

# NCHCMM 2021 presentation

R. Craig Lefebvre, PhD

Designing for Diffusion

“What we have here is a failure to disseminate.”

26 August 2021

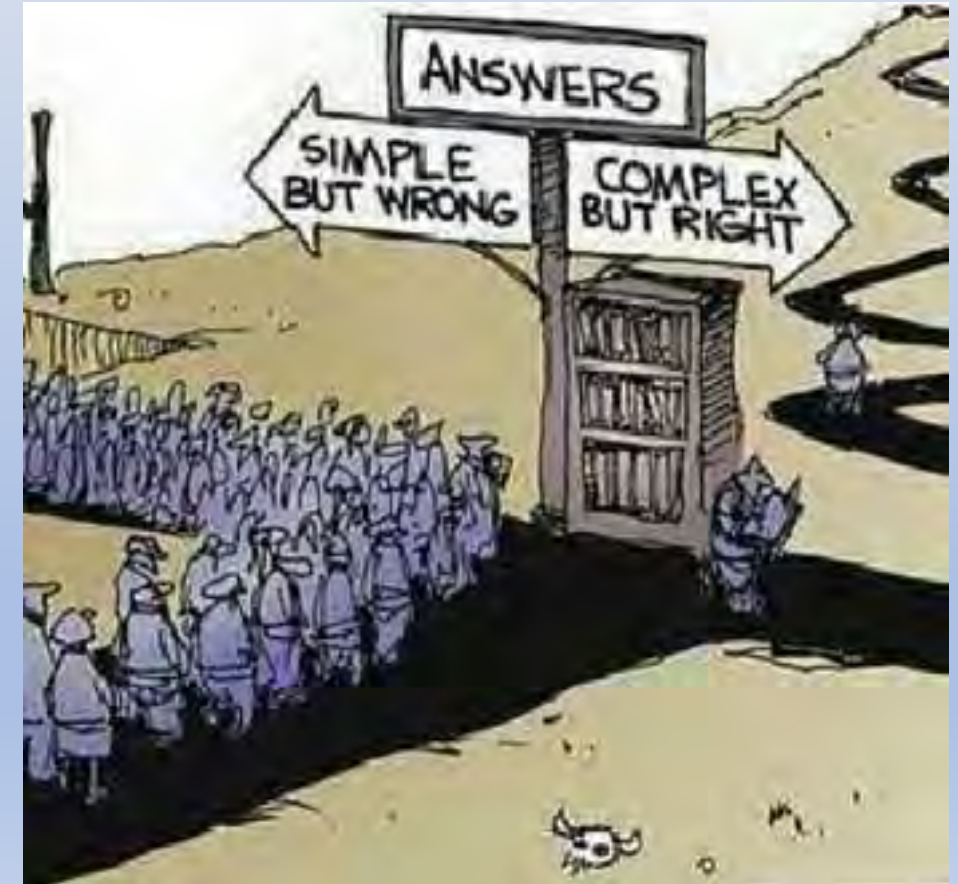
# Designing for Diffusion

“What we have here is a failure to disseminate.”

