "wants", whereas healthy food items as the virtues and "should" (Okada, 2005; Rozin et al., 1996; Wertenbroch, 1998). Although both healthy and unhealthy food offer benefits to consumers, the former is primarily in the form of hedonic enjoyment (e.g., taste), whereas the latter is in utilitarian functionality (e.g., healthiness) (Raghunathan et al., 2006). Given these differences, there is likely a sense of guilt associated with the hedonic consumption of unhealthy food (Kivetz & Keinan 2006; Okada, 2005; Wansink & Chandon 2006), but a sense of fulfillment or achievement associated with the utilitarian consumption of healthy food. Therefore, we expect consumers to focus on the utilitarian attribute of healthiness rather than the hedonic attribute of taste in the recommendation task. In other words, we expect that consumers are more likely to recommend a healthy item rather than an unhealthy item, as the former is a normatively correct (i.e., a "should" eat item) and easily justifiable option.

Different from the recommendation task in which consumers only make the suggestion while the decision recipient makes the final decision, the choice task requires consumers to make the actual decision for the decision recipient. Research suggests that choosing on others' behalf makes the (surrogate) consumer concerned about the "decision outcome" as to whether the decision would please the recipient and achieve favorable interpersonal consequences with the recipient (Jonas et al., 2005). For example, compared with gift recipients, gift givers are concerned more about whether a good gift is selected (Mu & Givi, 2025). Because of this concern for the decision outcome, if (surrogate) customers have specific information about the decision recipient's preference (e.g., prefer Sushi for lunch), they would bias the decision towards the recipient's preference (Jonas et al., 2005; Lundgren & Prislin, 1998). When consumers do not have specific information about the decision recipient's preference,

they would make the decision based on their general assumptions about others' preferences (e.g., Kray & Gonzalez, 1999; Kray, 2000; Jonas et al., 2005). In the context of food consumption, previous research has shown that consumers believe that others are generally pleasure-seeking in food consumption and prefer tasty but less healthy food to healthy but less tasty food (Laran, 2010). Therefore, we expect that, when consumers have no specific information about the decision recipient's preference (which is often the case), they are more likely to choose the unhealthy (vs. healthy) food for others to "make others happy".

In summary, we expect that consumers are more likely to recommend a healthy (vs. unhealthy) option for others as the decision of a healthy option is easier to justify. However, they are more likely to choose an unhealthy (vs. healthy) option for others as they believe others generally prefer unhealthy food items to healthy ones and will be happy with tasty but unhealthy choices. We hypothesize that:

H1: Consumers are more likely to recommend (vs. choose) a healthy (vs. tasty) option for others when they do not have specific information about others' preferences.

### *2.3 Making Decisions for Socially Close versus Distant Others*

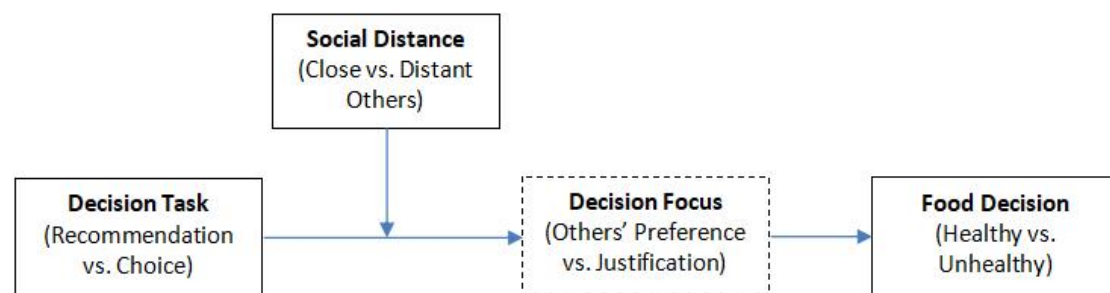
Sometimes consumers make decisions for socially close others (e.g., close friends, family members), whereas other times they make decisions for socially distant others (e.g., colleagues, fellow students, acquaintances). Research shows that people's mental representations of close others are more similar to themselves than to those of distant others (Aron et al., 1991; Prentice, 1990). Therefore, we expect the process of making decisions for close (vs. distant) others to be more similar to the process of making decisions for oneself. Kray and Gonzalez (1999) show that people tend to focus on one prominent attribute (of the decision object) when making decisions for others, whereas they consider more attributes when making decisions for themselves. They indicate that this difference could be due to the fact that when people make decisions for themselves, multiple attributes (e.g., price and quality) are salient as people believe these attributes are relevant to various aspects of their needs (see also Fiske & Taylor, 1991). However, when people make decisions for others, their general lack of information about others makes them simplify the task and focus on one prominent attribute (e.g., price or quality) relevant to the task. Since we expect consumers to more likely to behave similarly when making decisions for close (vs. distant) others as when they make decisions for themselves, we also expect them to more likely consider more attributes (of food options) (e.g., healthiness, taste) when they make decisions for close (vs. distant) others.

