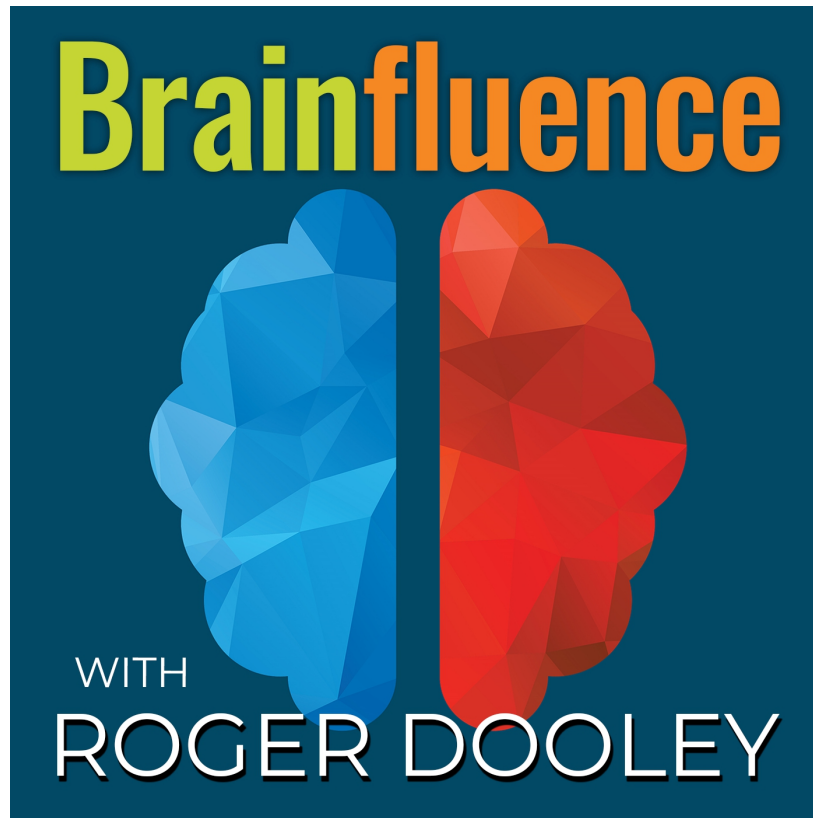


**Vaccine Hesitancy: a Science-Based Approach with  
Matt Tullman**

<https://www.rogerdooley.com/matt-tullman-vaccine>



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**Roger Dooley**

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Welcome to Brainfluence, where author and international keynote speaker Roger Dooley has weekly conversations with thought leaders and world class experts. Every episode shows you how to improve your business with advice based on science or data.

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Now, here's Roger.

Roger Dooley: Welcome to Brainfluence I'm Roger Dooley. Today's topic is so timely that we immediately pushed this episode into production. The topic is vaccine hesitancy and the overall issue of communicating science in a pandemic. As I'm recording this in the United States, we are at an inflection point for vaccination. Until now demand for shots has exceeded the supply. Today, though, we're seeing some areas shift to having more supply than demand, even though those areas may have vaccination rates of 50% or less. Joining me is behavioral psychologist, Matthew Tullman. Matthew is co-founder and CEO of Merchant Mechanics, and a founding partner at Bellwether Citizen Response, he has over twenty-five years of experience in consumer insights and focuses on applying behavioral implicit and neuroscience research to better understand consumer motivation, and decision-making. Matthew, along with coauthor, Steve Jenko and Kimberly Rose Clark just published an article titled, How Not to Fight Vaccine Hesitancy; Lessons for Brain Science and Nancy Reagan. Welcome to the show, Matt.

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Matthew Tullman: Thank you, Roger. It's a pleasure to be here.

Roger Dooley: Matt, what does Nancy Reagan have to do with vaccine hesitancy?

