

# Communication Matters: The NCA Podcast | TRANSCRIPT BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

\*\*Please note: This is a rough transcription of this audio podcast. This transcript is not edited for spelling, grammar, or punctuation.\*\*

# Participants:

Trevor Parry-Giles Ambar Basu Eduardo J. Gómez Susan Mello Heather Zoller

[Audio Length: 0:47:53] RECORDING BEGINS

# **Trevor Parry-Giles:**

Welcome to Communication Matters, the NCA podcast. I'm Trevor Parry-Giles, the Executive Director of the National Communication Association. Hi, listeners and welcome to a special bonus episode of Communication Matters, the first in a three-part special series of virtual public programs presented by NCA. NCA typically holds public programs twice each year and these public programs serve to disseminate relevant information about communication and the discipline of communication to various public audiences. These programs are open to community members, members of the media, communication teachers and students and anyone interested in learning more about communication. Past programs focused on topics such as communicating about climate and health communication in underserved communities. Due to the COVID-19 pandemic, NCA's Fall 2020 public programs will be reimagined as a special series of Communication Matters podcast episodes as well as video recordings of those conversations. The public program series entitled 'Communicating During a Presidential Election Year' will include three public programs: the politics of health and healthcare: communicating about health in a presidential election year, communicating about the role of race and social change in politics and Veeps 2020, Kamala Harris versus Mike Pence. So, be sure to check out NCA's YouTube channel for a video recording of today's and the two upcoming conversations in this special 2020 NCA public program series. Today we're going to talk about communicating about health during a presidential election year and joining our conversation is...

#### Ambar Basu:

Ambar Basu, I'm a professor in the department of communication at the University of South Florida.



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

## Eduardo J. Gómez:

I'm Ed Gomez and I'm an associate professor in the College of Health at Lehigh University.

## Susan Mello:

I'm Susan Mello. I'm an assistant professor in the communication studies department at Northeastern University.

## **Heather Zoller:**

Hi, I'm Heather Zoller, professor at the University of Cincinnati in the communication department.

# **Trevor Parry-Giles:**

Now to view all of our panelists' full and extensive biographies, head to our website at natcom.org/PublicPrograms, all one word, natcom.org/PublicPrograms. Hey, everyone and welcome to *Communication Matters*. I study presidential campaigns and quite honestly, I cannot think of a presidential campaign in American history where healthcare, health issues have been more present obviously with the COVID-19 pandemic, with questions about both candidates' physical health, with the future of Americans' healthcare on the line, and now with the sad death of Ruth Bader Ginsburg on Friday. Much of the discussion surrounding her replacement yet to be named concerns the future of the Affordable Care Act. And so, really this is a powerful and important discussion to have and I'm wondering more specifically how all of that discussion of healthcare and health information and misinformation and disinformation influences voters. How does consistent exposure to this really saturated information environment, effectively does it reduce voters' exposure to mis- or disinformation? Does it result in some information overload? I don't know. Ambar, what are you thinking? Does this have any kind of meaningful impact that we can discern on American voters?

## **Ambar Basu:**

Thanks for having us all in here. Thank you, Trevor. I'd like to first say that I am still not a citizen of this country. But I have been following the elections very, very closely for a number of reasons, one of them as you said being the importance of health and me being a healthcare scholar, health communication scholar, I've been really following those parts of the election. Misinformation or disinformation, I don't think we can equate that with propaganda but somewhere there has been a part of political campaigning, political dating since, well, for a long, long, long time. So, this is not new. But what really intrigues me is the shift in media ecology that we sort of see now with social media becoming rather a very important part of campaigns, campaign strategies, disseminating messages and all of that. And of course, we have increased access to other forms of media as well. I was reading this piece on misinformation from The Harvard Kennedy School and they were talking about three main things. The first thing they said was in their survey sort of



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

this amount of misinformation or disinformation doesn't quite have an effect in terms of people making decisions though it becomes easy to point out that people do align with certain beliefs because of the misinformation or disinformation. But what I found most interesting was the fact that, and this aligns with my work as well in terms of how unequal or inequitable distribution of communicative resources or access to the communicative platform and a big part of that is social class. I really think that is a very important part of the communication ecology that we don't always look at or do a great deal of research on. And this particular survey talks about how misinformation or disinformation regarding health and in this case the COVID-19 pandemic has disproportionately affected people who are below a certain socioeconomic, well and income level. And that really is very striking to me because when we are talking about strategies, I think we need to be really careful about that in terms of how we can get people past the misinformation webs and into their logics of reasoning.