We hypothesized earlier that, in a recommendation task, consumers tend to focus on the healthiness attribute (of food options) and recommend a healthy (over an unhealthy) food option to others. However, in a choice task, consumers tend to focus on the taste attribute and choose an unhealthy (over a healthy) option for others. Given the above discussion, we expect this tendency of focusing on one prominent attribute (healthiness or taste) in each decision task (recommendation or choice) to be stronger for distant others than for close others. This is because when making decisions for distant others, consumers' lack of information about others makes them more likely to rely on prevailing norms (e.g., healthy food brings long-term benefit) or general beliefs (e.g., others prefer tasty options) to select a suitable option in the recommendation and choice task respectively. However, when consumers make decisions for close others, they may consider multiple attributes or aspects (e.g., healthiness, taste, cost, convenience) of the food options to make the decision. For example, although consumers may not have specific information about the other person's preference in a consumption scenario, they may be aware of the person's typical consumption habits or preferences. Equipped with

this information, they may adjust their recommendations to accommodate these habits or preferences, rather than only relying on the healthiness attribute to make the recommendation. Therefore, we expect that such considerations for multiple attributes/aspects of the food options would attenuate consumers' tendency to recommend a healthy option and choose an unhealthy option for close others. In addition, research also shows that as consumers have more knowledge about their close others, they are more likely to give unique experiential gifts to them than to distant others from whom they perceive a higher social risk of giving something different than the "normal" material gift (Goodman & Lim, 2018).

In addition, we discussed earlier that consumers tend to recommend a normatively correct option (e.g., healthy item) to present themselves in a more positive light for impression management. However, this need to present oneself favorably is shown to be much lower for close others (e.g., friends) than distant others (e.g., strangers) and people are more likely to protect their friends than strangers (Tice et al. 1995; Dubois et al., 2016). Therefore, when choosing for close others, consumers may adjust their typical choice (of unhealthy food) to protect them; when recommending for close others, consumers may adjust their typical choice (of healthy food) as they do not need to enhance their image in front of close others. Taking the above discussion together, we expect that consumers' tendency of recommending a healthy item but choosing an unhealthy one for others would be stronger for distant than for close others. We hypothesize that:

H2: Consumers' tendency of recommending a healthy but choosing an unhealthy item for others would be stronger for distant others than for close others.



**Figure 1:** Consumer Food Decisions for Others

### 3. Study 1

#### 3.1 Method

The objective of Study 1 is to examine whether consumers make different recommendations versus choices for socially distant versus close others. One hundred and fifty-two undergraduate students voluntarily participated in the study. We randomly assigned the participants to four experimental conditions of a 2 (decision tasks: recommendation vs. choice)  $\times$  2 (social distance: close vs. distant) between-subjects design. In each experimental group, we asked them to read a decision scenario where they needed to make a snack decision for another person between a healthy option (fresh fruit) and an unhealthy option (candy bar). For the "close" other conditions, we asked the participants to imagine a good friend, and for the "distant" other conditions, we asked the participants to imagine a student A whom they had met briefly in the last semester. In all the conditions, we asked the participants to

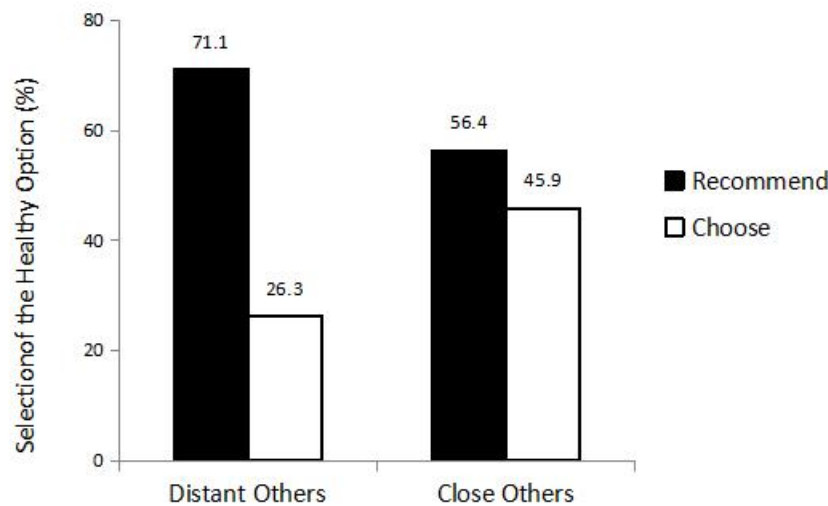
imagine that they went to the cafeteria for snacks during a study break at the university library. In the recommendation conditions, we told the participants that the friend or student A went with the participant, was contemplating between fresh fruit and a candy bar, and asked for his or her opinion. In the choice conditions, the friend or student A was busy with an assignment and asked the participant to bring a snack for him or her. We then presented the participants with two snack options, fresh fruits (e.g., apple, banana, orange) and candy bars (e.g., KitKat, Twix, Smarties), and asked them to either recommend or choose an option for the friend or student A.