Matthew Tullman: So, Nancy Reagan is certainly remembered for her role in the war on drugs and her tagline that was established during a particular message that she delivered to a classroom of children back in the early eighties, was in a response to a girl who simply said, "What do I do when faced with the opportunity to do drugs", and Nancy quite eloquently, and succinctly said, "Just say, no." What we understand now is that the war on drugs with that particular mantra was not as effective or nearly as effective as was estimated it would be. And we're running into the same kinds of issues today where we're having a large proportion of the population being advised to do something that they may have fears or otherwise not want to do. And the approach that is being taken by the ad council and other organizations to message that out is a very similar type of approach in terms of personal responsibility. And so it's important for us to deconstruct what that means and why that's not necessarily the most effective approach to influence behavior.

Roger Dooley: Well, it seems that this is like any other marketing problem. And since you've got such a diverse group of people who may not be looking to get the vaccine as quickly as they could it strikes me, Matt, that one approach simply isn't going to work regardless of how effective that message is. Certainly there are different groups of people. There are different personas, different cohorts in the vaccine hesitant group that have very different motivations. For some period of years, I might've been considered hesitant to get the flu vaccine. That is something that... To me, I just felt I wasn't opposed to flu vaccines. I didn't think they were inherently dangerous for me. It was something that was simply not that critical to do. It was inconvenient. I would have to go in and get a shot. And maybe have a reaction, wasn't even too worried about reaction, but just the inconvenience

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of doing that and the thought that, well, A most people don't get the flu, B there's a lot of other vaccinated people out there, so I'll probably be lucky.

Roger Dooley: And eventually there was one year when the flu was supposed to be particularly virulent. And I was also at an age where people said, "Well in that age, your symptoms might be a little worse." So I said, "Okay, I'll get the flu vaccine." And since then I've done it. But I mean, in the current pandemic, we've got people who feel that it's a political necessity not to get the vaccine. They feel that it is some kind of a fraud, some people think the COVID itself is a hoax or at least way, way overblown from the reality and the true danger and so on. And talk a little bit about the different types of hesitancy and how you might address those?

Matthew Tullman: Well, absolutely. And you're spot on that it's not a one size fits all issue. And this is very common. In many marketing contexts, we have a very diverse population around the world or even within the country. And certainly that is not lost on marketers. The issue is timing is certainly a factor. The idea that the efficiency of reaching the largest population or segment of the population in the most effective or most efficient manner drives a lot of those kinds of communication decisions. But in this particular case, it's extremely important to recognize the high degree of variability of the drivers of this hesitancy. It can be from a simple fear of needles. That's not surprising. I myself have a long history of fear of needles. And that has prevented me from, similar to you, from all going back a long time, not really wanting to subject myself to that.

Matthew Tullman: And lots of arguments have been pushed towards me to overcome those fears, discount those fears, and they tend to be logical. And I think a lot of the arguments that we're seeing tend to be logical, and again, from a marketing perspective, a common challenge. How do you reach individuals in a manner that is to drive a change in behavior? And let's be clear. The percentage of individuals who are in some way, hesitant is going to prevent us if nothing is done to reach them effectively, it's going

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to prevent us from reaching this herd immunity, which is estimated requiring somewhere between 70 and 85%. If we look at the 20% of individuals who have essentially said "No way. I'm not getting the vaccine." And we have estimate it's about 35% of fully vaccinated individuals, I guess, you could say they are willing to get the vaccine, that leaves about 45% of the population.

Matthew Tullman: Well below the threshold currently that we would need to get. If we got all of them, we'd be close, we'd be on the cusp of herd immunity. So, it's really critical that we identify that very different types of hesitancy drivers, these anti-motivators, as it were. And unfortunately, a lot of marketers, it's a common problem. Try to drive changes in behavior through logical arguments. They make the assumption that we, as human beings are largely rational and sometimes emotional, but converging research over the past 20, 30, 40 years has really told us a different story. And that is we're actually largely emotional beings who are sometimes rational. So in deconstructing the different types of whatever the hesitancies are, the focus should really be about uncovering what those fears are on an emotional level, rather than a logical or rational level, and in doing so we can start to get away from argumentative or logically oriented statements or direction to stories that empathize and allow us to connect with the emotions portions of these fears.