# **Trevor Parry-Giles:**

I think that's really interesting. I'm wondering if anybody else has a has a concern about that. I'm always struck at how the COVID pandemic is disproportionately affecting people of color, people of lower socioeconomic status, etc. And yet there's this weird kind of similar problem in the media ecology that you point to which is the suspicion and the general reluctance of people in those communities for good reason to accept information on its face value, information about vaccines, for example. Does anybody have any thoughts on how we combat those two problems?

## **Heather Zoller:**

Well, it's interesting. Ambar raised the issue, one thing that we're seeing is that Hispanics in south Florida are being heavily targeted with misinformation right now, aimed at suppressing turnout for the election. So, every time they're accessing the internet, they're seeing ads that talk about Biden as a pedophile and that COVID was sent by China, it's not a real problem, these kinds of things. So, we realize that part of this disinformation campaign comes from election interference from foreign countries. So, now that's out of my research area in terms of the U.S. government response and the technology behind addressing that. But I do think that it really puts the onus on us as communication scholars to not only ensure that our students have much more media education and media literacy but that we spread that more widely. So, we're health communication scholars but people across a range of areas now have to realize that media education is important to any of the topics we study. The other thing I know is that some of the challenge right now is that people who have misconceptions about coronavirus, for example, there's a partisan divide there. So, more Republicans than Democrats have a misconception about hydrochloroquine or wearing a mask. And so, unfortunately, that creates a challenge because then just talking about the facts as we know it about the condition becomes political.



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

# **Trevor Parry-Giles:**

Ed, did you want to add to that discussion?

## Eduardo J. Gómez:

Yes, those are excellent points, Heather and I completely agree. And I think in terms of targeting Latino communities or other communities of color, I think it's really important that as educators that we try to work with local communities in providing the counter narrative and providing the appropriate information and sort of engaging our research projects maybe with our own students or own projects and trying to counter that narrative and informing these communities that are exposed to this kind of information. And so, I think that we as role of educators have an important role in trying to do that.

# **Trevor Parry-Giles:**

I think that's right and certainly that's at the cornerstone of a lot of what NCA's trying to do, a lot of other academic associations, universities. It's a double bind though because so many universities are trapped in their own drama about COVID-19 and all of that. It's a tough one. Hey, Susan, I'm curious as to anything you might have to say about something Heather mentioned which was this notion of misinformation and the spread and the politicization of sort of basic public health questions. How is it that we've gotten to the point that even the most basic public health matters, precautions about getting seriously ill have become so politicized that the poor lieutenant governor of Ohio, a Republican was booed at a Trump rally for daring to suggest that people might actually wear a mask? How have we gotten to that point?

### Susan Mello:

Yeah. So, I think there's a couple of things that are coming into play here. We're at a stage in the pandemic where we're experiencing caution fatigue. We've received so many messages from public health agencies and the media, from our friends and family about how to tackle and prevent exposure to coronavirus that I think a broad swath of the population is just starting to become desensitized. That being said, when it comes to partisan divides in how we are handling this and approaching these precautions like wearing a mask, I think countries that have done an effective job at battling COVID such as New Zealand have exhibited very strong alignment and messaging between their political leaders and their leading public health officials. And I think what we're seeing on a regular basis is that our President and his administration are continuing to undermine or publicize counter-intuitive information or information that goes against leading medical advice and that is extremely problematic because he has a very strong and large base. And if we want to get to a point where these types of preventative behaviors are considered normative and that we have enough social support to, I don't want to say pressure, but encourage everyone around us to engage in them, right, to prevent the transmission of COVID, we need to have everybody



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

on board. And it may take policy change. I've seen when I go to the grocery store on those rare occasions, there are signs that say you cannot enter the store unless you're wearing a mask and that's what we need. We need regulation that's forcing people to do that and that may take a change in administration or at least states taking on more of this responsibility than the federal government. We know from past studies, for instance, related to smoking that when laws get passed to protect public health, on mass people's perceived risk of that hazard will actually go up as a result regardless of their partisanship. So, policy can actually help push people in the right direction towards believing what the science is telling us.