After the participants had made the decision, we asked them to answer some questions about the manipulation check and control variables. We used two 7-point items ( $r = .73$ ) to measure the social distance between the participant and their good friend or student A. The first item asked participants to rate how socially close they were with their good friend or student A (1 = socially distant; 7 = socially close); the second item asked participants to indicate their relationship with their good friend or student A by choosing from the varying graphics of two circles representing the social distance between self and other (1 = two circles completely separate; 7 = two circles very much overlapped) (adapted from Aron et al. 1992). We also asked the participants to indicate the gender of the friend or student A that they imagined. The reported gender did not affect the participants' food decision in all conditions ( $p > .10$ ). Then we asked the participants to rate the healthiness of fresh fruits and candy bars (1 = unhealthy, 7 = healthy). As consumers' liking of the food options and their health consciousness may influence their food decisions for others, we measured participants' liking of fresh fruits and candy bars in general (1 = do not like it at all, 7 = like it a lot), and their health consciousness using five 7-point Likert scales (Cronbach's  $\alpha = .89$ ): "I watch what I eat," "I pay attention to what I eat," "I pay attention to how much I eat," "Eating healthy is important to me," and "Nutrition information influences me" (Chandon and Wansink 2007).

### 3.2 Results

The manipulation check showed that participants perceived the social distance between self and good friend to be closer than that of self and student A (5.46 vs. 3.20,  $t_{150} = 11.33$ ,  $p < .001$ ). They also rated fresh fruits as healthier than candy bars (6.41 vs. 1.91,  $t_{151} = 33.22$ ,  $p < .001$ ).

The results of a binary logistic regression with decision task and social distance as independent variables and participants' health consciousness and liking of fresh fruits and candy bars as covariates showed a significant main effect of decision task (Wald  $\chi^2(1) = 16.04$ ,  $p < .001$ ). Overall, participants were more likely to recommend than to choose a healthy option (63.6% vs. 36.0%,  $\chi^2(1) = 11.61$ ,  $p < .01$ ) and more likely to choose than to recommend an unhealthy option (64.0% vs. 36.4%). This result supports hypothesis 1 that consumers are more likely to recommend (vs. choose) a healthy option for others. The covariates of participants' liking for fresh fruits and candy bars both had a significant influence on decision ( $p < .01$ ), and participants' health consciousness had a marginal effect on decision ( $p = .1$ ). The results also showed a marginally significant interaction term between social distance and decision task (Wald  $\chi^2(1) = 3.55$ ,  $p = .06$ ). For distant others, participants were more likely to recommend (71.1%) than to choose (26.3%,  $\chi^2(1) = 15.22$ ,  $p < .001$ ) the healthy option, and more likely to choose (73.7%) than to recommend (28.9%) the unhealthy option. For close others, although participants were directionally more likely to recommend than to choose the healthy option, the difference was not significant (56.4% vs. 45.9%,  $\chi^2(1) = 0.83$ ,  $p > .30$ ) (see Figure 2). These results support our hypothesis 2 that the difference between consumers' food recommendations and choices for others is more pronounced for distant others than for close others.



**Figure 2:** Study 1 Results

### 3.3 Discussion

The results of Study 1 support our predictions that consumers are more likely to recommend (vs. choose) the healthy (vs. unhealthy) option for others, and that this tendency is more pronounced for distant others than for close others. Specifically, these effects are over and above consumers' own preferences including their health consciousness and how much they like fresh fruits and candy bars. As a corollary, we found that there were no significant differences between the recommendations to distant others and those to close others (71.1% vs. 56.4%,  $\chi^2(1) = 1.78$ ,  $p > .10$ ), but participants were marginally more likely to choose the unhealthy option for distant (vs. close) others (73.7% vs. 54.1%,  $\chi^2(1) = 3.14$ ,  $p = .08$ ). This result shows that consumers' recommendations for others are less affected by social distance than their choices for others. It suggests that, when an "advisor's" role in a recommendation task raises the question of "what others should do", consumers are likely to make a normatively correct decision, regardless of social distance. However, when consumers choose on others' behalf, they may "stand in the person's shoes" and incorporate their knowledge about the person (e.g., others' habits, preferences, dietary restrictions) into the decision, and choose an option that appeals to the person.

Overall, Study 1 shows that consumers make different decisions when they recommend others than when they choose on behalf of others. However, it did not explore the proposed mechanisms (different decision focuses) for these decisions. In addition, Study 1 examined consumers' decisions for others in a single decision (e.g., decision about a snack option). However, there are situations when consumers need to make multiple, sequential consumption decisions for others (e.g., decisions about lunch and snack options). Study 2a and 2b address these issues.

