



American Health Values Survey

Communicating With U.S. Adults Based on Their Core Health Values and Beliefs

 **NORC** at the
University of
Chicago


Robert Wood Johnson
Foundation



Whether you are working within local communities to ensure access to healthy foods for low-income residents or working to change state policies to reduce health disparities, effective advocacy starts with understanding how audiences think about the issue.

[The American Health Values Survey \(AHVS\)](#) is a study funded by the Robert Wood Johnson Foundation, administered in 2016 and again in 2020, which captures insights on Americans' values and beliefs about building a healthier and more equitable nation. The survey explores how adults in the United States think about health on a personal, community and societal level. The survey measures the importance of personal health, how individuals define health and how it manifests in everyday behaviors. There are also measures of what adults in the United States believe about the social determinants of health (where we live, work, learn and play and how it impacts our health), the role of government in addressing the social determinants of health and what they value most for their own communities.

HOW TO USE THIS GUIDE

This guide is intended for organizations and groups working to bring about positive changes in health at the local, state and national levels. The goal is to highlight important results from the AHVS audience research that can inform planning of communication, outreach and advocacy efforts to motivate change on health issues like the ones listed above.

USING THIS GUIDE, YOU WILL BE ABLE TO BEGIN TO USE THE AHVS RESULTS TO:

- Assess the overall level of audience receptivity to what you are trying to accomplish
- Identify what audience segments are most and least receptive
- Understand what may interest and resonate with each segment
- Identify the possible channels and most trusted sources for reaching them
- Learn what types of messages and appeals may be most effective



How U.S. Adults Think about Health and Health Equity and What it Means for Communications Planning

The American Health Values Survey led to the creation of a typology or classification of U.S. adults based on their health values and beliefs. The typology classifies adults who responded to the survey into smaller subgroups or segments that are internally similar in their values and beliefs, yet distinct from the other segments. Understanding differences in the segments can help policymakers, activists and communicators to better understand opinions and prevailing attitudes so that programs and policies can be more effectively developed.

Most, but not all, Americans are supportive of efforts to build healthier and more equitable communities.

When it comes to promoting community health and health equity, most U.S. adults, 55%, fit into audience segments that are supportive. However, 33% fit into segments that are skeptical, and 12% fit into a segment that has mixed views, some supportive and some more skeptical. Certain parts of the country may have higher numbers of adults that fit into supportive or skeptical segments, however, researchers found that the same set of segments is common across many places in the country.

WHAT THIS MEANS FOR COMMUNICATORS

While a majority of U.S. adults support the vision of a healthier and more equitable country, there are a significant number of skeptics. This is probably true in your state or community as well. Recognize that no state or community is uniform in its views about health. Therefore, it is important to consider how you might segment your audiences and target communications to reach audiences that will be most receptive.

Audience segments range from broad support to broad skepticism.

We often think of the stances that people take on issues in simple, “for” or “against” terms. However, the study found that American views on health are much more nuanced: U.S. adults fit into one of six groups when it comes to their beliefs about health and health equity promotion.

Of these six groups, the most supportive is a group researchers labeled **Committed Activists**. They represent 18% of the survey sample and are supportive on all of the issues central to the work of health and health equity including the need for government action on health, the idea that everyone should have an equal chance to be healthy, and that where we live, work, learn and play has a big impact on our individual health. As the label suggests, this group gives high importance to personal health in their day to day lives and is more civically engaged on health issues.

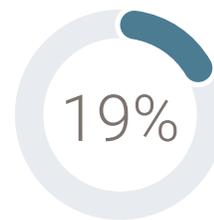
On the opposite end of the spectrum is a group called **Disinterested Skeptics**. They represent 16% of the survey sample and are disinterested in health generally; skeptical about health equity, equality of opportunity and the importance of the social determinants; and less likely to favor government action in health. The other four groups fit somewhere in-between the two ends of the spectrum. The six groups, and how they differ, are discussed later on in this guide.

WHAT THIS MEANS FOR COMMUNICATORS

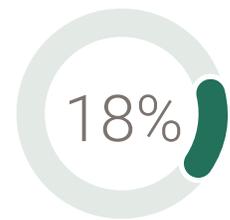
People with value and belief profiles similar to **Committed Activists** and the two other supportive segments, **Equity Realists** and **Equity Idealists**, are likely to be most receptive to health and health equity promotion. They should be prioritized for communication and coalition building efforts and are likely to respond positively.

Those with profiles similar to **Disinterested Skeptics** and **Self-Reliant Individualists** are skeptical across-the-board and are least likely to be receptive. As a result, it makes sense to de-emphasize them in most outreach and coalition building efforts. **Private-Sector Champions** are skeptical about many aspects of the work but more likely to respond to locally-focused efforts led by private sector groups and individuals rather than government.

