Global Faculty Initiative

The Faculty Initiative

seeks to promote the integration

of Christian faith and academic disciplines

by bringing theologians into conversation with scholars

across the spectrum of faculties

in research universities

worldwide.

www.globalfacultyinitiative.net

Disciplinary Brief

CHARACTER INTERVENTIONS FOR PUBLIC HEALTH

Tyler VanderWeele

John L. Loeb and Frances Lehman Loeb Professor of Epidemiology, Harvard University School of Public Health
Co-Director of the Initiative on Health, Religion and Spirituality and Director of the Human Flourishing Program, Harvard University

Questions of virtue do not routinely arise in public health contexts. Supposed connections between virtue and health have sometimes come under criticism for effectively "blaming the victim" for poor health (Sloan, 2011; Willen, 2022). While acknowledging this concern, in this commentary, I will suggest that the empirical research on character interventions in fact provides grounds for adopting such interventions as important, albeit neglected, resources for public health, and, as I have argued elsewhere, that the reasonable concerns about blaming the victim can in fact be navigated (VanderWeele et al., 2023; VanderWeele, 2022, 2023, 2024). While I will focus primarily on the promotion of character and virtue within a pluralistic context, I will conclude with some remarks on situating character interventions within the broader context of the health of the person, and of Christian theology (cf. Herdt, 2023).

Evidence for Character-Based Interventions on Health

Numerous individual level character-based interventions have been developed, with supporting evidence for effectiveness from randomized trials. These include interventions to promote gratitude (Davis et al., 2016; Cregg and Cheavens, 2020), kindness (Kerr et al., 2015; Lyubomirsky, Sheldon, and Schkade, 2005), forgiveness (Wade et al., 2014; Ho et al., 2024), compassion (Kirby et al., 2017), patience (Alan and Ertac, 2018), and perseverance/grit (Alan et al., 2019). Individual randomized trials, or in several cases, meta-analyses of randomized trials, have indicated evidence for effects of these character interventions on happiness, sleep, and physical health (Davis et al., 2016; Emmons and McCullough, 2003; Kirby et al., 2017; Curry et al., 2018), depression and anxiety (Wade et al., 2014; Kirby et al., 2017; Cregg and Cheavens, 2020), hope (Wade et al., 2014), and educational test scores (Alan et al., 2019).

Based on this evidence, it would seem that health and well-being might be advanced by efforts to utilize and disseminate these character interventions. Such interventions could be employed in local contexts within schools, workplaces, families, religious communities and elsewhere. Campaigns to make use of

these evidence-based interventions could also be carried out at local, national, and international scales. Existing evidence indicates that such interventions could be effective both in promoting these various aspects of character, but also in promoting health and well-being.

Objections to Character Interventions can be Overcome

As noted above, objections are sometimes raised concerning introducing notions of character into public health or public policy or even into public discourse (Sloan, 2011; Willen, 2022). Some would prefer to refrain from even mentioning terms such as "virtue" or "character." Concerns are raised that such notions are paternalistic; that the very idea of character is culturally relative; and that any discussion of such matters is, once again, likely to result in blaming the victim. These are important concerns, but the appropriate response is arguably to more sensitively address these issues surrounding character, rather than to abandon such notions altogether.

While there will inevitably be differences in the character strengths that are valued across societies, cross-cultural research suggests that there is a lot that is held in common including valuing courage, justice, humanity, temperance, wisdom, and transcendence (Dahslgaard et al., 2005). Moreover, for virtues such as courage, wisdom, and justice, if one were to ask who wanted to pursue these versus instead being cowardly, foolish, and unjust, one would get very few opting for the latter (cf. VanderWeele, 2022). There is variation in precisely how these virtues are understood, but that virtue is important, and that these specific virtues are important, is shared across cultures. It is perhaps only in circles of the contemporary West that one finds any hesitation (VanderWeele et al., 2023).