Matthew Tullman: And more importantly than that, the emotional connections we have at returning to normalcy. And I think there's a lot of problems with some of the early communications that have come out about driving the vaccine. It's been about numbers. It's been about pressures. It's been about personal responsibility. It's been about personal consequences and all of these tend to invoke a natural defense of ours. First of all, it doesn't really speak easily to people who don't think about numbers all the time. So, from a processing fluency standard point, we've increased the amount of friction that's present in the consideration of any of these more logical arguments. On the other side, we have the problem of potentially

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framing the issue in a negative light, which can in turn exacerbate hesitancy as opposed to release individuals from the constraints of their fears.

Roger Dooley: Yeah. It seems odd that people who are very accomplished scientists don't quite get some of the long established principles of behavioral science when it comes to their messaging. I mean, and part of that is not necessarily even the scientists' fault because their words get filtered through news reporters and other mechanisms that focus on what they think their readers will find, or their viewers will find interesting. So a million successful vaccination shots with no problems, that's kind of news. One person dying and grizzly death, wow, that's front page material there. And I think we see a lot of in, I think, even just the way that the efficacy of vaccines has been communicated somehow you tell an epidemiologist that this vaccine has an 80% efficacy rate. It's like, "Wow, that's amazing. That's phenomenal, better than most." You tell a regular person that, it's going to be, "Oh, that's all? Oh, man, one out of five people is going to get it."

Roger Dooley: And instead of in this case, focusing on the fact that the vaccines that are out there have been essentially a hundred percent effective at preventing hospitalization, or very serious cases and fatalities the, you get these other numbers thrown out there and anytime you have that effective sort of what's salient the terrorist incident in Paris is so salient that nobody wants to go to France anymore. Even though the odds of getting killed by a terrorist in France are probably a way better than being struck by lightning there but it's, what's obvious. And when, when the news reports focus on some negative outcome somewhere, that's what sticks in people's minds.

Matthew Tullman: Yeah. I mean, and we see that all the time, especially, driven by the media, I mean, we think about transportation and air travel, the risk of sustaining a catastrophic injury, and driving an automobile is far higher than that by orders of magnitude than dying in a plane crash, or

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even being part of a plane crash. However, when you see footage of that on a television screen, the salient is orders of magnitude more powerful, partially because it happens so infrequently. And the second is on the flip side car automobile accidents happen so frequently. So there's a bit of a situation there, there's certainly a novelty component, but getting back to why people are afraid of flying that can certainly be given as a reason, I'm afraid of dying in a crash. You're probably not going to see that as one of the main reasons of fearing an automobile, it could be something else, but neither of those situations really get to the heart of the matter in just asking someone why you won't fly or why you won't take the vaccine.

Matthew Tullman: Saying that I don't like needles, or I don't trust the government, or this was developed too quickly, I'm unsure of the science. These are all very rationalized responses that are offered because they want to say something when asked a question, whether it be in a focus group or on a survey, but it doesn't necessarily reflect how they are feeling emotionally about that, what the underlying actual fears are and what their aspirations are because, in the end, motivations are ultimately defined by our emotional connections to the world around us, less so the logical rational component, but they're not purely, there's influence of both, of course. But as I mentioned before, we're more emotional than we are rational, especially when we are talking about our fears and aspirations. So, it's really important that we ask the right types of questions if we want to create messaging that has the right kinds of influence. And certainly it's not going to be a one size fits all.

Matthew Tullman: Some populations may be very impacted by their favorite actor or athletic role model, sports role model, seen taking the shot. That's kind of a step in the right direction, but it's also not necessarily directly attacking or resolving the underlying emotional fears that someone might have. And so it's important again, to utilize some techniques that in combination with the explicit more traditional types of measures, to really understand what is going on beneath it surface. And there's a couple of

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really good examples that are coming out right now. I'll talk a little bit about construal theory and construal theory quite simply put is the fact that depending on how far away something is from us, in terms of our experience, we think about them in a different light.

Matthew Tullman: If something is distant, we tend to think more abstractly about that. So when the pandemic was first starting, we were thinking of abstractly about the beauty of when a vaccine comes, that's going to be a wonderful thing, and we're going to get over this and it'll be in our rear view mirror, but as time went on and the vaccine started to actually materialize at a very rapid pace, some portions of the population started to arrive at this now near term, realization that now is the time to go and get the vaccine. And now things become more concrete. And you start to think about the act in a much different light. The aspirational has now been replaced by some more, very real fear base. And those fears can be very, very powerful and difficult to overcome.