THE 6 SEGMENTS



**EQUITY
REALISTS**



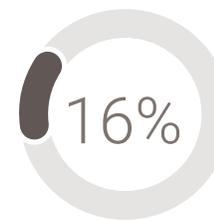
**EQUITY
IDEALISTS**



**COMMITTED
ACTIVISTS**



**SELF-RELIANT
INDIVIDUALISTS**



**DISINTERESTED
SKEPTICS**



**PRIVATE-SECTOR
CHAMPIONS**

Although the values and beliefs of those in the three most supportive segments differ, there are some things they all agree on.

Although the three supportive segments, Committed Activists, Equity Realists and Equity Idealists differ somewhat in their values and belief patterns, there is one common denominator: All three embrace the ideas that everyone deserves an equal chance to be healthy and an equal chance to succeed in life. They also embrace a sense of moral obligation to help those in need including the sick, the old and the poor and believe in the importance of being compassionate to others.

WHAT THIS MEANS FOR COMMUNICATORS

Initiatives and messages focused on the importance of everyone having an equal opportunity to be healthy and successful in life and helping those in need will resonate with all three supportive segments and may be a way to reach all three groups at the same time. AHVS researchers have found that these values are important drivers of support for government activism in health, more so than concern about health care disparities and the social and environmental factors influencing health.¹

Even those in the group with mixed views may be reached if the strategies are right.

A group that is “on the fence” is the **Private-Sector Champions**. They have mixed, and sometimes conflicting views about the health and health equity promotion. They are skeptical across-the-board about government activism in health, perhaps because of their generally conservative political views. Yet, they care about building healthy communities, and, while not completely aligned on all the issues, they embrace many of the equity and social solidarity values we measured in the survey. They are more likely than U.S. adults generally to feel a sense of moral obligation to help others in need. Private-Sector Champions are one of only two of the groups with a heightened concern about the importance of the social determinants of health. This group wants the work of building healthy communities to be led by private-sector individuals and groups, not the government.

WHAT THIS MEANS FOR COMMUNICATORS

Because this group is interested in building healthy communities, they are most likely to be receptive to locally focused efforts. They are also likely to respond positively if messages and partnerships are more focused on private individuals, businesses and voluntary organizations rather than on government actors.



¹ NORC at the University of Chicago. (2018). Understanding Relationships between Health Values and Beliefs among U.S. Adults: Results from The American Health Values Survey Modeling Work.

Where Does Your Audience Fit?

Each of the six groups has distinct values and beliefs, media usage, and trusted sources for information on health. Think about how your state, community or other broad audience can be segmented using insights from the American Health Values Survey. What groups within it map to each of the six AHVS types? How will you communicate about your issues with those groups?

The display below shows how the six segments differ in their values and beliefs. It shows whether each segment is more or less likely than U.S. adults in general to embrace particular types of values and beliefs.

| | Committed Activists | Equity Realists | Equity Idealists | Private-Sector Champions | Disinterested Skeptics | Self-Reliant Individualists |
|---|---------------------|-----------------|------------------|--------------------------|------------------------|-----------------------------|
| Social solidarity/concern for needs of others. | | | | | | |
| Belief all should have equal opportunity to be healthy. | | | | | | |
| Belief all should have equal opportunity to succeed. | | | | | | |
| Belief in existence of income-based health care disparities. | | | | | | |
| Belief in existence of race/ethnic health care disparities. | | | | | | |
| Importance of social determinants of health. | | | | | | |
| Government should do more to ensure health, even if higher taxes. | | | | | | |
| Government should be responsible for community health. | | | | | | |
| Health should be a top priority for federal government. | | | | | | |
| Civic engagement on health issues. | | | | | | |
| Importance of personal health. | | | | | | |



Much More Likely



More Likely



Neither



Less Likely



Much Less Likely

Demographic and Other Characteristics

In addition to having certain values and beliefs about health, each of the six segments are also defined by certain demographic, lifestyle and media use characteristics. This includes how communities are defined by the American Communities Project² which classifies the 3,100 counties in the United States into one of 15 different kinds of counties called community types based on cultural, socioeconomic and political characteristics to create a more complete profile for each of the six segments.



18% Committed Activists

- ▶ Tend to be female and slightly younger than U.S. adults generally.
- ▶ Most likely to be non-White, lower-income, but are more educated.
- ▶ More likely to live in Big Cities and Urban Suburbs, describe themselves as liberal and to identify as or lean Democratic.
- ▶ Put a great deal of effort into prayer or meditation.