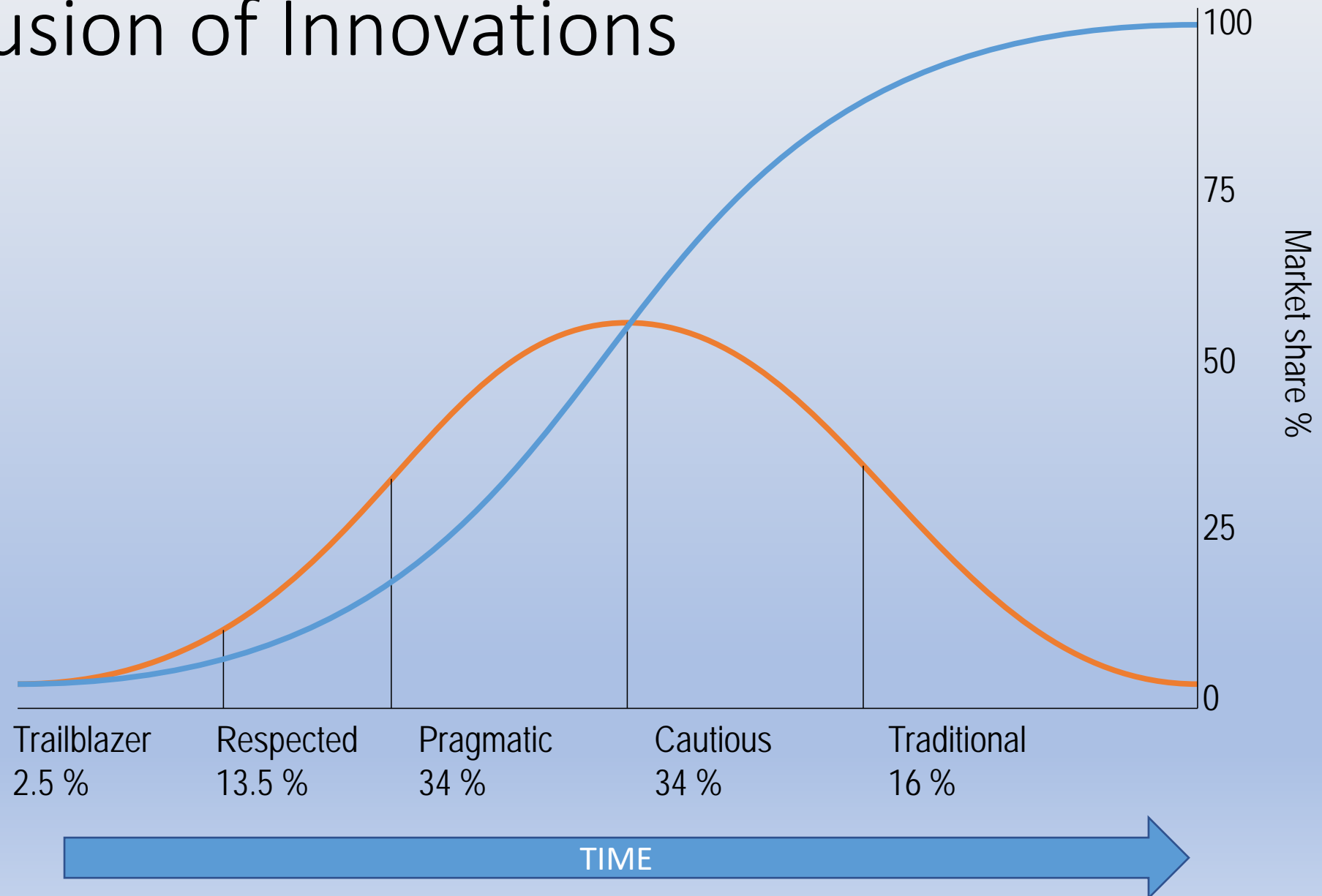
*“Some men you just can't reach.”*

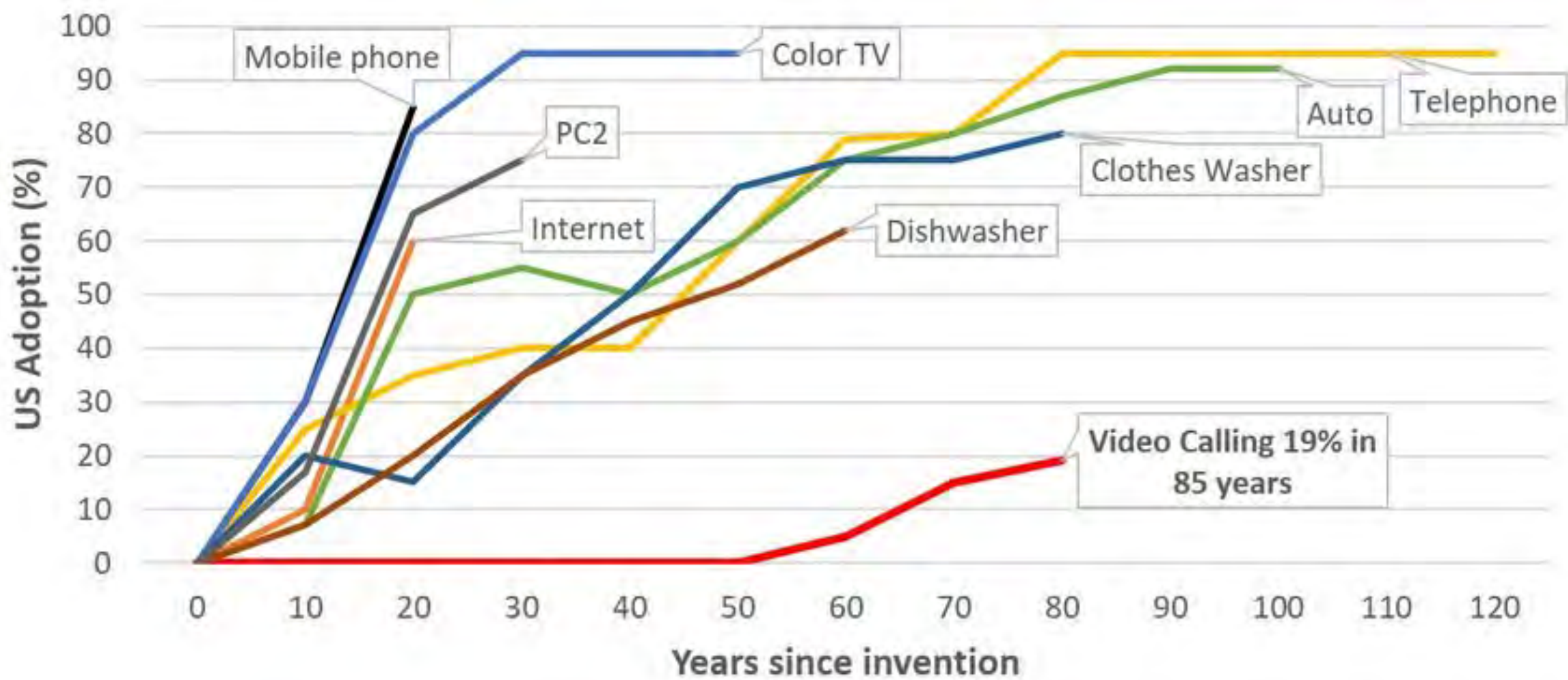


R. Craig Lefebvre, PhD  
*Lead Change Designer*  
RTI International



# Diffusion of Innovations







# Percent of People Receiving COVID-19 Vaccine by Age and Date Reported to CDC, United States



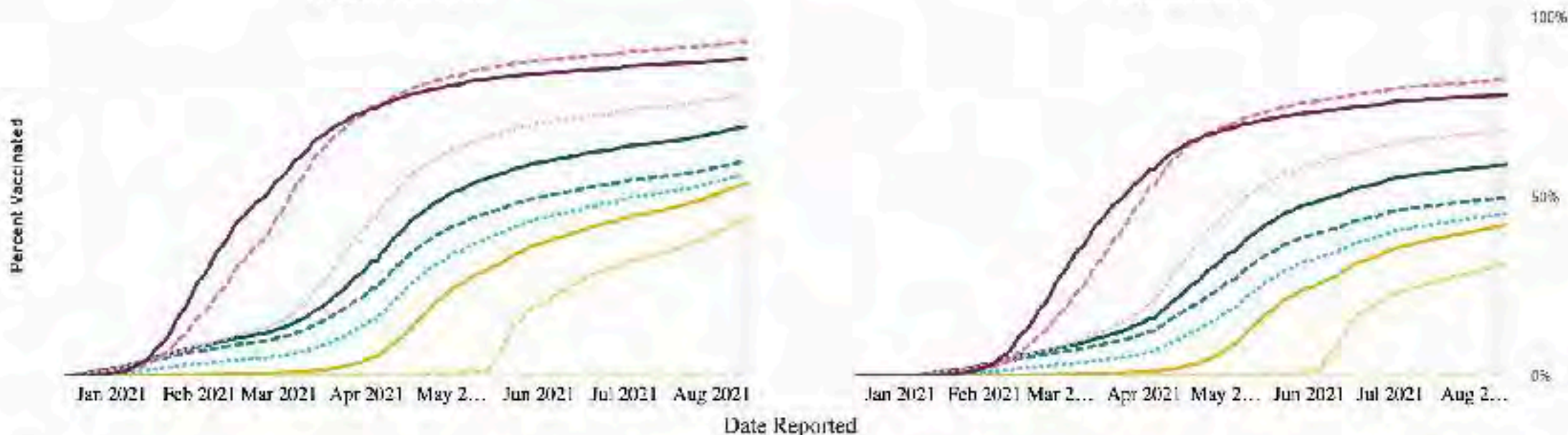
December 14, 2020 – August 13, 2021

	<12 yrs	12-15 yrs	16-17 yrs	18-24 yrs	25-39 yrs	40-49 yrs	50-64 yrs	65-74 yrs	75+ yrs		Face	Sex	Age
At Least One Dose	0.5%	43.7%	53.4%	55.9%	59.7%	69.2%	78.2%	92.8%	88.0%		12/13/2020	8/13/2021	
Fully Vaccinated	0.3%	31.3%	42.1%	45.2%	49.7%	58.9%	68.3%	82.5%	78.3%				

Age data were available for 99.0% of vaccinations.

At Least One Dose

Fully Vaccinated



People receiving at least one dose: total count represents the total number of people who received at least one dose of COVID-19 vaccine. People fully vaccinated: total count represents the number of people who have received a dose of a single-shot COVID-19 vaccine or the second dose in a 2-dose COVID-19 vaccine series. Due to the time between vaccine administration and when reported to CDC, vaccinations administered during the last 2 days may not yet be reported. This reporting lag is represented by the gray shaded bar. Texas does not report age-specific dose number information to CDC, so data for Texas are not represented in these figures.

