The Public Health Advantage: Crafting Richer Messages & Becoming Better Messengers

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Introduction & Background
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These Ideas Have Emerged from Ongoing Collaboration

Center for Public Health Law Research
Healthy Policy Is a Team Effort

Access to Evidence and Expertise
Expertise in Designing Legal Solutions
Help Engaging Communities and Building Political Will
Support for Enforcing and Defending Legal Solutions
Policy Surveillance and Evaluation

Changing Law & Policy Requires Interdisciplinary Collaborations...and Smart Advocacy

Better Health for All Faster

The 5 Essential Public Health Law Services
CRAFTING RICHER MESSAGES

Access to Evidence and Expertise

Help Engaging Communities and Building Political Will

Support for Enforcing and Defending Legal Solutions
There’s a lot of new thinking about the old art of persuasion

- Judgements of fact, risk assessments, predictions about the future – are all made using shortcuts of which we are not consciously aware.
- These cognitive processes are necessary, amazing – and conducive to bias and error.

Daniel Kahneman et al. (1982)
2002 Nobel Prizewinner in Economics
Science: “You Can’t Trust Your Brain”

System 1
- Automatic
- Unconscious
- Deploys heuristics → biases*

*Representativeness, availability, confirmation, affect etc…

System 2
- Lazy
- Unconscious of System 1
- Rational, but trusts System 1’s input
There’s a lot of new thinking about the old art of persuasion

• Those same unconscious, intuitive processes apply to our values and political beliefs
• Our opinions signal and reinforce group membership
• We’ve made up our minds before we know it
• Our reason serves our intuition
Intuitions come first, strategic reasoning second

90% = Intuitive Elephant
10% = Rational Brain
Social Evolution/Group Selection

- People depended on groups for survival and vice versa
- Groups needed people who
  - Cared about the children
  - Obeyed good leaders but stood up to bullies
  - Put the group interest ahead of their own
  - Heeded the taboos that signaled physical or social risk
Moral Foundations Theory: A Public Health Approach

Gene Matthews
1. Care/Harm
Compassion for those suffering or vulnerable

2. Liberty/Oppression
Free Choices & Actions
Social Intolerance of Bullies

3. Fairness/Cheating
People Treated Fairly & Getting What They Deserve
Social Intolerance of “Free-Riders”
Haidt’s Six Moral Foundations


4. Loyalty/Betrayal
- Personal Trust, Group Identity,
- Social isolation who betray

5. Authority/Subversion
- Competitive advantage of organized groups
- Social intolerance of those who subvert the system

6. Sanctity/Degradation
- Not simply a religious value
- Some parts of the human spirit are elevated & pure
- Social aversion to personal degradation
Haidt’s Six Moral Foundations

1. Care/Harm
   “Vaccination saves lives.” “I have to protect my baby from those deadly shots.”

2. Liberty/Oppression
   “I have a right to privacy for my medical records.” “Government has no business telling me how to care for my baby/”

3. Fairness/Cheating
   “Everyone should get their shots.” “People who don’t vaccinate their kids are just free-riders.”
Haidt’s Six Moral Foundations

4. Loyalty/Betrayal
   “Getting vaccinated is a duty we owe each other in society.” “CDC has sold our kids out to Big Pharma.”

5. Authority/Subversion
   “Science proves that vaccines are safe.”
   “Mandatory vaccination is a conspiracy to make doctors and Big Pharma rich.”

6. Sanctity/Degradation
   “I got my shots because I believe in the sanctity of human life.” “I refuse to expose my child’s body to toxins.”
Haidt Looked at the Distribution of Foundations in America

Care/Harm, Liberty/Oppression, Fairness/Cheating, Loyalty/Betrayal, Authority/Subversion, Sanctity/Degradation
The Liberal Moral Matrix

Heavy on caring for the weak/preventing harm, rights and fairness as equality of outcome

Help those in need!

Care  Liberty  Fairness  Loyalty  Authority  Sanctity
The Conservative Matrix

Includes care, liberty and fairness (as equality of opportunity), but even more on the “institutional” values of loyalty, authority and sanctity.

Help those in need!

Preserve norms and treasured institutions!
“The Conservative Advantage”

- Help those in need!
- Preserve norms and treasured institutions!