HEALTH CHARACTERISTICS

- Likely to report being on Medicaid.
- Most likely to report having one place that they typically seek medical care and a little more likely to have received a routine check-up in the past year.
- Slightly more likely to report having a chronic condition.



MEDIA USE AND TRUSTED SOURCES ON HEALTH

- Tend to consume national print news and news from online-only sources. They are most likely to consume news on handheld devices and national radio news programs.
- More likely to trust non-media sources such as health-related, scientific, environmental and neighborhood/civic groups.

² <https://www.americancommunities.org/>



19% Equity Realists

- ▶ Tend to be younger, higher in income, and more educated.
- ▶ More likely to live in Big Cities and Urban Suburbs, to describe themselves as liberal, to identify as Democrats.



HEALTH CHARACTERISTICS

- Slightly more likely to report that their health is excellent or very good.
- Less likely to be smokers, but more likely to be overweight or obese.



MEDIA USE AND TRUSTED SOURCES ON HEALTH

- More likely to consume local print news.
- More likely than all other groups to trust information on health from non-media sources like health-related, scientific, environmental, social change and neighborhood/civic organizations as well as the Democratic party and elected officials.

18% Equity Idealists

- ▶ Tend to be female, older, have lower-income and less education.
- ▶ More likely to live in rural America and in faith-driven America, most likely to identify as Independent and moderate.



HEALTH CHARACTERISTICS

- Most likely to be covered by Medicaid, compared to all other groups.
- More likely to report being limited in their physical functioning and most likely of all groups to have a chronic condition and be regular smokers, and overweight or obese.



MEDIA USE AND TRUSTED SOURCES ON HEALTH

- More likely to use social networks and local TV for news.
- More likely to trust network TV and radio news, cable TV news and the New York Times, as well as social change groups and business organizations for information on health.



Self-Reliant Individualists

- ▶ Tend to be male, middle-aged, White, higher income and educated.
- ▶ More likely to live in rural America or sprawl and to describe themselves as conservative and Republican.



HEALTH CHARACTERISTICS

- Most likely of all groups to report being in excellent or very good health.
- Least likely to be covered by Medicaid.
- Least likely to have a chronic condition or to be limited in physical function.



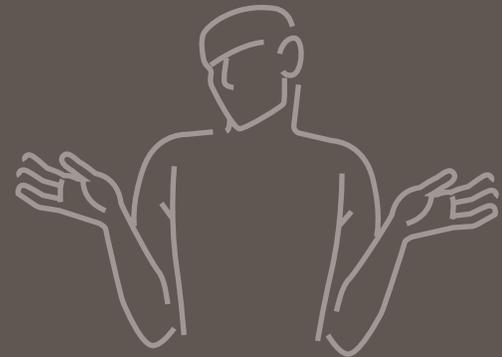
MEDIA USE AND TRUSTED SOURCES ON HEALTH

- Less likely to consume local or national news in print, from online-only sources, or on social networks, handheld devices, or TV.
- More likely to trust Fox News Channel and are least likely to trust PBS/NPR and other mainstream media outlets.
- More likely to trust the Republican party and less likely to trust other non-media sources for information about health.



Disinterested Skeptics

- ▶ Tend to be male, White, and to live in faith-driven America and rural America.
- ▶ More likely to identify as Republican, conservative.



HEALTH CHARACTERISTICS

- Least likely of the groups to report having health insurance.
- Slightly less likely to be covered by Medicaid.
- Least likely of all groups to have visited a doctor within the past year for a routine checkup.



MEDIA USE AND TRUSTED SOURCES ON HEALTH

- Slightly less likely to consume local or national news in any form.
- Slightly more likely than other groups to trust Fox News Channel for information on health.
- Are one of two groups most likely to trust religious or spiritual leaders and the Republican party and less likely to trust other sources of health information.



12%

Private Sector Champions

- ▶ Tend to be female and much older, lower-income and have less education.
- ▶ More likely to live in Urban Suburbs, and to identify as conservative and Republican.
- ▶ Most likely to view religion as very important and to attend religious services.



HEALTH CHARACTERISTICS

- Most likely of all groups to report having health insurance and to report having a recent routine check-up, but more likely to have limited physical functioning.



MEDIA USE AND TRUSTED SOURCES ON HEALTH

- More likely to watch local or national TV news, listen to local radio news, or read local print news.
- Less likely to trust PBS/NPR, national print news, network TV/radio news.
- Less likely to trust MSNBC and CNN and more likely to trust Fox News.
- Most likely to trust religious groups, national elected officials, the Republican party and corporate/business leaders.
- Less likely to trust health-related scientific, neighborhood/civic, environmental and social change groups or the Democratic party.

Learn More

[Click here](#) for more information about the six American Health Values segments and see the full research report.

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