# **Trevor Parry-Giles:**

Yeah. Ambar, anything else we can do to combat these public health messages?

### **Ambar Basu:**

I had a quick thought about when we talk about a systems perspective or systems theory, we are talking about different stakeholders in a, and we have learned that at a very basic stage in terms of a public health campaign. Engaging the different stakeholders I think at every level so social groups, cultural groups. So, presenting a face from each of these groups rather than trying to like vilify each other and doing it from a more like a ground-up community level. So, I'm talking about responsibility shifting from the career politicians to people who are on the ground like us maybe or like organizing from the ground up level and putting faces to these messages I think might have some effect or might sort of be counter to this massive disinformation that we have like floating around all the time.

### Susan Mello:

Having narratives coming from people who are embedded within these communities that can talk about how COVID affected them personally, how they are engaging in the recommended behaviors, that is going to be received with higher levels of trust and perceived credibility. It's going to reduce counter-arguing. So, Ambar, you're absolutely right. I completely support that approach to this type of messaging.

## **Trevor Parry-Giles:**

That kind of goes back to something Ed said a minute ago which was as educators we need to get into that business as well and I think that's probably right. I guess I'm concerned about how that happens absent a coherent national narrative. It seems to me that's a tough road to hoe in terms of all of us at the grassroots level doing our best and yet we're confronted with this lack of a national strategy or lack of a national narrative about COVID-19.



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

## **Heather Zoller:**

I think it's important to contextualize everything that we're up against. So, I'm just at the very beginning of looking at the anti-lockdown protests. I study health activism and this is essentially anti-health activism. So, I'm just at the beginning, trying to grapple with that. One of the things as communication scholars we think about what is this discourse and why is it persuasive. And we know that American culture is highly individualistic and focuses on freedom from versus that freedom to responsibilities that you have to other people. And so, at one sense, it's easy to say well, when you talk about quarantine, when you talk about lockdowns and it's infringing on freedom. And so, it makes sense that some people would react against that. But I think it's also important that we contextualize those lockdowns in really a very long now history of a movement backed by a lot of money to promote this idea of freedom and anti-government and we need a government so small we can drown it in the bathtub, that people have been given these messages and building communities around that identity since the 70s now as a reaction to the environmental movement, the Civil Rights Movement. So, it's not just the persuasiveness of the messages but it's some people's ability to spread that through news networks and other kinds of things. And we've seen that the groups who are funding and promoting the anti-lockdown protests are connected to a lot of those very right-wing groups. Gun groups, for example, have been involved heavily in that. So, we have to remember the political context. We think about this is going to be a long haul. At the same time what you all were saying is so important about how do we reach people with what messages where there's also this idea of scaring people to death will work. But in fact, we know we need to focus a lot more on efficacy. How can you do this safely? How can you live your life and be safe?

## **Trevor Parry-Giles:**

All of your talk about freedom makes me think of Janice Joplin, right? Freedom's just another word for nothing left to lose. Ed, you wanted to comment on what Heather was alluding to and the sort of anti-health activism.

## Eduardo J. Gómez:

Yes, thank you. Heather, excellent point about the overall context. Well, as a political scientist, I couldn't agree more and I think that what we're seeing is that the U.S. is very culturally different from many countries around the world in terms of individual liberties. If we go back to Louis Hartz's *Democracy in America*, one of the first books I read in graduate school, our culture is individualism and doing things on our own. And so, at this point, we're seeing people influenced by this discourse from politicians or organizations and that's sort of making this such a political issue and it's something that we need to also as educators and in the media remind people about to what level, to what extent do we maintain our individual cultures and do we want to consider other people's views in a time of pandemic crisis? And so, I think that it's important that we do address



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

these cultural and institutional issues. Culture is very difficult obviously to address immediately. I mean we're talking about hundreds of years but certainly something that that we need to address more and to raise in the media and educate our students especially about these issues.

# **Trevor Parry-Giles:**

Ed, that might be a good segue to a more extended discussion of the competing visions that are being offered in this presidential election year because I think you could make an argument that much of Trump's rhetoric surrounding healthcare, COVID-19 and the like is rooted in that kind of individualized spirit of freedom and liberty and don't tell me I have to buy health insurance and don't tell me I have to wear a mask and all of that. How does the Biden campaign respond to that within the context that you were just talking about centuries of value development and ideological identity? How does the Biden campaign respond?