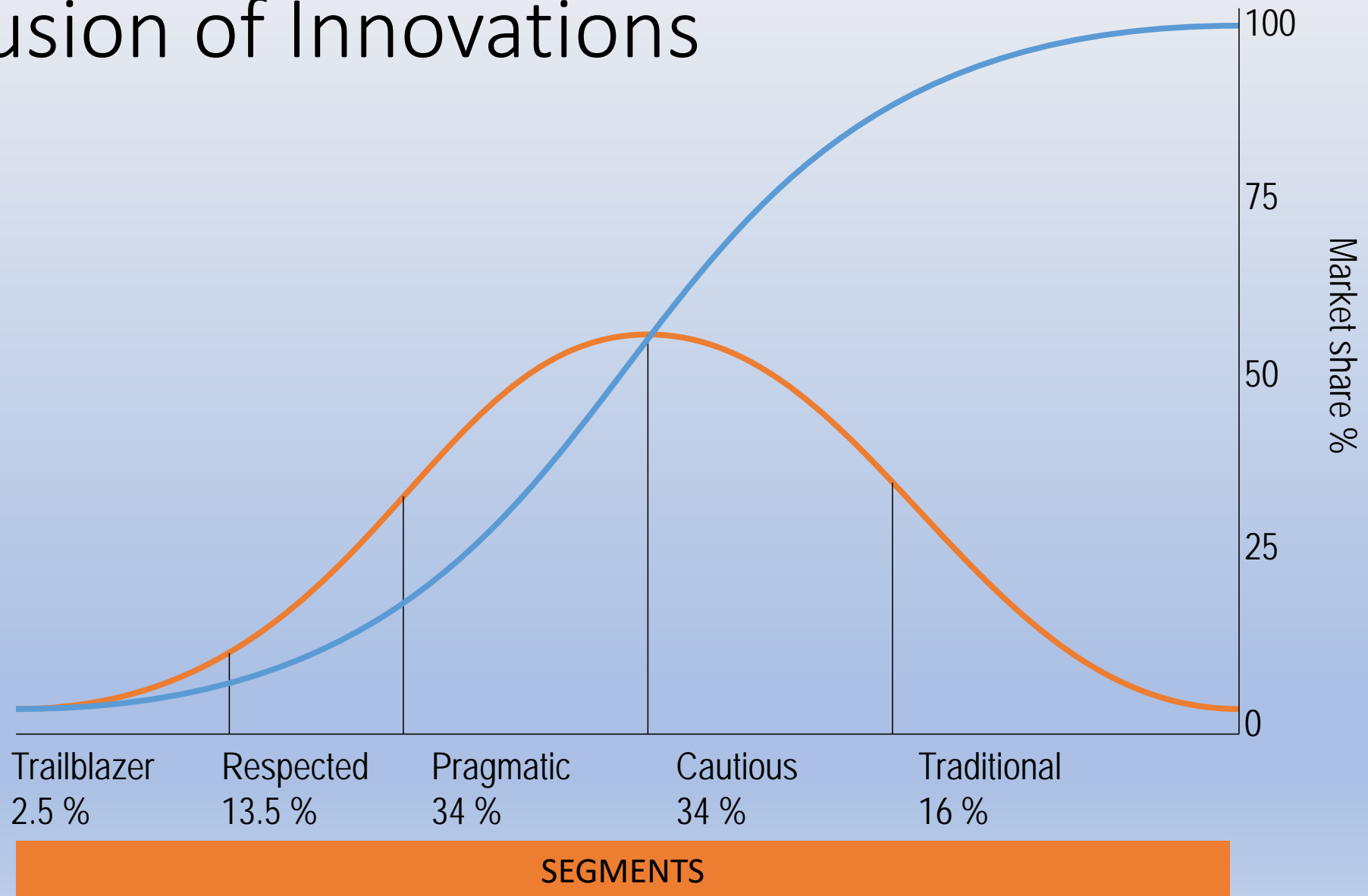
1 of 1 | Updated: Aug 13, 2021

Data source: Pfizer, J&J, Federal Pharmacy Program, Federal Reserve Program, U.S. Census Bureau, May-July 2020 National Population Estimates, Weekly Update, CDC COVID-19 Dashboard, Anonymous Public Health Statistics Team

# Half Time



# Diffusion of Innovations

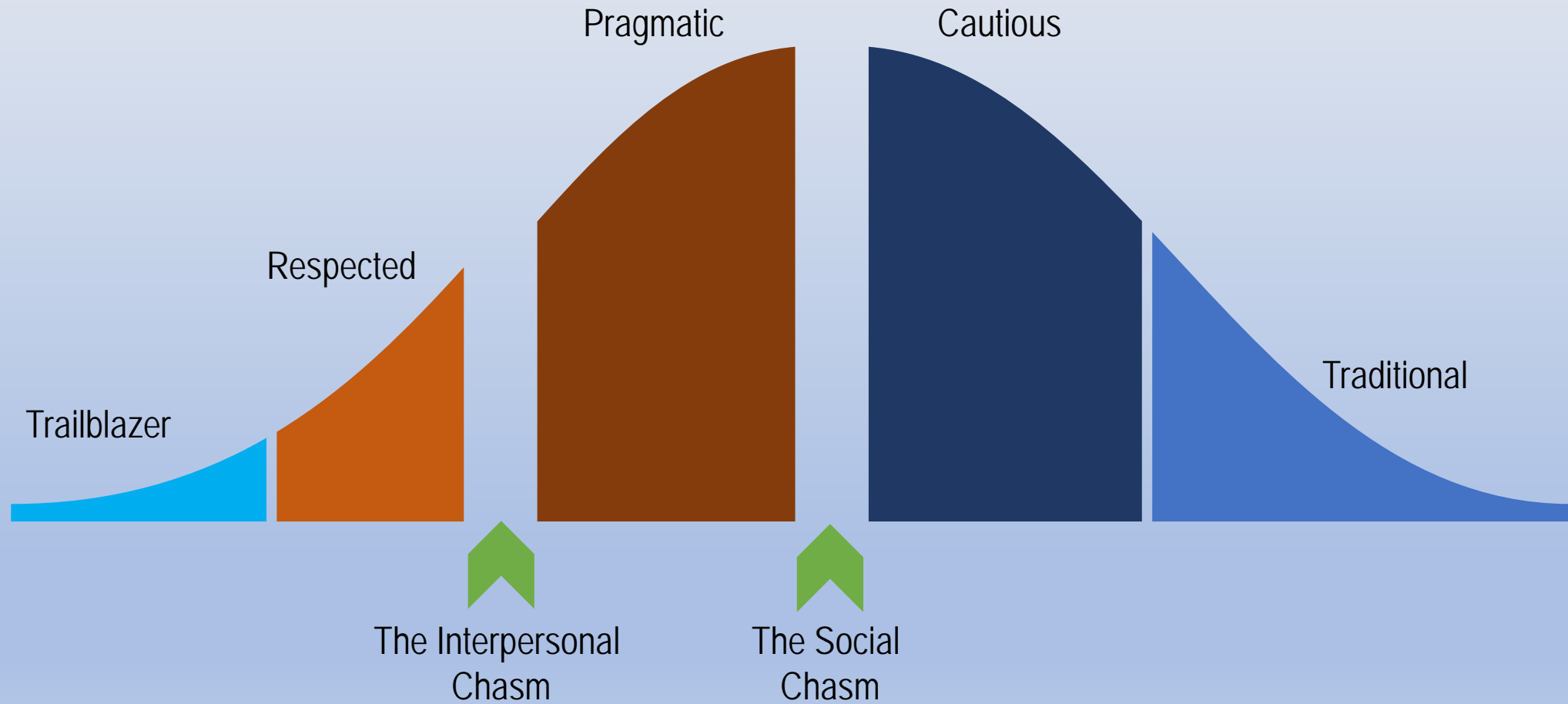


# Characteristics of Adopters

Innovators	Early Adopters	Early Majority	Late Majority	Laggards
Trailblazer	Respected	Pragmatic	Cautious	Traditional
High tolerance of risk	Resources and risk tolerance to try new things	Rely on personal familiarity before adoption	Skeptical and risk averse	Highly risk averse
Fascinated with novelty and new ideas	Information-seekers	Look to early adopters for guidance and assurance	How has it worked for others?	Stick to the tried and true
Seen as mavericks, not opinion leaders	Opinion leaders	Very engaged in peer networks	Sensitive to peer pressure and social norms	Near isolates in their social networks
Social networks transcend geographic boundaries	They are watched by others – and they know it	How does this help me?	Minimize uncertainty of outcomes	Suspicious of innovation and change agents



