

PUBLIC HEALTH IN THE AGE OF ANXIETY: RELIGION, CULTURE, AND VACCINE HESITANCY

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CAVEATS

- What I am/am not
- Basic interests:
 - Religion in the public arena/discourse
 - Religion and public health
 - Religion and public safety
- How I got interested in vaccine hesitancy
- The result.....

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PUBLIC HEALTH IN THE AGE OF ANXIETY

*Religious and Cultural Roots
of Vaccine Hesitancy in Canada*

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OBJECTIVES

- 1. Note the *religious roots* of vaccine hesitancy
- 2. Offer a brief critical reflection on the key *cultural shifts* that have given rise to significant levels of doubt about vaccine programs
- 3. Question *the standard distinction* between cultural and religious reasons for vaccine hesitancy and rejection

FIVE TRENDS: RELIGION IN CANADA

- Main changes:
 - Decline of mainline/historic forms of Christianity
 - Relative stability in conservative Protestantism
 - Rapid growth in non-Christian communities (Muslims, Sikhs, et al)
 - Rapid growth/renaissance/resurgence in Indigenous spiritualities/traditions
 - Rapid growth in “nones” - 24% in Canada; 44% in BC (2011)

RELIGIOUS OBJECTIONS: 3 MAIN ROOTS

- 1. Ethical dilemmas associated with using human tissue cells or any animal tissue to create vaccines
 - E.g., concerns among Catholics about human tissues from aborted foetuses used in rubella vaccine – very uncommon among Catholics
- 2. Beliefs that the body should be healed by God, prayer, or other spiritual means
 - Measles outbreak of 2014; pertussis outbreak in 2012, both in the Fraser Valley, British Columbia, and an outbreak of rubella in 2005 near Woodstock, Ontario
 - Fundamentalist form: Dutch/Calvinist Reformed Christianity; God's plan; resistance to "the world"
 - Non-mainstream liberal form: Christian Scientists
- 3. Vaccines are part of a crusading religio-political agenda to harm/control population
 - Nigeria, Afghanistan, Pakistan: concerns about WHO and CIA use of vaccines to promote other agendas

CULTURAL FORMS:TWO ROOT CRISES

- **Crisis of Trust**

- Generally high public acceptance of vaccines >80% generally (WHO 2012)
- But there are problems, evident in:
- Growing concern over the commodification, corporatization, instrumentalization, and securitization of human life: pop culture full of these dystopian tropes (Matrix, Blade Runner, Hunger Games, Walking Dead...); Trump and Brexit rhetoric accentuate these concerns; actual vaccine errors and poor bedside manner do not help

CRISIS OF TRUTH

- 1960s+ destabilization of “hegemonic” social/political norms
- 1970s+ globalization
- 1970s/80s+ post-modernism/post-colonialism in academia
 - Hyper-diversity of sexual/artistic norms
 - Relativism as taken-for-granted posture
 - Critique of “neo-liberalism” + “white supremacy” + “male privilege”
 - Celebration of
 - “other ways of knowing,” the “social construction” of everything, the objective/possibility of “cultural safety” and a vilification of “positivism,” “science,” “truth,” “authority,” and “tradition”
 - Dawn of post-truth era (thank you, Mr. Trump, but there were precursors)

WHAT IS THE *FUNDAMENTAL DIFFERENCE BETWEEN* RELIGIOUS AND CULTURAL FORMS?

- Obvious differences in referents (transcendent vs. imminent)
- Obvious differences within/among forms even of the same “type” – i.e., Christian Scientists would not necessarily affirm RC perspectives on fetal tissue; and conspiracy theorists would not necessarily affirm homeopathy

• But does that *conceal some fundamental similarities?*

- *Within most anti-vaccine subcultures, one also finds suspicions and misgivings that are rooted in what we may – in general – call spiritual, magical, or otherwise extra-rational thinking and experience.*



CASE STUDIES: (I) WAKEFIELD

- When Andrew Wakefield suggested in a 1998 article published in *The Lancet* that the measles, mumps, rubella (MMR) vaccine was “implicated” in the emergence of autism, his claim became a pillar in the vaccine-hesitant and rejection subcultures
- Article retracted; Wakefield’s licence revoked; theory debunked by most scientists
- Nonetheless, the theory continues to have a life of its own.....

CASE STUDIES: (2) HOMEOPATHY

- Homeopathy emerged at the end of the eighteenth century and has become an important part of the alternative (or complementary) medical movement over the past several decades
- Homeopaths and their patients believe that their “natural” remedies will suffice to protect them against infections or will adequately manage their symptoms if they do get ill
- A 2005 meta-study of empirical assessments of homeopathy was published in *The Lancet* that demonstrated no positive (i.e., non-placebo) effect of the therapy
- Nonetheless, the therapy/theory continued to have a life of its own.....

UNDER THE “NONETHELESS...” MORAL PANIC

- In the MMR-autism and homeopathy case studies, one witnesses not simply forms of conventional medical scepticism but the beginnings of a “**moral panic**” emerging from a combination of the **crises of truth and trust** with increasingly popular alternative, **extra-rational** approaches to the body, science and truth itself that are **destabilizing medical authority**

HOW TO EXPLAIN THE ENDURANCE OF MAGICAL THINKING?

- “We” overestimate the importance people place on non-contradiction; most people don’t live in their heads
- “We” assume everyone must value empirical facts, linearity, evidence, but most people live in their emotions/gut/intuition
- We all actually vacillate between rational and extra-rational ways of thinking/acting
- Truth – in the normal sense of the word – just matters less than we assume

IMPLICATIONS OF THIS/OUR INTELLECTUAL CONCEIT

- We alienate skeptics/rejectors with more-and-more data
- We alienate skeptics/rejectors with condescension
- There are too many skeptics/rejectors to ignore or quarantine

SOLUTIONS/BEST (BETTER) PRACTICE:

- Play the long game
- Acknowledge the role of error and capitalism in current practice
- Acknowledge our own mixing of cognitive styles
- Learn from scholars and clinicians about how people regularly do speak and interact across gaps in identity and values
- Think about vaccine hesitancy **not just, or mainly, as a rejection of something** but as an **affirmation** of something else (the wonders of the body, non-violence, mystery, universal harmony, peace, environmentalism, social democracy, individual freedom)

BACK TO WAKEFIELD AND RELIGION

- *New York Times Magazine* 2011 article on the Wakefield case
 - Wakefield's "post-career apocalypse,"
 - "cult status"
 - "sense of mission"
 - she mentions his followers' "faith in his theory" and sense that he is a "martyr."
 - "to the anti-vaccine community, Wakefield is Nelson Mandela and Jesus Christ rolled into one"
 - "he is the kind of religious leader who is a true believer but who relies on the occasional use of smoke and mirrors to goose the faith of his followers"... and "with a little effort, you can believe almost anything."

FINALLY.....

- Wakefield's supporters dealt with challenging scientific evidence in ways similar to sincerely committed religious people faced with contradictory evidence (e.g., “when prophecy fails” research)
- *The distinction between “cultural” and “religious” forms of hesitancy and rejection might be analytically convenient, but it might also prevent a consideration of some of the commonalities between the two that would have significant implications for our understanding of vaccine hesitancy/rejection.*