## 4. Study 2a



The main objective of Study 2a is to examine consumers' different decision focuses on choices and recommendations for others. First, we indicate earlier that consumers would focus on others' preferences when they choose on others' behalf. In Study 1, we did not provide participants with specific information about the decision recipient's food preference. As consumers believe that others generally prefer unhealthy food (Laran, 2010), we found that the participants tended to choose an unhealthy (over a healthy) option for others. One way to further test the proposed decision focus (others' preferences) in the choice task is to examine whether participants will choose a healthy (over unhealthy) option for others, if they know the decision recipient prefers healthy food. Specifically, if participants have the information to infer that the decision recipient prefers, for example, healthy food, they should be more likely to choose the healthy (vs. unhealthy) option.

Second, we argued earlier that consumers would focus on the ease of justifying the decision when recommending to others. In Study 1, we tested consumers' recommendation to others in a single food decision in which a healthy (vs. unhealthy) option was easier to justify due to its congruency with the more important long-term health goal (e.g., Fishbach & Zhang, 2008). As predicted, we found that the participants tended to recommend a healthy (over unhealthy) option to others. One way to test the proposed decision focus (ease of decision justification) in the recommendation task is to examine whether participants would recommend an unhealthy over a healthy option, should the former be easier to justify in the decision scenario. For example, in sequential consumption decision scenarios, it is more of a norm to balance two goals (health and taste) than to highlight a single goal (e.g., health) (e.g., Dhar & Simonson, 1999; Wilcox et al. 2009). Meanwhile, prior research also shows that consumers who expect to justify their decisions tend to opt for "compromising" solutions instead of extreme ones (Simonson 1989). In our context, sequential consumption decisions that balance healthy and unhealthy food options would be a more "compromised" solution than decisions to include only healthy or unhealthy food. Therefore, if we told participants that the decision recipient had already had, for example, a healthy food item, they should be more likely to recommend an unhealthy (vs. healthy) food option to balance with the person's earlier consumption.

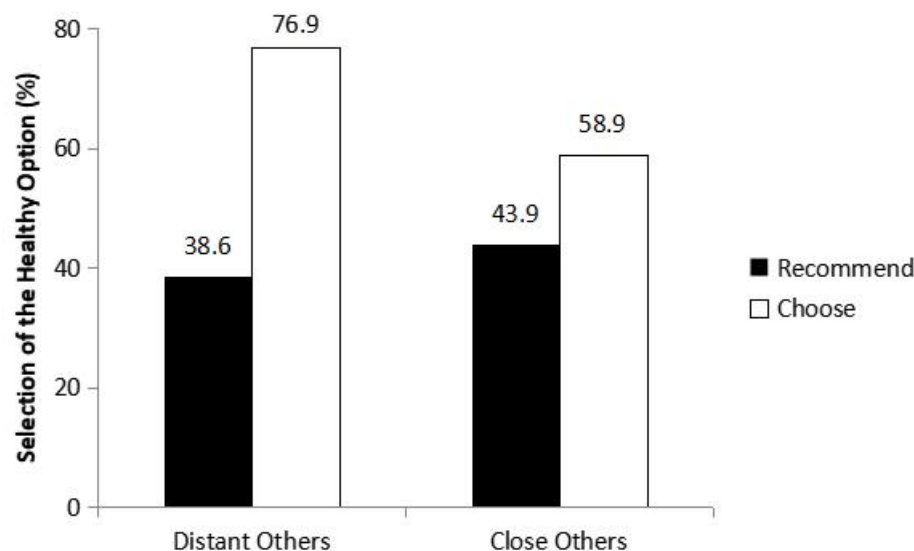
#### 4.1 Method

We randomly assigned two hundred and fifty-seven undergraduate students to a 2 (decision tasks: recommendation vs. choice)  $\times$  2 (social distance: close vs. distant) between-subjects design. Participants followed a procedure similar to Study 1 except that we told them that the other person (a good friend or student A) had already had a healthy snack a short while ago. We then asked them to choose or recommend a second snack for the person. For the choice task, this procedure provided the information from which participants could infer the other person's food preference (i.e., healthy snack). If participants indeed focus on others' preferences in a choice task, we expect them to choose the healthy option to be consistent with such preferences, rather than to choose the unhealthy option as we found in Study 1. For the recommendation task, this procedure provided the information about the (healthy) nature of the person's first snack. If participants focus on ease of justification, we expect them to recommend an unhealthy option to balance the first snack, rather than to recommend the healthy option as we found in Study 1. Furthermore, based on the same reasoning as Study 1, we also expected the difference between recommendations and choices to be more pronounced for distant others than for close others. After the participants had made the decision, we asked them to list their thoughts about why they chose or recommended the option.