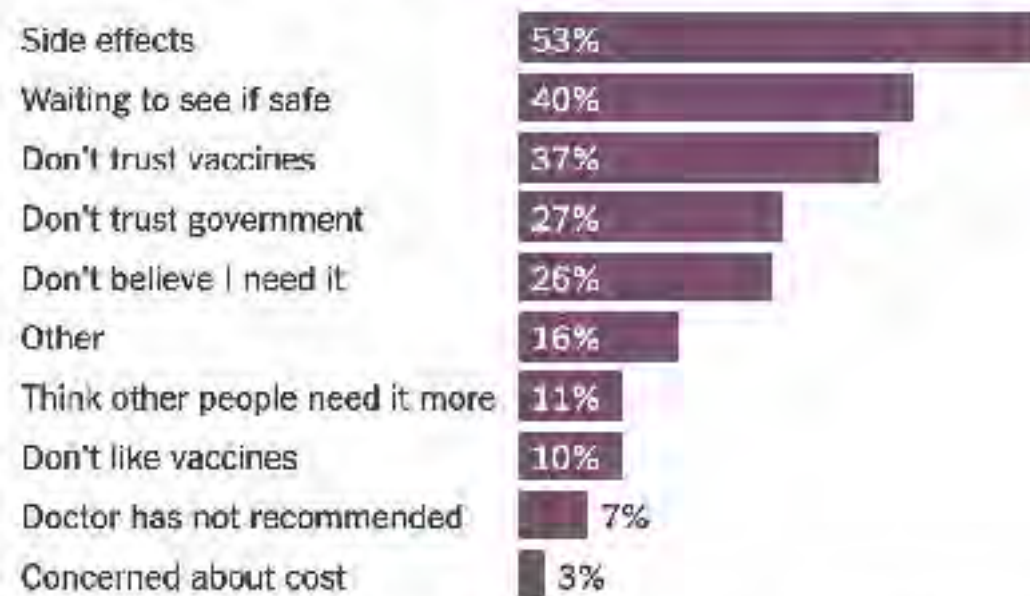
# The Innovation Chasm



*"In school, we're rewarded for having the answer, not for asking a good question."*

### Why People Remain Unvaccinated

Reasons given by the vaccine hesitant for not yet getting a shot.

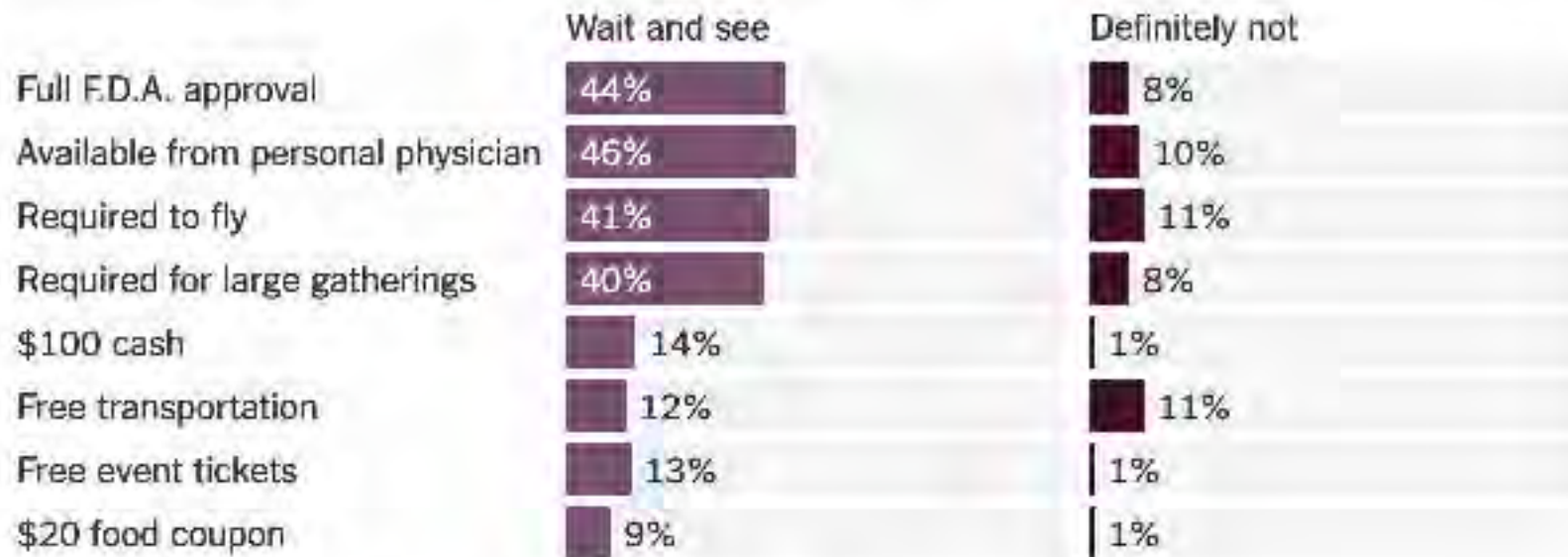


Note: People could select more than one answer. Source: Census Household Pulse Survey, July 5-12, 2021 By The New York Times

*“You can’t get the right answers if you’re asking the wrong questions.”*

### What May Motivate the Unvaccinated to Get a Shot

Share of people who say these incentives would make them more likely to get vaccinated.



