

Pro-mask or anti-mask? Your moral beliefs probably predict your stance

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Governments around the world have <u>recommended or mandated</u> various behaviors to slow the spread of COVID-19. These include staying at home, wearing face masks and practicing social distancing.

Yet individuals continue to <u>flout these recommendations</u> and <u>ignore</u>



explicit rules about wearing face masks. In the U.S., U.K. and Australia, crowds have gathered closely together to protest against lockdowns.

All this poses the question: Why are people not following the rules that protect not only their own health but the health of their community and nation? And how can policymakers and <u>public health officials</u> design better messages to encourage uptake?

How morals guide our decisions

In <u>my latest research</u>, I studied how people perceive the three main recommended behaviors as either "right" or "wrong." I grounded my research on <u>moral foundations theory</u>, which states that people judge the "rightness" or "wrongness" of behaviors along five different moral concerns or "foundations."

The first is whether an action shows you care; the second is whether an action upholds standards of equality; the third is whether it shows loyalty to the group; the fourth is whether it shows deference to authority; and the last is whether it conforms to impulses and the natural way of doing things.

Some foundations are relevant to certain behaviors; others, not so much. For example, <u>parents who are "anti-vaxxers"</u> hold this view because they see vaccines as harming a child's natural immunological defenses. Although that is <u>not true</u>, vaccines still challenge their perception of what's natural. Likewise, <u>when it comes to charitable giving</u>, people donate because they see it as showing they care—not because they see it as "natural" to do so.

One benefit of exploring which moral foundation is relevant to a certain <u>behavior</u> is that it offers a better understanding of how to encourage or discourage that behavior.



For example, policymakers now understand that to encourage vaccinations for children, messages aimed at hesitant parents need to help them see how vaccinations can actually boost a child's natural defenses. But telling these parents that "it shows you care for your child" has little effect, because the "caring" foundation is less relevant.

Morality and COVID-19

I surveyed 1,033 Americans during the last week in April 2020, asking them how relevant each moral foundation is to staying at home, wearing <u>face masks</u> and practicing <u>social distancing</u>.

I found that Americans, on the whole, associated all three behaviors with the "caring" and "equality" foundations. Indeed, staying at home when you don't need to go out shows you care about others—I call this the caring foundation. But staying at home helps flatten the curve only if everyone does it—the equality foundation. The same can be said for wearing face <u>masks</u> and social distancing.

But I also found important age differences in two other moral foundations.

Younger adults felt that staying at home and wearing face masks go against their nature—what I call the nature foundation. It would make sense. Younger adults are more likely to <u>crave social interactions</u>, and so staying at home goes against what they perceive to be natural human behavior.

Meanwhile, wearing face masks not only is uncomfortable but hides one's face, which also goes against beliefs about how human beings are supposed to socialize.

Older adults, on the other hand, felt that all three behaviors show a



greater value placed on communal goals and <u>public health</u> over personal comfort.

Interestingly, the authority foundation didn't relate to any of the three behaviors, regardless of age.

Policy implications

By understanding which moral foundations are relevant, social marketers, public health officials and policymakers can design more effective appeals to get people to stay at home, wear face masks and stay 6 feet apart.

For example, because Americans see the actions as showing they care, emphasizing how those behaviors show caring will likely increase compliance.

To target younger adults, who see staying at home and wearing face masks as going against the social nature of human beings, messages should suggest how these actions can actually facilitate socialization.

For example: "Wearing a mask lets you stay in touch, safely." Common slogans such as "<u>Staying Apart, Together</u>," while whimsical and a play on words, are unlikely to increase younger adults' uptake, since the "communal" foundation is a less relevant concern for them. Those slogans may be more effective for older adults.

If governments and public health officials really want to promote staying at <u>home</u>, wearing face masks and practicing social distancing, they can't just say "it's moral to do so." They might want to learn to appeal to the relevant moral convictions of the population they are targeting.

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