## Eduardo J. Gómez:

Well, I think the Biden campaign needs to respond by again emphasizing the connection between science and policy and showing people that this is something that is very, very serious, that it needs to be addressed with mass use and I guess emphasizing the scientific consensus on this issue and to just continuously be using the media to do that. I mean going around with using the mask and that, of course, is very, very important and a good step. But I think that that again emphasizing that there is a scientific consensus, that he is in alignment in this consensus and by demonstrating this, by going around visibly with the mask, I think those are things that he needs to continue doing.

## **Trevor Parry-Giles:**

Okay. Anybody else want to give some free advice to the Biden campaign? What can they do to combat this sort of freedom-based Trump rhetoric about COVID?

## **Heather Zoller:**

I was going to say they haven't asked but if they did, one of the things that I've been noticing just since we planned this event versus now when we're having it, we've seen public opinion shift about what are their top priorities when it comes to their decision who to vote for for the presidential run. So, when we started, response to COVID-19 was people's number one issue they reported. But now it's shifted to the economy and I think we're going to see more people without health insurance, we're going to see more people out of work, restaurants and things closing and while I also think that COVID, unfortunately as we move into winter, we're going to start seeing even more effects than we are now. So, again that could shift but I think my advice to Biden would be that he needs to tie the economy to COVID in a different way than the dominant narrative right now which seems to suggest that it was the lockdown, it's these ordinances, safety



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

ordinances that are causing economic havoc and we need to be very clear that it's people who are not wearing a mask, it's people who are not doing the right thing, it's the spread of COVID that is the economic problem that we face. Again, self-efficacy, we can do this. If we do the right thing, we can get this decently under control relatively quickly and that would mean we can get back on the road to economic recovery.

# **Trevor Parry-Giles:**

I was waiting for somebody to talk about self-efficacy. Well, but I do think that's important. I mean the way a campaign can mobilize people's sense of self-efficacy and national efficacy can go a long way. I think you're absolutely right. Any other free advice for the Biden folks?

## Susan Mello:

Kind of dovetailing on the efficacy argument, I've been seeing a lot of Biden ads popping up in my Facebook newsfeed and I've been really intrigued by how they've been playing on fears. So, they're using fear appeals not necessarily related to COVID 19 but they're playing on how polls were showing in the 2016 election that things were happening in one direction and therefore could have contributed to demobilization among voter turnout and how they're saying don't be fooled, you may be seeing polls coming out but we can't necessarily rely on them. So, go out and vote and encouraging people to get vote by mail, by taking precautions to go out and actually vote. So, I've been intrigued by how they've been using sort of recent history to increase people's fears but also combining that with efficacy information about how we can actually continue to go out and vote despite restrictions.

### **Ambar Basu:**

I would just add to what, I completely agree with what you guys said, particularly what Heather said in terms of just shifting the discourse around. Because as I see from the outside, it's like the current administration trying to tie in the idea that the economy has tanked because of forces outside our control. So, there is China and then there are these devil Democrats who are trying to force us like to close the economy. Now just saying that the economy cannot be closed forever. It has to open up. Now how do you link the future prosperity with the idea of being I would say for lack of a better word, I don't like this individual responsibility part, but responsible partakers in this economic recovery. So, that might be a line that could be pushed further I am thinking. And the other theory that I have and please feel free to sort of throw this out of the window is that if Trump gets re-elected, there are going to be big changes to the public health policy regarding COVID. So, that is my sense. I'll stop there.

## **Trevor Parry-Giles:**

What do you mean by that? What big changes?



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

## **Ambar Basu:**

I think with four years ahead of him, he is possibly going to just shift his discourse again to saying that we should be more careful. He'll start wearing a mask maybe and starting to like get to that a little bit and then because he has four years ahead of him, right? And then once he can get this under control, the economy is going to shoot up and he's going to play on the economy. That's what he's done all through.

