

Why telling stories could be a more powerful way of convincing some people to take a COVID vaccine than just the facts

16 February 2021, by Margie Rogers



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Scientists don't know exactly what percentage of the population will need to get a COVID vaccine to achieve [herd immunity](#). Some diseases, [such as whooping cough](#), need very high [rates of vaccination](#) between [90-95%](#).

The rise of new, more infectious [coronavirus](#) variants might mean even [more people may need to be vaccinated](#) against COVID than we initially thought.

One question therefore becomes crucial: how will governments convince enough people to get vaccinated to achieve [herd immunity](#)?

One method might be to use emotional storytelling to sway people who aren't convinced by fact-based logical messaging.

Appeals to logic or emotive stories?

Many people will say yes to being vaccinated. [One international survey](#), published in October last year, found an average of 71.5% of participants

(from 19 countries) would be likely to accept a COVID vaccine.

But some people who would normally be pro-vaccination might have concerns about the speed of the approvals of these vaccines.

To deal with such fears, the Australian government has crafted [public health messages](#) that appeal to logic using facts, figures and explanations about how the process has been done safely.

However, other people, particularly those who are unlikely to get vaccinated, may not necessarily respond well to these messages.

[Evidence suggests](#) vaccine-hesitant groups are less likely to respond to [factual information](#) particularly from "pro-vaccine" sources.

But they may respond more to [personal stories](#) about the effects of the virus. In [my area of research](#), we call these stories "[cultural health narratives](#)".

Within the [anti-vax movement](#), these narratives are often powerful stories of people negatively affected by vaccinations, or what they believe are vaccine-related side effects. These emotional accounts are very powerful because [we're attracted to narratives](#) and we live our lives through them.

We tell stories about our lives to ourselves, our friends and families through conversations, photo diaries and [social media](#). We consume other people's stories through novels, news, movies and so on.

What's more, some countries have done very well [controlling the virus](#) using low-technology [health](#) measures, such as hand washing, social

distancing, border shutdowns and quarantining.

This might sound like a digression, but stay with me—the downside for these countries is that most people in the population don't know anyone who has had COVID nor lost anyone to the disease. This might mean they are less likely to see the need to be vaccinated.

This also means there's a lack of personal COVID health stories within those countries, including Australia. [Anti-vax messages](#) often use emotional stories for their own ends, and their messages can fill these gaps if governments don't report their own real health stories.

Unfortunately, Pete Evans is out there again promoting dangerous and unfounded medical advice. The science is in. The evidence is clear – vaccination saves lives [#VaccinesWork](#) <https://t.co/bMAZAPNaJV>

— AMA Media (@ama_media) [January 14, 2020](#)

How could governments use storytelling?

When we hear a [story](#), we often lower our guard and tend to start responding emotionally to the characters. [Parents](#), educators and religious leaders have long used this as a way of teaching.

Governments could use storytelling to potentially improve COVID vaccination rates particularly among those who are unlikely to get the jab.

Governments could add emotional [health stories](#) to their vaccination messages.

These narratives could show the negative effects of the virus on people's lives, and/or they can be used to show the positive effects of vaccinations to help avoid disease.

These could be targeted towards those that might be more likely to be [influenced by stories](#), using traditional and social media platforms.

These true, personal video accounts could include:

- people who have had the virus, recovered but have [long-term health problems](#)
- people who have lost relatives, [and were isolated from them](#)
- [health workers](#) who have worked in places where the virus is out of control.

Do health stories work?

Emotional and personal health narratives [can be a powerful way](#) of communicating [health messaging](#), and the benefits of vaccination.

[One study](#), conducted by Professor Julie Leask and colleagues, showed 37 parents both anti-vaxxer health stories and medical pro-vaccination stories.

The pro-vaccination stories included footage of children with measles and whooping cough. Every focus group recalled the footage, with some parents labelling it "shocking" and "devastating". The authors noted that parents, when voicing support of vaccination, leaned on stories in the decision process—not just facts.

The authors concluded that "stories about people affected by vaccine-preventable diseases need to re-enter the public discourse".

[Another study](#) highlighted the positive effects of first-person narratives on young people to help them avoid Type 2 diabetes. In this study, personal narratives told by people who had the disease were most effective in persuading the participants to change their lifestyle to avoid Type 2 diabetes.

Social media will be challenging

People get information about vaccination from health workers, relatives, friends, and social and traditional media.

[Social media platforms](#) can be problematic because if someone clicks an article with vaccine misinformation, more articles with even more misleading ideas are likely to appear in their news feeds. The opposite also occurs; if someone clicks on pro-vaccination information, more pro-

vaccination information is fed to them. This can lead to [polarisation](#) within the community.

Dealing with misleading health messages about COVID vaccines will be very important for governments, and it'll be vital for them to stay in front of [anti-vax COVID messaging](#). Factual information will be essential, but true, personal [health stories](#) are another tool to convince particular groups.

It seems the federal government is [not yet specifically targeting these groups](#), but may need to in the race for [COVID herd immunity](#).

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