Bar chart with categories: Care, Liberty, Fairness, Loyalty, Authority, Sanctity.
Thanksgiving Dinner Explained
Public Health Tends to Speak the Moral Language of Liberals

• When we take our evidence and expertise into the political realm to change law and policy, we invoke Care/Harm
  – “lives saved”
  – “harm prevented”
  – “costs avoided”

• When challenged, we fall back on authority
Key Dimensions for Starting the Persuasive Public Health Conversation

- **Use of the full range of moral intuitions**
  - Bring **loyalty** and **sanctity** forward
  - Rely less reflexively on **care** and **authority**

- **Control inherent self-righteousness**

- **Empathy for our targets and opponents**

- **PERSONAL RELATIONSHIPS MATTER**
  -- **Social ties, norms and settings calm elephants**
  -- **Familiarity builds trust**
Liberty and Sanctity (Purity) are significantly associated with Vaccination Hesitancy

Sanctity (Purity) ➔ ”Boost your child’s natural defenses against disease! Keep your child pure of infections—Vaccinate!”

Liberty ➔ ”Take personal control of your child’s health! Vaccinations can help your child and others be free to live a happy and healthy life.”

https://www.nature.com/articles/s41562-017-0256-5
Public Health Resonates With All Six MFT Values

“The Public Health Advantage”

Loyalty ➔ The heart of Public Health is Community Coalition Building

Authority ➔ PH is a police power doctrine (quarantine, food inspection, etc.)

Sanctity ➔ The Nobility of Public Health: When others are running away from the fire, PH runs toward Ebola
Public health has the breadth of moral values and can use them in a way:

- People **all across the political spectrum can feel safe engaging in relationships with us to improve their communities**

...AND...

- Civil discourse is vital to the heart of public health
A Window May Be Opening…

Better Angels

Living Room Conversations

No Labels

Story Corps: One Small Step

…For A Return To Civil Discourse Within Our Local Communities!
BECOMING A BETTER MESSENGER:
THE PUBLIC HEALTH ADVANTAGE

Scott Burris
Key Points So Far

• We humans have a rich set of moral values, though we may not “use” them all.

• “Morality binds and blinds”
  – We all share these values, and we need them to be cohesive and interdependent
  – We can get fanatical about them

• Argument is not persuasion – elephants don’t change under pressure
  – We have to calm own the elephant before we can get the rider to actually engage
Haidt’s First Lesson

Learn to speak more moral languages

Better messages in public health
But there’s a deeper point

The secret of life is honesty and fair dealing. If you can fake that, you've got it made.

Groucho Marx
The Formula

Learn to speak more moral languages

Empathic, respectful relationships

Better PERSUASION in public health

Six Foundational Intuitive Moral Values
Going Deeper

• Public health is a long game – the vaccination game has been playing out in political battles for 3 centuries
• Our greatest power is being right
• Persuasion is maybe ten percent framing and 90 percent relationships of trust
• We can devise better messages, but the bigger question is how we become better messengers for the right message
The Public Health Advantage

Who we are
What we know, and
What we are trying to do
The Public Health Advantage

• We are passionately committed to the public’s health;
  – This is preventing harm, sure, and
  – We work for everyone – equity, but also
  – We love the communities we serve – ours is a sacred calling
  – We will stick with our communities– we are in this for the long haul
The Public Health Advantage

- We aspire to point the way towards healthier people and places, which we define through a dogged but humble reliance on science
  - We are skeptical: we try to see and adapt to facts, and to distinguish facts from values
  - We bind *ourselves* to the authority of science – it is always our guide and never our cudgel
The Public Health Advantage

• We lead through service
  – We provide the best information we can, and offer our best judgments about what it means
  – We do our best to persuade but we respect the democratic process and different values
  – We are stewards and advocates of long-term visions, of strategies that let people learn and adapt on their own schedule, on working with communities to support learning and change.
Virtue

• The public health advantage counts on skills but is ultimately about virtues
  – Humility
  – Rationality
  – Charity in every aspect of work, from how we point the way to the ways we choose to point to
Millennials: New Messengers for Public Health

Lizzie Corcoran
Colleen Healy Boufides
Questions to Answer

1. Who are Millennials and how are they different?
2. Who are the Millennials in the public health workforce?
3. What do Millennials have to contribute to the Public Health Advantage and richer public health messages?
4. What is needed to assist Millennials to serve as new public health messengers?
5. What are the methods for sharing public health messages and promoting dialogue?
6. What are the take-aways for people that work with Millennials?
1. Who are Millennials?