# **Trevor Parry-Giles:**

Shifting gears a little bit now that we've written the script for the Biden campaign and they know what to do, what about on a more, and you all were talking about this earlier, at a more local level? How do we communicate effectively with and what do we think about the media coverage about individual behaviors vis-à-vis COVID-19? And here I'm talking about the sort of lionization of essential workers and the way those folks have persevered and many of them have died as a result of working during this COVID pandemic. And I guess on the flip side of that, the media coverage of the transgressors, the non-mask wearers, those videos we all see in our Facebook feed of some person screaming at a Trader Joe's somewhere that they have to wear a mask. And how do we as communication folk and as political scientists and public health experts, how do we manage all of that media coverage and all of its contradictions during this COVID-19 pandemic and during this election year?

## **Heather Zoller:**

The idea of essential workers as heroes is really interesting to me because so much of my focus is about work and health relationships. So, I'm looking at the bright side of reporting that is focused on the fact that the frontline workers, that people who have been deemed essential are at greater risk. I feel like I've seen more reporting than usual that talks about here are the people at your grocery store and they tend to be people who are low income, that they're more likely to be members of minority groups. So, I think there's this potential, right, to shine a spotlight on health inequalities and health disparities through this discourse. At the same time, again, there's been reporting of people who work in meat processing plants, for example, that say there's been an outbreak. What is the effect on your food? Are we going to run out of meat? With literally no commentary at all about the workers themselves or what's happening to them or someone died. What is that person's name? So, you see a dichotomy in the reporting for sure. So, I like I said, I'm trying to focus on the potential positives and the way that as public educators and as teachers we can draw on some of that really good reporting that's happening to help sort of spread that message about inequalities.

## **Trevor Parry-Giles:**

Yeah, Ed.



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

## Eduardo J. Gómez:

Yes, I agree with Heather that the problem is that we have so many different media sources with so many different approaches on what to highlight about COVID and its consequences. And I think the solution would be to focus on the positive, to focus on the workers that are being exposed, to focus also on those individuals that at one point didn't believe in mask use and then have found the consequences of that. I mean that's really, I mean I believe CNN has been doing a lot of work on that and it's critical to really enforce those that are having doubts about the seriousness of the virus. So, I think that more should be done on this sort of informative personal narrative stories, more on the positive roles that workers are playing, and more on the neglected communities that haven't been addressed, have not been reached out to on the COVID situation such as the need for access to testing in marginalized communities.

# **Trevor Parry-Giles:**

Susan?

### Susan Mello:

Yeah. I just wanted to agree and underscore Eduardo's point about continuing to tell those stories about people who perhaps had originally thought not wearing a mask was the way to go and then contracted COVID and experience these things first hand because I think having empathy for individuals who may have made an incorrect decision and showing that there is a path forward, we can change and we can evolve is really important modeling in the news media. And I think also it helps people understand that right now we're seeing the scientific process unfold in front of our eyes, right? We're seeing that the government at the beginning wasn't mandating or even recommending mask wearing and then over time, those recommendations from the CDC changed. And it's something that is hard for the American public to understand, that we are collecting data and over time the more that we know and the more that changes, the more that we can battle this thing together. But I think again having those narratives in the media on a regular basis that are showing that people who believed one thing and then changed their mind to align more with science and recommendations is really important.

## **Trevor Parry-Giles:**

What do we make and how would we evaluate the media's coverage of the rather glaring racial and ethnic disparities with regard to COVID-19 and how is that figuring into the presidential campaign? Certainly, the Trump people aren't really talking much about that to a large extent. The mainline media seems to kind of mention it but I'm not certain that I've heard anyway and a lot of discussion of the really, I mean it's pretty glaring in terms of the disparities. What does it reveal about the disparities in healthcare more generally that occur across the board separate from COVID-19?



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

## Eduardo J. Gómez:

I think that this virus has certainly reinforced inequalities in communities and access to care, especially accessing, getting testing done or information. I think that's very important but also the undocumented community and sort of how do we reach out to them. There's been no real effort and that's something that needs to be addressed and thoroughly discussed in this issue. And so, I think that this virus has really reinforced the ongoing inequalities and access to care and education between communities and I think that it's important that in the Biden campaign and the media in general highlight these issues. And this also dovetails with other public health issues. The ongoing issue of obesity and diabetes and differences in communities and sort of addressing the high prevalence of these diseases and communities of color and sort of how is the government addressing these public health issues at the same time as COVID-19 and again reinforcing the inequalities and addressing these issues in communities of color. I think that's really important going forward.