Matthew Tullman: Google just recently put out an ad that was absolutely fabulous in mine and my team's opinion. They actually went through in a very succinct manner, I don't know if you've seen this particular ad, but it's all about search terms. And all it does is focus on a search bar in Google, and it starts off with people searching for how to deal with the pandemic. And there are lots of negative terms. It evokes lots of sad types of school closures and online courses and foreclosures, and businesses closing and all those kinds of things. And then slowly within this 32nd spot, Google starts to move in this trajectory, moving from fears to aspirations, and the search terms to start to change. The search terms now are taking away some of those negative terms such as online schooling and replacing it with returned schooling.

Matthew Tullman: And then at the very end, you don't even know that this is a vaccine at this point until the very last search term gets put in. The very last search term is where to get vaccinated. And it's a very, very elegant

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way of being, A, very simple, the processing fluency is something we can all identify with. The communications, go from fear-based to aspirational based in a very small period of time, it reflects a much larger period of time. And then when they have you in that aspirational state, they give you a solution. And the solution is very simple. Go get vaccinated, but without saying, go get vaccinated. They're just implying that you have made the decision to get vaccinated and are thus now looking for that place. And I think that was a very elegant advertisement that captures many of the brain science tenants that we've been discussing here in a way that some others such as the most recent, I think, the primary ad council ad, which is a question and answer format.

Matthew Tullman: Where they present you with a question something along the lines of "Why aren't you getting vaccinated?" Because if you're not getting vaccinated, you're damaging the country, you're damaging your family. You're damaging yourself. And the answer to the question is you need to get vaccinated. I mean, it's kind of obvious, but it's a very argumentative kind of presentation that leads to the counter argument. If I'm being shown a bunch of information and I have an opinion that of disagrees with you, my natural tendency is going to be well, I'm going to come up with three or four reasons why I'm not going to. And the framing of it is also very poor because it talks about it in terms of minimizing risk. And even though the intention isn't to minimize risk it's to alleviate risk, the fact that you framed it in the terms of risk. Now, people are associating the idea of risky behavior or something risky with getting the vaccine, and implicitly that can actually cause people to be more hesitant because they are making that primed association with risk and the vaccine, even though that was not what was intended.

Roger Dooley: Yeah, that's really good stuff. And we will try and link to both of those ads on the show notes pages, and so we can track them down on YouTube, but a very different approach. And where is David Ogilvy when the ad council really needs him? But it's like I think that there are certainly

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some ad people who understood people's real motivations and you can't argue them into buying something, in this case getting vaccinated. But I wonder about some other types of arguments that might work. One of the things that Bob Cialdini and others found is that social proof is really important. And even in government communication regarding say, paying your taxes on time, instead of threats, which had worked particularly well, simply saying that other people are getting their taxes in on time was quite effective. And unfortunately, I think here, we've got sort of a battle of social proof where you've got a lot of people were getting vaccinated.

Roger Dooley: They're excited, they're bragging about this thing, "Hey, boy, I can feel comfortable traveling now. I can maybe go out to a restaurant", but there's also this cycle of reinforcing social proof from vaccine hesitant people where, unfortunately, social media tends to amplify some of these things about how horrible it is to have to wear a mask, how you'd be crazy to get in a untested vaccine and amplifies any perceived issues or problems. How do you overcome that negative social proof where people are in like an echo chamber where these negative opinions are simply coming back again, and again?

Matthew Tullman: Right. No. And that's one of the key areas that need to be addressed when coming up with the more unique or customized messaging that is aimed at these different groups. And part of the problem here goes back to the earliest days of the pandemic, the way the government, at least our government, was choosing to handle it along more or less kind of party lines. And that in and of itself is a topic of conversation we could spend hours trying to unpack, but the net result of that is that there is an underlying in-group out-group dynamic that is playing out within the vaccine hesitancy community. That's not a surprise to many of the people who I speak with and do research with that, a large proportion of those who are staunchly vaccine refusal, as opposed to hesitant.