Promoting Character for Health from Self to Society

Likewise, while attributing poor health to poor character is often inappropriate (Sloan, 2011; Willen, 2022), that does not mean that character is irrelevant, or that we cannot seek to develop character within ourselves and promote character strengths within society more generally. One can strongly affirm that not every instance of ill-health is due to a failing of one's own character, while still acknowledging the potential that character interventions might hold in making positive contributions to health and well-being. To not utilize such character interventions—in schools or workplaces, say—is to neglect an important and powerful tool to enhance flourishing throughout society. Character is important for our own lives, and it is especially critical for those who are in positions of power and influence, if we are to work towards a better society. Neglect of matters of character will impoverish us and our communities.

While these character promotion intervention efforts are valuable and could arguably be much more powerfully leveraged than is the case at present, character and virtue are ultimately developed and shaped over the course of a lifetime. Relationships, communities, and institutions play a critical role in the development and formation of character. Efforts to promote character development at local, national, and international scales can make use of the existing and future evidence-based character interventions.

However, because of the important role communities, relationships, and institutions play in the formation of character, efforts to promote character should also foster and encourage community participation and acknowledge their critical role in development and formation and this too can be acknowledged within public health contexts (Rozier, 2016; Daly, 2011). These various efforts to promote character development have considerable potential to foster not only physical health, but the health of the person as well.

Virtues for Flourishing in Christian Thought and Community

Good character, or virtue, is of course not only instrumentally valuable, but intrinsically important in its own right. Character itself might be understood as the sum of the moral and mental qualities which distinguish an individual (Oxford English Dictionary, 1989), and virtue as a habit in accord with reason to attain the good (Aquinas, 1274/1948). Both the classical tradition (Aristotle, 4th-C BCE/1925) and the Christian tradition (Aquinas, 1274/1948; cf. Herdt, 2023) effectively envision flourishing as the development and exercise of the virtues, with the Christian tradition making the theological virtues of faith, hope, and love central (Aquinas, 1274/1948). Understood this way, virtue is a constitutive part of flourishing, of the health of the person. Failures of character or virtue, which inevitably arise, are a deviation from what God intended, and constitute sin. Christians, however, believe that God has, through the life, death and resurrection of Jesus Christ, and the ongoing work of the Church and the Spirit, provided a means to address such sin and to bring about a restoration to God's intent. From the standpoint of Christian theology, spiritual transformation, the life of the Church, and the work of the Spirit can powerfully shape character, both assisting in the developing of virtue and the infusing of virtues with an orientation towards more ultimate and supernatural ends (Aquinas, 1274/1948).

And indeed the empirical literature provides strong support for church attendance contributing to character and to other aspects of health and well-being (VanderWeele, 2017ab; Koenig et al., 2024). We are moreover to steward our knowledge and resources well, and this then arguably also entails a making use of the evidence-based character interventions described above to promote both character and also the health and well-being of society. The promotion of character and virtue is arguably important within pluralistic public health contexts, but it is absolutely essential for a genuinely Christian theology of health (VanderWeele, 2024).

References

Alan, S., Boneva, T., & Ertac, S. (2019). Ever failed, try again, succeed better: Results from a randomized educational intervention on grit. The Quarterly Journal of Economics, 134(3), 1121-1162.

Alan, S., & Ertac, S. (2018). Fostering patience in the classroom: Results from randomized educational intervention. Journal of Political Economy, 126(5), 1865-1911.

Aquinas, T. (1274/1948). Summa Theologica. Complete English Translation in Five Volumes, Notre Dame, IN: Ave Maria Press.

Aristotle (4th-C BCE/1925). Aristotle The Nicomachean Ethics: Translated with an Introduction. Oxford: Oxford University Press. ISBN 0-19-283407-X. Translated: David Ross. Re-issued 1980, revised by J. L. Ackrill and J. O. Urmson.

Cregg, D. R., & Cheavens, J. S. (2020). Gratitude Interventions: Effective Self-help? A Meta-analysis of the Impact on Symptoms of Depression and Anxiety. Journal of Happiness Studies, 22(1), 1-33.

Curry, O. S., Rowland, L. A., Van Lissa, C. J., Zlotowitz, S., McAlaney, J., & Whitehouse, H. (2018). Happy to help? A systematic review and meta-analysis of the effects of performing acts of kindness on the well-being of the actor. Journal of Experimental Social Psychology, 76, 320-329.