# **Trevor Parry-Giles:**

What can we do I guess as communication educators or academics dealing with students and teachers and communities? What can we do to deal with that besides say yeah, it brings it all out and the media hasn't been very good about it?

### **Ambar Basu:**

I keep thinking that given the importance of the upcoming elections, we tie a lot of things to the elections and as I see it, COVID-19 or health disparities is tied to every election and it's not going to go away post November 3rd. It is not going to go away. So, as Heather mentioned, it is there, it's going to be there in the long run. I was reading the other day that vaccines that are going to come out might not be viable. They might not be feasible. So, there's this trial and error process. So, it is important to somewhat untie this idea with the current elections and see long term. And again, this goes back to my research. I keep thinking whether a good way to do this would be to ask people, to listen to people. We are always bent on this idea of giving ideas to people and telling them what to do. Basic things like getting people tested for COVID. Yeah, even if there are facilities, they might not have the, I'm just giving you an example, they might not have the spare hours to go and get tested, right? So, there are tremendous levels of food insecurity. There are these levels of inaccess to immigration policies. People are hiding from the law and health sort of comes into the picture with all of these taken together, not just one epidemic or one particular illness like HIV/AIDS that I study. So, how do we as academics line up our theories and our ideas and get them to the community such that we can do this across a longer time span? I keep thinking on those lines.



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

# **Trevor Parry-Giles:**

I like that because I too worry that the election is sort of truncating everything and we're all getting sort of bound up in what's going to happen on November 3rd. I'm curious, Ambar about that listening point that you mentioned because it seems to me let's take vaccines for an example. If you listen to people about vaccines, you get a lot of different reactions and I'm curious as to how we overcome that. In other words, how do we listen to people and take seriously what they say even if we know that what they're saying is so dead wrong or is informed by some really pernicious mis- and disinformation campaigns coming from the administration or the Russians or whomever? How do we do that without becoming patronizing, right?

### **Ambar Basu:**

Sure, absolutely. And I have no answer to your question because we need to listen first.

## **Trevor Parry-Giles:**

Right.

## **Ambar Basu:**

And my experience with my work has been that when you really listen, listen in a way that matters not just for the sake of like getting your sound bites, you start to think about policy changes or changes in terms of administering information or messages that will relate more to local cultural needs. So, I really don't have an answer to your question unless we get to that part, we get going on that part to see what some people might say, I don't like vaccines because my child fell ill and then you sort of gather that information and work accordingly. So, yeah, I don't have a readymade answer for you.

# **Trevor Parry-Giles:**

Right. I don't know that anybody does. But oh, Susan, you do. Okay, that's great.

Susan Mello: 34.35

I've solved it. I have the secret. No.

# **Trevor Parry-Giles:**

There we go.

## Susan Mello:

No. But I've been personally doing, I mean obviously for my work and my teaching, I've been doing research on this but I've had so many friends and family approach me and say I have this one grandfather or uncle or friend who believes this and I'm terrified to have these conversations



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

with them or I see them propagating misinformation on social media. What do I do? And I think this goes back to an earlier point that I made about it's human nature for us to believe and to share things that align with our values. So, having empathy for those individuals and showing understanding versus immediate attacks. This is just advice that I give to people that I know to my students, right, is to if they're, for instance, a conspiracy theorist, conspiracy theories exist because there usually is some kernel of truth that people believe in, right? And so, acknowledging that kernel of truth and then pivoting to well, what are some of the supporting pieces of evidence that you're using here to align your beliefs or your behaviors with this that we can then go to the CDC or some other credible source to not necessarily discredit but change your opinion and resultingly, hopefully, some of the precautions that you may be taking. And so, I don't have a perfect answer but again, it's just kind of being open-minded and not attacking people for something that they may have wrong.

# **Trevor Parry-Giles:**

No, I think that's right and I think you're highlighting something that has been of concern for a lot of folks in the public health realm that I'm aware of and that is that and again it floats back to this question of racial and ethnic disparities because we know that there is heightened levels of distrust amongst communities of color, underrepresented minorities, whatever we designate that population to be. There's higher levels of distrust there for good reason, not conspiracy theories because there's a history, right? There's a history that leads them to be suspicious of vaccines or of government testing or of any of those sorts of things. And I think it's a really persistent public health challenge. But maybe listening and maybe finding the right information to marshal is the way to go. Heather, do you have any other thoughts or suggestions along this line?