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Matthew Tullman: And many of those on the more hardline side of hesitancy tend to be those who are, I want to say antigovernment, but they're certainly more distrusting of the government. They're more distrusting of community involvement. They want a hands-off approach. And certainly that was part of the message that the Trump administration was putting out there, which helped fuel that. And of course, that translates into the media because you've got the two sides of that who are the echo chambers, as these have identified, speaking to those who are already converted, as it were. They're already the believers and really fuels that resistance. And so the messaging, again, needs to be for these different groups first, to understand how these manifestations of either fear, or distrust, are playing out emotionally. What are the other emotions that are associated with that? Because emotions don't live in isolation are some of the techniques that we use are implicit in nature.

Matthew Tullman: And to get under the hood, we don't just rely on what people will tell us. We want to understand the emotional profiles of that underlie those positions or those decisions. So, when we're talking about implicit measurement, the goal is to find these levers, the emotions themselves are the levers. And if we think about them as notes on a scale, I know I'm thinking beyond Ekman seven our techniques are actually, several of them are aimed at understanding emotions, much broader realm than that several dozen of them. But the combinations of those emotions can tell us a lot about the underlying motivations or the overlying motivations, because motivations are comprised of emotional states. And so in order to exact change, you need to change motivations, in order to change motivations, you need to first identify, and then address those emotional components. And that comes in the forms of stories.

Matthew Tullman: If we think about how we teach our children, what do we do? Do we tell them 15 facts as to why they need to look both ways before they cross the street, or not to tell untruths? No. We tell them stories. We tell them stories with morals. We tell them things that they can relate to and

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empathize with that don't get blocked by those rational filters. And I think that if we can do the same sort of... Exact the same sort of process among those individuals who are more hesitant, and speak to them on their terms, emotionally, we have a better chance of bypassing some of those filters, those friction points that some the logical arguments tend to evoke.

Roger Dooley: One thing that I wonder about is whether framing both vaccination and perhaps also mask wearing as a pro-social behavior, not in those terms, of course, but there's seems to be a misunderstanding that if you wear a mask or even get vaccinated, and you're just doing it for yourself, and if you're brave, then you don't have to worry about it. It's because you're willing to forego that protection and pretty much ignoring the fact that with both of those activities, you are protecting the people around you and with mask wearing certainly more so than even protecting yourself. The people who seem to reject these activities are often people who I would say would normally be pro-social. One big group is evangelical Christians who are apparently very vaccine hesitant, but I would say that by and large, they will consider themselves as being really just people who are interested in helping their fellow man, and so on. Is there a way of framing this, that could invoke that those... Helping other people aspect without just sort of hitting that blank wall that's so far seems to be there ?

Matthew Tullman: Well, right. And you're alluding to a topic that is, again, very important and extremely relevant to the situation that, and that's altruism. And there's a difference between being pro-social and being altruistic. And I think that the messages that can be conveyed need to be more about the pro-social than the altruism. I think that that's probably, but oftentimes in efforts to be pro-social we over amplify the altruistic component to it. And that's oftentimes difficult because we're pitted as individuals against the needs of the local few, IE myself, my family and those of the greater population. And unfortunately, in many cases when that group is larger than our close-knit circle, we can again put up barriers,

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and those barriers, again, we need to create channels, emotionally, that connect this ingroup and outgroup. What makes them similar?

Matthew Tullman: And it's not about, I'm more willing to help the world than you are, but rather, what is it that we're both trying to achieve and how can we get there together? And the message might not be the same to both sides. What the aspirations for one group take the example of the pro-social Christian group that you're talking about could be very oriented towards its arrival back, and getting into churches again, and having those communal experiences that have been missing for such a long time, but that's not very different from the types of beach going activities or spring break activities, or getting to go skiing that other groups who may not religiously, or even ideologically agree, but we can all arrive at the same type of emotional or motivational conclusion. And that is, we want to belong to society again, we want to belong to what used to be normal again.

Matthew Tullman:

We don't want to miss out. So fear of missing out can be one, a sense of belongingness can be one, and these are motivators, right? But underlying each of those are the emotions that drive those motivate motivations. And so those emotional states, those emotional dimensions might be different in terms of what belongingness means to one group, as opposed to belonging is to another group, even though the motivation is the same, those cords, those combinations of emotional notes from that scale I was talking about, become very important to understand for each of these different groups.