Source: Kaiser Family Foundation survey, June

By The New York Times

*"What people think of as the moment of discovery is really the discovery of the question."*

*People also tell us they are closely watching those they know. When we ask people who they want to see get vaccinated before doing it themselves, their close friends and family members are at the top of the list.*

Drew Altman, Kaiser Family Foundation, February 10, 2021

# Percent of People Receiving COVID-19 Vaccine by Race/Ethnicity and Date Reported to CDC, United States



December 14, 2020 – August 13, 2021

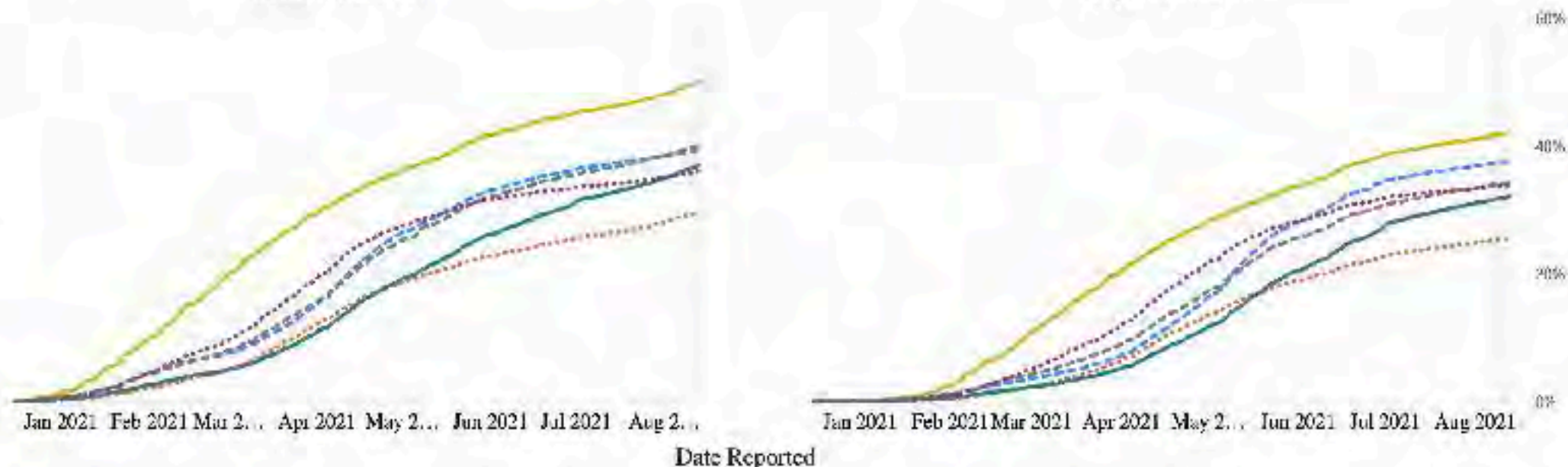
	AI/AN, NH	Asian, NH	Black, NH	Hispanic/Latino	NHOPI, NH	White, NH	
At Least One Dose	50.0%	39.2%	29.6%	36.8%	40.0%	36.0%	<div> <div>Race</div> <div>Sex</div> <div>Age</div> </div>
Fully Vaccinated	42.3%	37.6%	25.7%	32.2%	34.4%	33.9%	<div> <div>12/13/2020</div> <div>8/13/2021</div> </div>

Race/ethnicity data were available for 63.11% receiving at least one dose and 68.0% of people fully vaccinated.

At Least One Dose

Fully Vaccinated

Percent Vaccinated



AI/AN = American Indian/Alaska Native; NH = Non-Hispanic/Latino; NHOPI = Native Hawaiian or Other Pacific Islander. Percentages are at least one dose or fully vaccinated. Total counts represent the total number of people who received at least one dose of COVID-19 vaccine. People fully vaccinated: total count represents the number of people who have received a dose of a single shot COVID-19 vaccine or the second dose in a 2-dose COVID-19 vaccine series. Due to the time between vaccine administration and when reported to CDC, vaccination is calculated using the last 5 days prior to reporting. The reporting lag is represented by the gray shaded box. Some data are reported as specific date ranges. Information to CDC, as data for Texas are not represented as local agencies.

Last updated: Aug 11, 2021

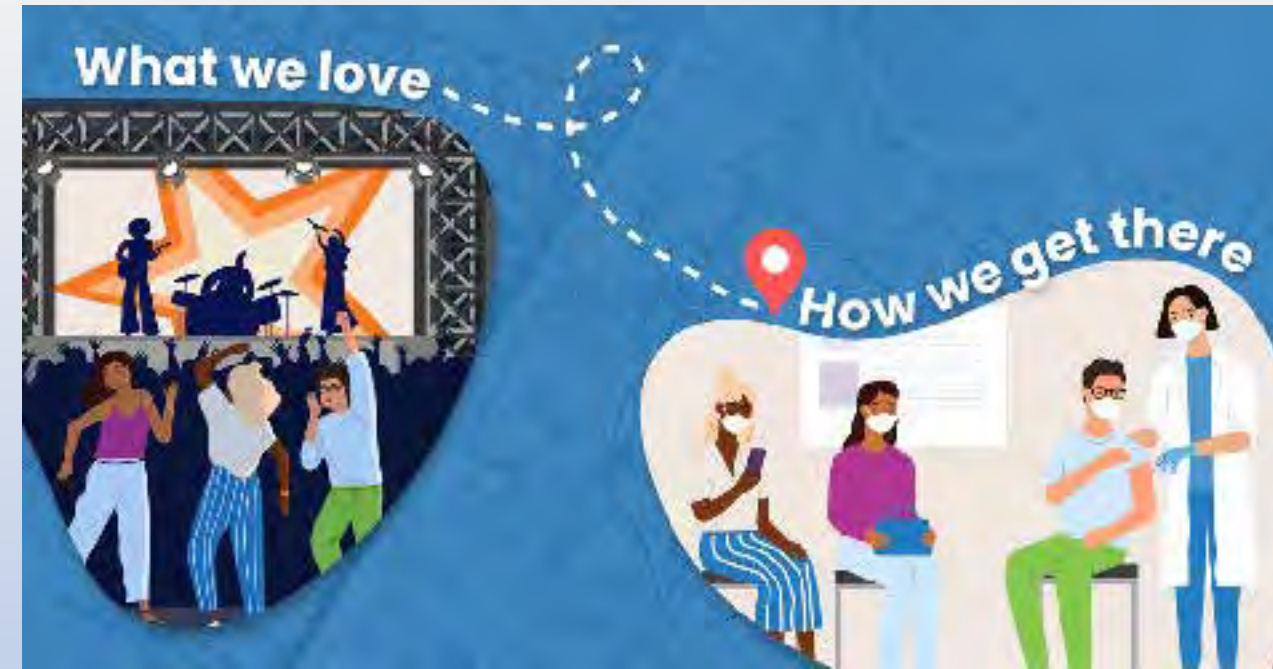
Data source: CDC, HHS, Federal Pharmacy Program, Federal Ethics Program, U.S. Census Bureau, 2019 July 2019 National Population Estimates, American Indian/Alaska Native, CDC, CDC, Division of Healthcare Public Policy, Scientific Data