## **Heather Zoller:**

Yeah. And then we can do some basic communication training with people we want to be influencers as well as with the media on some of those basic principles of how to deal with misinformation and hoaxes, for example. Don't repeat the hoax because every time you repeat it, that's actually what people remember. And so, gosh, it seems like this is a valid opinion because everyone keeps saying it. So, we've got some good communication research as well that we need to work to get out there.

## **Trevor Parry-Giles:**

Yeah.

#### Susan Mello:

I've made that recommendation myself to friends and family. Say when I see something that's so crazy on Facebook, what do I do? Do I respond? I say you should probably recommend to that



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

individual that they just delete it, right? Because your friends and family aren't going to go and scroll through all the comments to see that you've now discredited it. You're better off just having that person and convincing them to remove it entirely.

# **Trevor Parry-Giles:**

I was a member of a group on Facebook where suddenly there came up all of this anti-rhetoric basically and the question from people posting in these groups and these are relatively homogeneous ideological groups, right, would be I just came across this negative, horrible thing. How do I deal with it? And I was immediately suspicious because I'm like this is the way that trolls and bots and all those horrible nefarious entities work their way into these groups to spread these messages. And I think that's absolutely true, Susan. That's really happening across social media. So, in the end or overall, let's put on our sort of crystal ball predictor hats. What's going to be the impact of all of this discussion about healthcare? And as I said at the beginning, I think we're really in a campaign unlike any other and I'm not one of those people who thinks it's the most important of our lifetime and yada, yada, yada. But it is an important election. All elections are important. How do we grapple with the confluence of healthcare and healthcare reform and the ACA and the COVID-19 and the health status of the candidates? I mean it's a lot of messaging. And how do we deal with that and what's going to be the impact? How is it going to affect voter decision making? If Heather's right and it's all about the economy, is the economy affected by healthcare and healthcare reform in people's minds? I don't know. What do we think is going to happen? Yeah, Ed.

## Eduardo J. Gómez:

Yeah. I think more so than any election we've seen in the past, I think that healthcare is going to be the issue here and not only because of COVID-19. Obviously, that's going to be a big one but also because of the related factors to COVID-19, the ACA, pre-existing coverage, the fact that the Trump administration still hasn't revealed the plan on that, the fact that there's some contradictions with trying to repeal Obamacare. And so, I think that more than ever this is going to be a key issue in this election and I think that it will also lead to new questions about ongoing disparities between communities, access to healthcare and insurance. And so, I think that and it also dovetails with the economy, of course, how the how the virus is affecting workers. And so, I think that more than any kind of election, this is going to impact voters in a tremendous way.

## **Heather Zoller:**

One of the things we know about this election is that most people have made up their minds. There's a very small group of people in very key states that the campaigns are trying to reach and they're each going to be using healthcare issues to try to do that to their best advantage. We've



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

got to get rid of the ACA. We can't lose the ACA. So, I think it's going to come down quite a bit—it's hard to predict. You see I'm ignoring the let's predict this part.

# **Trevor Parry-Giles:**

Okay.

### **Heather Zoller:**

But it's going to come down to turnout, right, and who is feeling more motivated. And as you said now, we have a whole new set of health issues on the table with the passing of Ruth Bader Ginsburg. So, for example, Planned Parenthood has seen a huge increase in in funding just over the last few days. So, so much of it is going to come down to who's motivated to show up to the polls.

# **Trevor Parry-Giles:**

And who's motivated in Ed and Ambar's neighborhoods, right? So, along the I-4 corridor in Florida and somewhere in central Pennsylvania, people are worried about those voters. So, the voters where the rest of us live, kind of a done deal. No, that's right. I think that's interesting. The question becomes to what extent are those people, those independents, those suburban voters, those undecideds and aren't we amazed that there are still undecideds at this point? But how do those people get motivated and are they motivated by health issues and healthcare issues? What do you think, Ambar?