#### 4.2 Results

Participants perceived a friend to be socially closer than student A (5.28 vs. 2.94,  $t_{433} = 21.12$ ,  $p < .001$ ) and rated fresh fruits as healthier than candy bars (6.44 vs. 1.80,  $t_{434} = 62.71$ ,  $p < .001$ ). This confirms our manipulation that a good friend (student A) is a socially close (distant) other and fresh fruits (candy bars) are healthy (unhealthy) snacks.

The results of a binary logistic regression with decision task and social distance as independent variables, and liking of fruits and candy bars and health consciousness as covariates showed that, overall, participants were more likely to recommend an unhealthy (vs. healthy) option (58.8% vs. 32.1%), and choose a healthy (vs. unhealthy) option (67.9% vs. 41.3%; Wald  $\chi^2(1) = 21.82$ ,  $p < .001$ ) for the person. Also, a significant interaction between decision task and social distance (Wald  $\chi^2(1) = 4.36$ ,  $p < .05$ ) showed that, for distant others, participants were more likely to choose than to recommend the healthy option (76.9% vs. 38.6%,  $\chi^2(1) = 20.23$ ,  $p < .001$ ). However, for close others, participants were marginally more likely to choose than to recommend the healthy option (58.9% vs. 43.9%,  $\chi^2(1) = 2.72$ ,  $p = .10$ ) (Figure 3). These results confirmed our expectations that consumers would likely choose (recommend) a healthy (unhealthy) option, should the person prefer healthy food and unhealthy food be a more justifiable option in the decision scenario.



**Figure 3:** Study 2a Results

We analyzed the participants' verbal protocols to examine the reasons for their decisions. Two judges who were blind to the objectives of the study coded participants' reasons. The main categories that emerged from the coded responses were: (1) others' preferences (e.g., "because from the first snack, it is clear that Person A prefers healthier foods"), (2) balancing (e.g., "they had already had a healthy snack, so having a candy bar would balance it out"), (3) health benefit (e.g., "eating healthier food is always a better option"), (4) taste enjoyment (e.g., "it's tastier"), (5) variety (e.g., "this way they are able to have a variety of snacks"), (6) energy and fillingness (e.g., "the healthy/rich snack is more filling"), and (7) other (e.g., "buying fruits at a cafeteria is too expensive", "eating fruit is messy"). The percentage of inter-coder agreement was 97.9% (Kappa = .97,  $p < .001$ ). The judges discussed and resolved all the disagreements. We argued earlier that participants were more likely to recommend (choose) an unhealthy (healthy) option in this study because they tended to balance the person's first

item when recommending, but relied on the person's preference when choosing. Supporting these arguments, we found that among participants who recommended the unhealthy item, 32.9% of them had balancing-related thoughts, the highest of all other thoughts (others' preference-related thoughts: 6.3%; health benefit-related thoughts: 0%; taste enjoyment-related thoughts: 8.9%; variety-related thoughts: 8.9%; energy and fillingness-related thoughts: 24.1%; other thoughts: 19%). Among participants who chose the healthy item, 86.6% of them had others' preference-related thoughts, the highest of all other thoughts (balancing-related thoughts: 0%; health benefit-related thoughts: 6.1%; taste enjoyment-related thoughts: 0%; variety-related thoughts: 0%; energy and fillingness-related thoughts: 1.2%; other thoughts: 6.1%). These results show the main reason why participants recommended an unhealthy but chose a healthy item for the person in this specific decision scenario.

### 4.3 Discussion

The results of Study 2a show that consumers focus on others' preferences when choosing on behalf of others but focus on ease of justification when recommending to others. Specifically, when we told consumers that the other person already had a healthy snack, they were more likely to choose a healthy option to match the other person's preference but recommend a balancing unhealthy option for ease of justification. The difference between choices and recommendations was more pronounced for distant (vs. close) others. These results suggest the mechanism through which consumers make different decisions for others in different decision tasks. Further analysis showed that participants were equally likely to recommend an unhealthy option to distant and close others (38.6% vs. 43.9%,  $\chi^2(1) = .40$ ,  $p = .53$ ), but they were more likely to choose a healthy option for distant (vs. close) others (76.9% vs. 58.9%,  $\chi^2(1) = 4.52$ ,  $p < .05$ ). These results are consistent with the pattern of results in Study 1 and suggest that consumers' decisions in the recommendation task are less affected by the decision recipient's social distance than are those in the choice task.