# Rational Sense vs Cultural Sense



The #COVID19 #vaccine will help you and your loved ones from getting sick, and it will help us all get back to doing the things we love. Millions have gotten a safe, effective vaccine. Join them today:



We are all eager to see loved ones, travel, send our children to safely learn in schools, and get back to doing the things we love. Getting vaccinated will put us closer to achieving all of these goals. Join the millions who have already gotten a safe, effective, and free #COVID19 #vaccine. Learn more:





## Calendario de pruebas de Covid-19

[Click aquí](#)



## ¿Se hizo su prueba de Covid-19?

Si no ha recibido el resultado de su prueba de Covid-19 en 7 días, por favor comuníquese con la clínica donde se realizó la prueba.

[Lista de clínicas](#)



## Eventos semanales de vacunación y pruebas de Covid-19 (En PDF)



## Recursos disponibles para la comunidad

## Materiales sobre la vacuna contra el Covid-19

## Información general para cuidarse del Covid-19



Acceso a recursos de alimentación



Guía de otros recursos



Reciba información por Whatsapp escribiendo al: (202) 447-1862



Mitos y verdades sobre la vacuna



Pruebas y vacunas contra el Covid-19 en menores de 18 años



El Covid-19 y sus variantes.

Información nueva



Información para padres



¿Qué debo hacer si tengo Covid-19?



Uso de la mascarilla



Cómo apoyar su equipo de emergencia





“I framed it in the way that the virus was a monster, just like any other monster that has come to plague the Navajo people and wreak havoc... I told them that you’ve got to have armor, and the armor is the vaccine.”



# “I’ll have what she’s having”

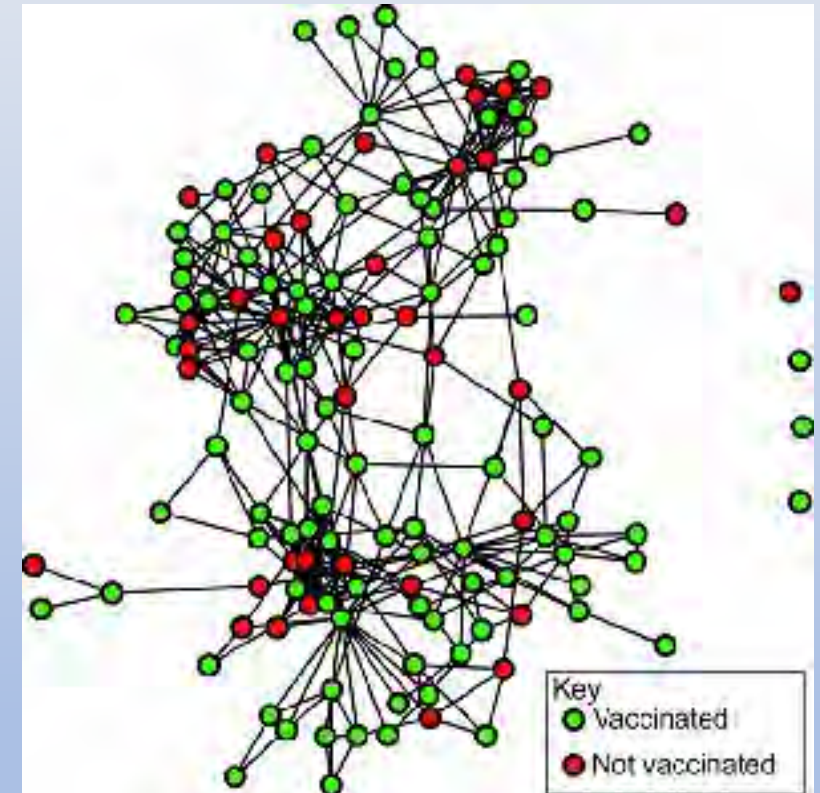
- People observe the behaviors of others
- Learn from their experiences through social interactions
- Make appropriate decisions based on their subjective reality
- Nonadopters can reduce the spread of an innovation
- Nonadopters can also have their decision to reject an innovation socially confirmed





# Social Networks

- Provide opportunities but also impose constraints and suppress adoption of the behavior by many
- Must be relevant to the person for peer influence to be effective (advice-seeking)
- Help by providing information about the innovation that otherwise an individual might have missed
- Create social influence on an individual to accept or reject the innovation
- Provide social reinforcement to encourage spread
- Supply social support to an individual to implement the decision and legitimize the innovation



# Strategies for Cautious People (Late Adopters)

Create 'wide bridges' over the social chasm by bringing pragmatists (early majority) together to increase reinforcing signals to later adopters.