Roger Dooley: Yeah, by the way, I thought I would interject my own little bit of a social proof here. I have had two Moderna shots, and the experience was uneventful and I feel much better about it. And I don't know anybody who has had side effects. So, I would encourage anybody who has that option to get vaccinated, and use whichever one of the safe vaccines you're able to, but I'm getting back to friction. You mentioned some of the

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cognitive friction involved in the messaging where you start throwing out statistics and people really don't process those very well, but I think there's another kind too. I mean, initially, just trying to get a shot was very, very difficult in many places for our listeners who are overseas, we have a rather fragmented healthcare system in the US, first of all, each of the 50 states had its own vaccine rollout program.

Roger Dooley: And some used drug stores, pharmacies, more extensively. Others used hospitals, other set up mass vaccination sites and giant stadiums and such, it's really not a one size fits all thing, but it was very difficult to get a shot. And particularly for the elderly who are perhaps not very internet savvy, it was difficult, but now we're at a point where it is getting easier, both because they figured out easier ways to communicate availability. You don't have a hundred people trying for every single slot that becomes available, but I'm thinking that reducing friction further, I would guess that there is one group of hesitant people who aren't truly hesitant. It's just too much of a bother for them that they're not going to drive to a hospital that might be a distant point or try and get online to schedule appointments in a pharmacy.

Roger Dooley: But if they knew that, hey, there's going to be a mobile vaccination unit on your street tomorrow, they might go out and do it because they know it would be very little inconvenience for them. And I think that's probably an overlooked area that maybe hopefully we'll get to, especially as we have more vaccine availability. Right now, it's still rationed in many, but the more availability there is I think the easier it is, right, we just went through this discussion with voting in the United States, where do you make it easier to vote or harder to vote? And generally, if it's easier, people have more options, more people will vote. And I think the same is absolutely true for vaccines.

Matthew Tullman: You're absolutely right. And certainly there are certain areas of the country where that's going to be more pervasive. Rural areas

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naturally have built in bear hairs because of just pure distance and reach I'm up here in New Hampshire. And the program to get vaccinated has been very effective. And to the point where now they have a surplus large enough where they've opened the doors for those who are not residents of the state to come in and get vaccinated if you're in Maine or you're in New Hampshire or a Vermont or someplace else. And that was a big change because originally because of the scarcity of the vaccine, there was an enormous amount of protection over the local supplies. But that series of events, that progression, has as largely uncovered the larger issue, which we're talking about now. And in making the vaccine more available and reducing that friction has, in turn, exposed this, we're going to call them a movable middle.

Matthew Tullman: I'm not necessarily talking about those who have no interest in getting a vaccine. And won't be convinced on under any circumstances other than being purely forced to do so, but this moveable middle has now become more apparent and that needed to happen. We needed to identify that this is actually a real phenomenon and also identify where this type of situation is popping up most readily. The second thing that you mentioned that I can really resonate which is unusual for a vaccine or a public health initiative, such as this is the fact that we've got three heavily branded vaccines. And if you think about your story earlier about the flu vaccine, that's never been an issue. I mean, certainly many pharmaceutical companies make flu vaccines and you get a flu vaccine. It's never a question of which one, it's just you get a flu vaccine, but, and I'm not going to necessarily point fingers here, but the media has certainly played a role in creating this branded experience that must be considered.

Matthew Tullman: And guess what? That's another friction point. And so how is it that we can create messaging that gets past the differences between these vaccines? Because they're really not all that different, especially two of them. And then of course, you've got the J&J and again, we could spend a lot of time talking about that particular issue, especially

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the recent news that's been coming out, but ultimately if we can find out what unifies the vaccination being vaccine, as opposed to one vaccine over another and stop fostering potential vaccine envy based on Moderna, great reputation for minimal side effects compared to, say with J&J, which has the airplane disaster kind of analogy playing against it. Very rare, but boy does it really scare the heck out of people when they see that. And it's extremely salient.