Despite the strong results, there are a few caveats in Study 2a that we need to rule out. First, some participants indicated in their verbal protocols that they recommended a candy bar (the unhealthy option) because they believed others were variety seeking (Choi et al. 2006) and the person just had some fruit. This is because in Study 2a, we only provided one category of options for each type of food (i.e., fresh fruit for healthy food; candy bars for unhealthy food) in the scenario. Second, some other participants mentioned that they recommended a candy bar because the person was (described as) studying in the library and a candy bar was more filling than some fruit. Therefore, we need to replicate our results in the recommendation task in a decision scenario that does not evoke these two considerations. Third, in sequential consumption decisions for others, sometimes the other person has made the first decision, and consumers only need to make a subsequent decision. Other times consumers need to make both the first and subsequent decisions for the person. The sequential decision scenario in Study 2a only required participants to make the second decision after knowing the person's first decision. We designed Study 2b to address these issues.

## 5. Study 2b

In Study 2b we used a different decision scenario from Study 2a, provided more varieties of options for healthy and unhealthy food, and asked participants to make both the first and second decisions to examine consumers' sequential consumption decisions for others.

### 5.1 Method

We randomly assigned two hundred and five students to a 2 (decision tasks: recommendation vs. choice)  $\times$  2 (social distance: close vs. distant) between-subjects design. We asked them to imagine that they were in an event sponsored by a local company and met either their good friend (close other conditions) or person A whom they had met once on another occasion but did not know the person well (distant other conditions). We first presented them with four options for lunch at the event: bacon cheeseburger and cheese steak sandwich (the unhealthy ones), and grilled chicken wrap and grilled fish salad (the healthy ones). After they had decided on the lunch option, we presented them with four snack options: candy bars and donuts (the rich, tastier ones), and non-fat yogurt and fresh fruits (the low fat, healthy ones). We provided two options for both healthy and unhealthy food to reduce the possible confound effect of variety seeking. In the recommendation conditions, we told participants that the friend or person A was not sure which lunch and snack to have and asked for recommendations. In the choice conditions, we told the participants that the friend or person A had to step outside to take a personal call while they needed to sign up for their lunch and snack, so the participants had to choose a lunch and snack on the other person's behalf. The rest of the procedure was the same as that of Study 1.

## 5.2 Results

As in the previous studies, participants perceived a good friend to be socially closer than person A (5.25 vs. 3.02,  $t_{203} = 12.42$ ,  $p < .001$ ). Furthermore, participants perceived the healthy lunch and snack options to be significantly healthier than the tasty lunch and snack options respectively (lunch options: grilled chicken wrap 5.67; grilled fish salad 5.59; bacon cheeseburger 2.20; cheese steak sandwich 2.16;  $ps < .001$  for all healthy versus unhealthy lunch comparisons; snack options: non-fat yogurt 5.54; fresh fruits 6.48; candy bar 1.90; donut 1.84;  $ps < .001$  for all healthy versus unhealthy snack comparisons).

We first analyzed participants' decisions for the lunch option. As participants did not know that they needed to make a subsequent snack decision, we expected the results for the lunch decision to replicate the findings of Study 1. A logistic regression with decision task and social distance as the independent variables, liking for each food option and health consciousness as covariates showed a significant interaction between decision task and social distance (Wald  $\chi^2(1) = 4.56$ ,  $p < .05$ ) on the lunch decision. The results showed that overall participants were more likely to recommend than to choose the healthy option (60.4% vs. 39.5%,  $\chi^2(1) = 8.90$ ,  $p < .01$ ). This tendency of recommending a healthy option but choosing an unhealthy one for others was significant for distant others (72.9% vs. 39.0%,  $\chi^2(1) = 12.28$ ,  $p < .001$ ), but not so for close others (46.5% vs. 40.0%,  $\chi^2(1) = .42$ ,  $p > .1$ ). As expected, these results replicated our findings in Study 1 that, without having specific information about others' preferences, consumers tend to recommend (vs. choose) a healthy (vs. unhealthy) food option for others, especially for distant others.

We then examined whether participants would balance the health and pleasure goals (for ease of justification) when recommending the subsequent snack option. Based on participants' lunch decision (first) and snack decision (second) for others, we calculated a balancing variable to indicate whether they balanced the two decisions in healthiness and taste. A logistic regression with balancing as the dependent variable showed a significant interaction between decision task and social distance (Wald  $\chi^2(1) = 7.43$ ,  $p < .01$ ). Specifically, participants were more likely to balance when recommending than choosing for distant others (56.3% vs. 32.2%,  $\chi^2(1) = 6.24$ ,  $p < .05$ ), but not so for close others (37.2% vs. 52.7%,  $\chi^2(1) = 2.34$ ,  $p > .1$ ). These results replicated our findings in Study 2a that, in a sequential decision scenario, consumers are more likely to balance the healthy and unhealthy options when

recommending (vs. choosing) to others, especially for distant (vs. close) others. We also examined whether participants focused on others' preferences when choosing the lunch and snack option for others. As consumers believe that others generally prefer unhealthy food (Laran, 2010), we calculated a preference variable to indicate whether a participant selected an unhealthy option for both decisions. A logistic regression with preference as the dependent variable revealed a significant interaction between decision task and social distance (Wald  $\chi^2(1) = 6.62$ ,  $p < .05$ ). Specifically, participants were more likely to choose than to recommend two unhealthy options for distant others (33.9% vs. 4.2%,  $\chi^2(1) = 14.32$ ,  $p < .001$ ), but not so for close others (29.1% vs. 25.6%,  $\chi^2(1) = .15$ ,  $p > .8$ ). These results again replicated our findings in Study 1 that, without having the specific information about others' preferences, consumers are more likely to choose (vs. recommend) unhealthy (vs. healthy) options for others, especially for distant others.