- Use social comparison strategies
- Emotional drivers: fear, guilt, regret, FOMO
- Policies to support or counter vaccine adoption are a diffusion process
- Reduce uncertainty ("peace of mind")



# Thank You!





# BIG TOBACCO'S CAMPAIGN OF DISINFORMATION AND DOUBT



PUBLIC HEALTH  
LAW CENTER  
at Mitchell Hamline School of Law

Joelle M. Lester  
Director of Commercial Tobacco Control  
Programs  
Public Health Law Center



# THE PUBLIC HEALTH LAW CENTER





# LONG HISTORY OF MISINFORMATION



He's one of the busiest men in town. While his door may say *Office Hours 2 to 4*, he's actually on call 24 hours a day.

The doctor is a scientist, a diplomat, and a friendly sympathetic human being all in one, no matter how long and hard his schedule.

*According to a recent Nationwide survey:*

## MORE DOCTORS SMOKE CAMELS THAN ANY OTHER CIGARETTE

## A Frank Statement to Cigarette Smokers

CIGARETTE SMOKING has improved with time, but you still need guidance to keep your smoking in the most safe lines, with only minor health risks.

Although attacked by doctors of polluted smoking, these reports are not regarded as good, but in the field of cancer research, there is no doubt that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer.

At the same time, we feel it is our public duty to call attention to the fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer.

Distinguished scientists point out:

1. That the health of those who smoke is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer.

2. That there is no question as to the fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer.

3. That there is no question as to the fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer.

4. That the health of those who smoke is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer.

For example, the fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer. It is a fact that cigarette smoking is a major cause of cancer.

We believe the public has a right to know the facts.

We urge you to keep your smoking in the most safe lines, with only minor health risks.

For more data, 200 pages of the new report on the health of cigarette smokers, free of charge, to all smokers, or to those who wish to know more about the health of cigarette smokers, free of charge, to all smokers, or to those who wish to know more about the health of cigarette smokers.

Those who wish to know more about the health of cigarette smokers, free of charge, to all smokers, or to those who wish to know more about the health of cigarette smokers, free of charge, to all smokers, or to those who wish to know more about the health of cigarette smokers.

Many people have asked us if we are doing to meet the public's demand for the most complete, frank, and honest statement on the health of cigarette smokers.

1. We are planning, and we intend to do so, to publish all the facts of the health of cigarette smokers, free of charge, to all smokers, or to those who wish to know more about the health of cigarette smokers.

2. We are planning, and we intend to do so, to publish all the facts of the health of cigarette smokers, free of charge, to all smokers, or to those who wish to know more about the health of cigarette smokers.

3. We are planning, and we intend to do so, to publish all the facts of the health of cigarette smokers, free of charge, to all smokers, or to those who wish to know more about the health of cigarette smokers.

This statement is being issued because we believe the people have a right to know the facts on the health of cigarette smokers.

### TOBACCO INDUSTRY RESEARCH COMMITTEE

200 E. 10TH STREET, NEW YORK, N. Y.

#### MEMBERS

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# LONG HISTORY OF MISINFORMATION



# LONG HISTORY OF MISINFORMATION

1. Tobacco companies falsely denied that they can and do manipulate the level of nicotine in their products to create and sustain addiction, and have been since at least 1954.
2. Tobacco companies “falsely denied, distorted and minimized” the link between cigarette smoking and disease, even though they internally recognized its existence.
3. Tobacco companies concealed evidence and publicly denied that nicotine is addictive.
4. Tobacco companies “falsely marketed and promoted low-tar and light cigarettes as less harmful” than regular cigarettes to keep people smoking and sustain revenues.
5. Tobacco companies internally acknowledged that secondhand smoke is hazardous to nonsmokers, yet still gave false and misleading public statements denying the fact.

# CURRENT CLIMATE OF DOUBT



## Juul Ads With Cessation Claims



# MENTHOL: A CASE STUDY





# FDA RESPONDS TO CITIZEN PETITION AT LAST

1. FDA intends to issue a proposed rule to prohibit menthol as a characterizing flavor in cigarettes.
2. FDA plans to work with HHS to enlist and collaborate with other entities who provide support to menthol smokers who quit or want to quit as a result of a menthol regulation going into effect.



# FDA RESPONDS TO CITIZEN PETITION AT LAST



Additionally, the FDA announced that it intends to issue a proposed rule to prohibit menthol and all other characterizing flavors in cigars.

# WHAT WE KNOW ABOUT MENTHOL RULE

1. Menthol increases initiation, makes it harder to quit, and has been targeted towards African Americans and the LGBTQ+ community for decades.
2. Menthol ban would save hundreds of thousands of lives.
3. Proposed Rule would restrict the manufacture and distribution.
4. FDA lacks the authority to regulate use and possession.
5. FDA possesses tools to address illicit sales of tobacco products.
6. The problem of racism in policing and enforcement is real.



# BIG TOBACCO'S TALKING POINTS LIES AND APPROPRIATION



- Menthol cigarettes are no more harmful than other cigarettes.
- Tobacco use is a matter of personal choice and personal responsibility.
- Banning menthol will increase criminalization of African Americans.
- Banning menthol will create illicit market.
- FDA is singling out the preferred product of African Americans.

# LESSONS LEARNED FOR OTHER PUBLIC HEALTH CONTEXTS

- Robust public education campaigns are essential.
- Leaders and members of the targeted communities are the best spokespeople to rebut misinformation.
- There is a disconnect between how public health professionals carefully describe risk and how the sources of misinformation do so.
- Ongoing investment in public health infrastructure and public health education is critical to build and maintain trust in the system.



# CONTACT US



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