Dahlsgaard, K., Peterson, C., & Seligman, M. E. (2005). Shared virtue: The convergence of valued human strengths across culture and history. Review of general psychology, 9(3), 203-213.

Daly, D. J. (2011). Structures of virtue and vice. New Blackfriars, 92(1039), 341-357.

Davis, D.E., Choe, E., Meyers, J., Wade, N., Varjas, K., Gifford, A., & Worthington, Jr. E.L. (2016). Thankful for the little things: A meta-analysis of gratitude interventions. Journal of Counseling Psychology, 63(1), 20.

Emmons, R. A., & Mccullough, M. E. (2003). Counting blessings versus burdens: An experimental investigation of gratitude and subjective well-being in daily life. Journal of Personality and Social Psychology, 84(2), 377-389.

Herdt, J. (2023). The Virtues. Theology Brief. Global Faculty Initiative. Available at: https://globalfacultyinitiative.net/content_item/389.

Ho, M. Y., Worthington, E., Cowden, R., Bechara, A. O., Chen, Z. J., Gunatirin, E. Y., Joynt, S., Khalanskyi, V.V., Korzhov, H., Kurniati, N.M.T., Rodriguez, N., Salnykova, A., Shtanko, L., Tymchenko, S., Voytenko, V.L., Zulkaida, A., Mathur, M. and VanderWeele, T. (2024). International REACH Forgiveness Intervention: A multi-site randomized controlled trial. BMJ Public Health, in press.

Kerr, S. L., O'Donovan, A., & Pepping, C. A., (2015). Can gratitude and kindness interventions enhance well-being in a clinical sample? Journal of Happiness Studies, 16, 17-36.

Kirby, J. N., Tellegen, C. L., & Steindl, S. R. (2017). A meta-analysis of compassion-based interventions: Current state of knowledge and future directions. Behavior Therapy, 48(6), 778-792.

Koenig, H. G., VanderWeele, T., & Peteet, J. R. (2024). Handbook of Religion and Health. Oxford University Press.

Lyubomirsky, S., Sheldon, K. M., & Schkade, D. (2005). Pursuing happiness: The architecture of sustainable change. Review of General Psychology, 9(2), 111-131.

Oxford English Dictionary (1989). Oxford English Dictionary. Oxford University Press.

Rozier, M. D. (2016). Structures of virtue as a framework for public health ethics. Public Health Ethics, 9(1), 37-45.

Sloan, R. P. (2011). Virtue and vice in health and illness: the idea that wouldn't die. The Lancet, 377(9769), 896-897.

VanderWeele, T. J. (2017a). On the promotion of human flourishing. Proceedings of the National Academy of Sciences, 114(31), 8148-8156.

VanderWeele, T. J. (2017b). Religious communities and human flourishing. Current Directions in Psychological Science, 26(5), 476-481.

VanderWeele, T.J. (2022). The importance, opportunities, and challenges of empirically assessing character for the promotion of flourishing. Journal of Education, 202:170–180.

VanderWeele, T.J. (2023). A Critical Look at Flourishing. Psychology Today. Human Flourishing Blog. Available at: https://www.psychologytoday.com/us/blog/human-flourishing/202311/a-critical-look-at-flourishing

VanderWeele, T.J. (2024). A Theology of Health: Wholeness and Human Flourishing. University of Notre Dame Press.

VanderWeele, T. J., Case, B. W., Chen, Y., Cowden, R. G., Johnson, B., Lee, M. T., Lomas, T., and Long, K. G. (2023). Flourishing in critical dialogue. SSM-Mental Health, 3, 100172.

Wade, N. G., Hoyt, W. T., Kidwell, J. E., and Worthington Jr, E. L. (2014). Efficacy of psychotherapeutic interventions to promote forgiveness: A meta-analysis. Journal of Consulting and Clinical Psychology, 82(1), 154-170.

Willen, S. S. (2022). Flourishing and health in critical perspective: an invitation to interdisciplinary dialogue. SSM-Mental Health, 2, 100045.

For more information

www.globalfacultyinitiative.net