### 5.3 Discussion

The results of Study 2b replicated the findings of Study 1 and Study 2a that consumers are more likely to focus on others' preferences when choosing on behalf of others but focus on the ease of justifying the decision when recommending to others. These different focuses lead to healthy or unhealthy decisions in the choice and recommendation tasks. Specifically, when we asked the participants to decide on the lunch option for others, they were not aware of the fact that they would be asked to make a subsequent snack decision for others later. Therefore, for this single consumption decision, participants were more likely to recommend (vs. choose) a healthy (vs. unhealthy) option, as healthy options are easier to justify and unhealthy options are believed to be generally preferred by others. Later when we asked the participants to decide on the snack option for others, they were making a subsequent decision after their lunch decision for others. In sequential consumption decisions, participants were more likely to repeatedly choose unhealthy options for others, but likely to recommend a balanced set of healthy and tasty options. Furthermore, Study 2b also replicated the findings of Study 1 and Study 2a that the difference between choices and recommendations was more pronounced for distant others than for close others. This finding was robust regardless of whether participants made decisions for others in a single consumption decision or sequential consumption decisions.

## 6. General Discussion

Consumers make food decisions for other people on many occasions. Previous research shows that consumers believe others are pleasure seeking and thus are likely to choose indulgent but less healthy food options for others than for themselves (Laran, 2010). This research advances our knowledge of how consumers make food decisions for others by demonstrating that consumers do not always make indulgent choices for others. We compare how consumers recommend versus choose healthy and unhealthy food options for distant and close others and show that two factors: decision task (recommendation vs. choice) and social distance (distant vs. close), interact to influence consumers' decision for others. We argue that consumers focus on general others' preferences when choosing on others' behalf, whereas they focus on ease of justifying the decision when recommending to others. These different focuses make consumers decide on a healthy or unhealthy option for others in different contexts. Specifically, we find that consumers are likely to choose an unhealthy option for others when they do not have specific information about others' preferences (Study 1 and Study 2b). When they do have the information about others' preferences, for example, healthy food, they are likely to choose a healthy option to match others' preferences (Study 2a). Further, consumers are likely to recommend a

healthy (over an unhealthy) option in single food decisions (Study 1). In sequential decisions between healthy and unhealthy food, consumers are likely to recommend options that balance health and taste (Study 2a and Study 2b) as balancing is easier to justify and considered a norm. Second, we find that the difference between choices and recommendations is greater for distant others than for close others across all studies.

### *6.1 Theoretical Contributions*

This research contributes to our understanding how consumers make decisions for others, particularly in the food consumption context. First, we examine the effect of two common yet distinct decision tasks on consumers' decisions for others. Past research in social psychology has acknowledged that consumers may engage in two different types of decision tasks for others (e.g., Jonas et al., 2005). In one type of decision task, a person makes a recommendation, and the decision recipient decides whether to follow the recommendation. In the other type of decision task, a person needs to make an actual choice for the decision recipient. The latter often happens when the decision recipient lacks the opportunity, knowledge, or ability to make the decision himself or herself. However, very little research explicitly distinguishes and compares these two types of decision tasks in either social psychology (see exception in Jona et al., 2005) or consumer research. In this study, we examine these two types of decision tasks in the context of food consumption and identify the mechanisms through which these two tasks influence consumers' food decisions for others. Our findings that consumers make different decisions for others in choices and recommendations highlight the importance of differentiating these two different types of decision tasks. Our findings that consumers focus on others' preferences in the choice tasks but on ease of decision justification in the recommendation tasks not only explain why consumers make different decisions in these two decisions tasks but also provide possible routes to mitigate the effect of decision tasks. For example, priming ease of justification (e.g., by priming decision rationale) in the choice task or priming others' preferences (e.g., by priming decision outcome) in the recommendation task may mitigate or remove the differences between choices and recommendations.

Second, we show that the difference between choices and recommendations is greater for distant others than for close others. This result suggests that it is more important to differentiate these two types of decision tasks when researchers examine consumers' decisions for distant others than when they examine decisions for close others. As corollary results, we show that consumers tend to make different choices for distant and close others, but their recommendations to distant and close others are similar. Specifically, consumers tend to recommend a norm-based, easily justifiable option for both distant and close others. This suggests the "what others should do" mindset in a recommendation task may make consumers feel obliged to recommend a normatively "correct" option for others, regardless of their social distance with the decision recipient.