• Born between 1980 and 2000 (currently ages 18-38)

• Most diverse generation – 44% identify as minorities (Brookings, 2018)

• Most educated generation (Pew, 2015)
Why talk about Millennials?

Workforce - by Generation (2015)

Silents  Boomers  Gen Xers  Millennials  Post-Millennials

Source: adapted from Pew Research Center, 2018

Millennial Trend #2: Identity-focused → Preference for “virtue signaling” over communicating and connecting. (See Bartholomew, 2015)
How are we different?

At Work
• Less hierarchical
• Loyalty to cause
• Nontraditional
• Self pressure and expectations

In Communication
• Technology and social media
• More communicative, less connective
• Image conscious, identity focused
2. Who are Millennials in Public Health?
Trends Shaping the Young Workforce

• 300% growth from ‘92 to 2016
• 5th fastest growing degree out of 500 graduate degree programs
• Growth partially contributed to the school’s “do good” appeal (Leider et al., 2018)
New Trends in Public Health Schools

https://www.marriott.com/hotels/travel/phxwp-sheraton-grand-at-wild-horse-pass
This is a good thing
“Monoculture” as a Side Effect

• “The academic world in the social sciences is a monoculture .... those fields seem to be really hostile and rejecting toward people who aren’t devoted to social justice.” Jonathan Haidt

• We risk the creation of an insular bubble

• Graduates may not be able to speak all 6 moral foundations

Reinforces Millennial inclination to care about our images and identities
3. What Can Millennials Contribute to Richer Public Health Messaging?
• Dedication to public health
• Care about communities and social good
• More loyal to causes than institutions; look for non traditional allies
Online Advantage

• Tech savvy
• Amplification of messages using social media
4. What is needed to assist Millennials to serve as new public health messengers?
Asset

Millennial Trend #1: Cause-driven
“Cause not loyalty drives engagement.”
(Millennial Impact Report 2016)

Challenge

Millennial Trend #2: Identity-focused
→ Preference for “virtue signaling” over communicating and connecting.
(See Bartholomew, 2015)
Asset  Millennial Trend #1: Cause-driven

Challenge  Millennial Trend #2: Identity-focused

Opportunity

[Identity ≠ Image]

Building identity around the shared cause of public health.
5. What are the methods for sharing public health messages and promoting dialogue?
“Signaling” at “Communicating” to “Connecting” with
Signaling or Communicating?

Today I learned that #notallmen is now used as a mockery against men who try to defend themselves when lumped with other men. Accordingly, men are supposed to just be “guilty” and sorry in behalf of all men, to be a good ally. Personally find this discriminating. Thoughts?

(May 23, 2018)

Men,

Don’t say you have a mother, a sister, a daughter...

Say you have a father, a brother, a son who can do better.

We all can.

#MeToo

(May 24, 2018)

Most patriarchy advocates I’ve seen have entered 2018’s #MeToo moment kicking and screaming. They aren’t really interested in protecting women and children. They’re interested in saving face now that people like Paige Patterson have exposed their true rot.
Public Health as a Cause prioritizes results over righteousness.

- Strives to find common ground and **embrace shared values** rather than emphasizing difference.
- Might accept the most effective or achievable intervention, **without demanding loyalty to the same cause**.
- Assumes the person I am talking to (in person or online) is potentially my most valuable partner... and is **as smart and virtuous as I am**.
6. What are the take-aways for people that work with Millennials?
Millennials are prepared and committed to working here.
Millennials are an Asset to the Public Health Advantage

Mentoring Millennials to be Cause-Leaders

- Create space, incentive, & opportunity for creativity & innovative partnerships
- Pass on institutional knowledge, prepare to lead, create upwardly mobile career paths

Leveraging Millennials as Messengers

- Use social media to amplify cause-driven (rather than image-driven) messages
- Recognize opportunities to connect rather than differentiate, via social media & in person
References


My counsel to our beloved field of public health is to NOT stop talking about facts, analytics, determinants, vectors, patterns and predictors. But we must ALSO talk about our crazy love for the people—the public.
Thank You

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