## **Ambar Basu:**

I completely agree and I was reading a piece yesterday which would sort of said that Pinellas County, I don't know how they came up with it, but Pinellas County is supposedly going to swing the election and I'm just quoting the headline. So, I guess you are right. But as Heather said and if we are reading from the same source, Heather, even among swing voters, the economy has shot up as the most important deciding a factor and healthcare seems to have dropped down to the fourth in the list just before immigration and I'm reading this from the Kaiser Family Foundation 2020, like September 2020 trends report. So, I fear that that's happening and even in terms of racial justice, the tables seem to be turned more towards protestations and violence rather than ideas of racial justice. So, I am very circumspect in terms of where we are heading.

## **Trevor Parry-Giles:**

Any final thoughts that anybody wants to offer? I think this has been remarkably productive in terms of talking about what we as educators can do and how all of this is going to have some impact, not quite sure what but some impact in a couple of months on Election Day.



BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

## Susan Mello:

I wasn't necessarily on board or there was a little bit of fear that Heather instilled in me when she mentioned that this could switch to the economy from healthcare and how there's been changes in public polling related to that. And I was just listening to some of the live coverage of the hearings this morning with Dr. Fauci and they were reporting or some of the speakers were talking about how more rapid testing is becoming available, how it's going to be a lot less expensive, it could be like five bucks to go get a test. So, I'm wondering if again, like this healthcare issue could tick down because it's going to come down to people's wallets. Can they afford to stay home and social distance? Can they get tested quickly and go back to work? The impact that this has on schools and working moms. I mean this is all trickle down and all interrelated. And so, I think the likelihood that the economy is going to become a bigger issue later in the game and healthcare might be downplayed is, I put my money on that prediction that that's going to come to be true.

# **Trevor Parry-Giles:**

Well, and I don't disagree. But Ed, you're the political scientist amongst us. I guess my question is to what extent do people compartmentalize those so neatly? In other words, I'm curious how many voters actually see the economy in terms of healthcare, that a lot of economic questions that they face are bound up or tied in with the COVID-19 pandemic but healthcare more generally.

## Eduardo J. Gómez:

Yeah, that's a great question. I think that there is an inclination versus voters, the first thing they do, of course, a lot of them think about, not everyone, is the economy and their current economic situation. And of course, they're going to link that to health. but on the other hand, there's been far more information and more discussion in the media about healthcare that I think voters will be thinking about both more than ever. As someone who's watching media all the time, I just see more of the discussion about COVID-19 rather than the overall economy in general. So, I think in this particular although I mentioned earlier that health is going to dominate, I still think so. If I think of the broader level of voters, they'll probably be thinking about both issues at the same time.

## **Trevor Parry-Giles:**

A lot of things at once.

## Eduardo J. Gómez:

Yeah.

## **Trevor Parry-Giles:**

Okay. Well, that's as good a place to end. Thank you so much everybody for joining us today on *Communication Matters* and for listeners hanging in and talking about these weighty matters with



# Communication Matters: The NCA Podcast | TRANSCRIPT BONUS Episode: The Politics of Health and Healthcare: Communicating about Health in a Presidential Election Year

regards to healthcare, the pandemic, the upcoming election in 2020. I hope you enjoyed this discussion and I hope you'll join us for the second public program in our special series coming out in a couple of weeks. Now for more information about NCA's public programs and our public programming efforts, visit the public programs page at the NCA website at natcom.org/PublicPrograms. I would also note that we're taping this the day after National Voter Registration Day. And so, if any of this means anything to anybody, please get out there and vote in campaign 2020. Thank you again for listening to *Communication Matters, the NCA podcast*.

In NCA news, the NCA 106th Annual Convention will be completely virtual this year and will include both synchronous and asynchronous sessions. Asynchronous content will be available beginning November 1st on NCA Convention Central. Most synchronous sessions will take place as originally scheduled on November 18th through the 22nd. Visit natcom.org/convention to register today. On that page, you'll also find links to NCA's guide to the 2020 Convention and a best practices document for participating in the convention virtually. This has been a special episode of *Communication Matters, the NCA podcast*.

## **Conclusion:**

Communication Matters is produced by Chelsea Bowes, NCA Assistant Director for Digital Strategies. Additional writing and content development support for this special episode was provided by LaKesha Anderson, NCA's Director of Academic and Professional Affairs and Caitlyn Reinauer, NCA's Academic and Professional Affairs Manager. Thanks for listening.

RECORDING ENDS