### *6.2 Practical Implications*

Further, recent research in social psychology has documented that self-control is not only an intrapersonal process, but also an interpersonal process (e.g., Fitzsimons & Finkel, 2010). Fitzsimons & Finkel (2011) argue that because self-control is a limited resource and can fail when it is depleted, individuals should outsource self-control to others (e.g., romantic partner) to help them pursue higher-order goals (e.g., health). Our results add to this line of research by showing that asking for recommendations between healthy and unhealthy food options can actually outsource self-control to others. In addition to outsourcing self-control to romantic partners who support goal pursuit as

suggested by Fitzsimons and Finkel (2011), our study shows that asking a distant other without a close relationship for recommendations can also achieve the same objective. In fact, it may be even more effective to seek recommendations from distant others than from close others (as participants were directionally more likely to recommend a normatively correct option to distant others than to close others). Furthermore, the results of this research also make consumers aware that different approaches of outsourcing self-control may lead to different or even opposite outcomes. Specifically, while seeking support by asking others for recommendations would facilitate goal pursuit, seeking support by asking others to choose on one's behalf would in fact hinder goal pursuit.

Our research also provides implications for food service companies such as restaurants and catering companies, and government agencies to help consumers choose healthier options for others. Based on our research, one suggestion is to ask people to change their mindset and think about what food they should choose for or what food they would recommend to their clients, colleagues, participants, etc. In this way, they may be more likely to order healthier food items.

## 7. Limitations and Future Research

The current research also has a few limitations that can be further explored by future research. First, although we have compared different decision outcomes in Study 1 and Study 2 to demonstrate our proposed underlying mechanism, we didn't directly test the mediation effect of decision focus. Future research needs to test this proposed mediation effect and any boundary conditions. Second, we used hypothetical decision scenarios with a limited number of choices, i.e., fresh fruits, yogurt, candy bars, and donuts, in our studies. To generalize our findings, further research may conduct a field study with different or more food options, e.g., meals, beverages. Third, we have examined consumers' recommendations for an option. However, research suggests that there are situations in which individuals need to provide recommendations against a particular type of options (e.g., advise investors not to take risky investment options) (Bonaccio & Dalal, 2006; Dalal & Bonaccio, 2010). Similarly, we examined consumers' choices for an option. However, there are other situations in which individuals need to help others choose against (or remove) options from an existing choice set (e.g., remove toppings from a standard pizza) (e.g., Dhar & Wertenbroch, 2000; Nagpal et al., 2015). It is not clear whether consumers make the same decisions when they decide against an option as when they decide for the option for others. Therefore, future research may examine the interaction of different decision tasks (choice vs. recommendation) and decision type (for vs. against) on consumers' decisions for others. Fourth, we suggest that consumers tend to recommend an option that is easily justifiable. However, different options may seem more justifiable than others in different situations. For example, in our research, we show that a healthy option is more justifiable than an unhealthy one in a single consumption decision, whereas a balanced set of healthy and unhealthy options is more justifiable than an entire set of healthy or unhealthy ones in sequential decisions. Therefore, it is interesting to examine factors that influence the perceived justifiability of options in a recommendation task. Fifth, in this study we include consumers' health consciousness and food liking as covariates, so our results are over and above the effect of these individual variables. Further research may examine whether other individual variables such as one's self-presentation style, i.e., whether to get along with others or to impress others (e.g., Arkin, 1981; Barasch & Berger, 2014; Wolfe et al., 1986). For example, consumers with protective self-presentation style may choose tasty options to get along with others, while those with acquisitive self-presentation may choose healthy options to impress others with their self-control capabilities. Likewise, consumers' cultural background (e.g., individualism vs. collectivism)

may also influence their food decisions for others. Further research may test the effect of these variables on food decision making for others. Lastly, the consumption situations examined in our studies are relatively neutral. There are consumption situations which are inherently hedonic (e.g., dining at a festival) or utilitarian (e.g., dining at a job interview). The inherent valence of a consumption situation may also influence consumers' choices/recommendations for others. Finally, we examined consumers' decisions in a relatively simple scenario where the attribute information of decision objects (e.g., food options) is easy to access and process. However, there are many scenarios in which individuals need to search and process complicated attribute information to make the decision (e.g., investment and medical decisions). Future research may explore how the decision tasks (e.g., choice or recommendation) can bias consumers' information searching and processing in decisions for others.

### Funding

This research did not receive any specific grant from funding agencies in the public, commercial, or non-profit sectors.

### Acknowledgements

The authors would like to thank the reviewers for their constructive feedback.

### Data Availability Statement

The data collected for this research is available upon request from the corresponding author.

### Conflicts of Interests

The authors declare no conflicts of interest.

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