Matthew Tullman: So if we can, again, focus research efforts, pre communication research efforts to find what types of similarities. And I'm talking about again, emotional and motivational similarities that all vaccines can rally behind and distance ourselves from the idea that one vaccine is better than the other. And if I can't get the one I want, I'm not going to get it, or I'm going to wait even longer until it's available. These are all things that from a practical, and logistical standpoint can reduce the kinds of frictions that you're talking about.

Roger Dooley: Yeah. One last topic, I mentioned that the whole topic of scientific communication in this last year has been really kind of a crazy situation where you've got this filtering of science. Before, as I was preparing to have this conversation, I looked up some of the scientific papers on vaccine hesitancy, and there are already published papers on this. And some of them are so incredibly opaque that it is really hard to draw a conclusion as to, oh, okay, so yeah, what's the bottom line from this? How do we combat this hesitancy? And further study is required no doubt. But the other thing I've noticed particularly online is the massive amount of bad science that's being promoted, or non-science where people will take two sets of data.

Roger Dooley: Like, okay, here's all the states that had lockdowns and here is the fatality rate in different states and look, see there's no correlation between lockdowns and fatalities. So lockdowns don't work. And that's just one example, but I have seen so many examples of that. And how, as

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communicators, can we fight this? Can we try and keep things calm? Because you get into a rational argument about, well, hey, you're missing these other important variables here. And immediately, you're really going down into the weeds of a hyper rational argument that is going to be lost on people. What do you do?

Matthew Tullman: Yeah. And there's no simple answer to that. I mean, the first, in a grand sense, I would say that, again, we need to have myriad approaches to address the right problems and not try and answer all problems, utilizing one particular method. I don't necessarily feel that the academic research, scientific research that's undergoing, that certainly the media is glomming onto. They have to find sources somewhere. We need to counter that or supplement that with additional research that treats us instead as statistics or Guinea pigs, or a herd to be immunized rather to treat us as human beings again, as emotional, thoughtful creatures and talk to folks in that way, or at least temper some of the barrage of technical information that's available because by and large, again, going back to the people who we really want to try and influence here, they're not reading those papers, they're absorbing the information that's conveyed to them by their media channels of choice.

Matthew Tullman: And in the absence of that aspirational components to what all this means, again, unifying creating some sort of solidarity at an emotional motivate and motivational level. All the science in the world is going to have rather limited and probably disappointing results. Just look at the way climate change has been handled with an enormous amount of charts and graphs and warnings and scientific numbers and predictions and timelines. That's not changing people's behavior. And if it has, it's been a lot slower than I think those who have access to that information would say is necessary to stop bad things from happening. But the most effective ways have been through emotional connections, through the corporations that have taken some social responsibility and created messaging.

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Matthew Tullman: And they've done so by getting better understanding of what motivates their particular consumers and reaching out to them in those terms and the by-product of that is slow change things like replacing plastic straws with paper straws and not talking about necessarily that there has been X number of tons of reduction of plastic. That's all well and good, but on the aspirational side and talking about how you have found new homes for paper that otherwise was going to wind up in a landfill and talk about it from the impact on an emotional level, as opposed to the impact from a statistical level.

Roger Dooley: Well, that's probably a pretty good place to wrap up Matt, how can people find you and your ideas?

Matthew Tullman: Well, there are a few places. The place I spend most of my time is at Merchant Mechanics, and that is [www.merchantmechanics.com](http://www.merchantmechanics.com). I'm on LinkedIn, Matthew L. Tullman. I tweet from time to time. And my handle is @MTullman. You can also find out more about our implicit techniques at [emocenresearch.com](http://emocenresearch.com). And emotion is spelled E-M-O-C-E-N-research.com. There, you can learn more about the emotional dimensions and their underlying influence on emotional mentions and their influence on motivation and the research that we do and how we do it.

Roger Dooley: Great. Well, we will link to all of those places on the show notes page at [rogerdooley.com/podcast](http://rogerdooley.com/podcast), where we'll have audio, video and text versions of this conversation as well. Matt, thanks so much for being on the show and good luck in getting the word out. And again, I'd encourage anybody who is tuning in video, audio, or otherwise to please be safe, get vaccinated if you have that available, and hopefully we'll be able to meet in person before too long.

Matthew Tullman: That would be terrific, Roger. Thank you so much for having me. It was a great conversation.

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