

## Good Advice is Hard to Take: Response to Responses

Most of the people who responded to my previous post, “Good Advice Is Easy To Give But Hard To Take,” agreed with me. For example, Bob Liss, a psychologist in California said, “Kudos. Another blow against the cant and drivel that pass for life-sustaining advice.” A bit harsh, perhaps. The advice is well-intended. On the other hand, it is, as I said, often less than helpful.

But several people called on me to go beyond criticism. “So what?” they asked. How could they use my critique to be more helpful to people?

Hmm, maybe I should write a post entitled “It’s Easier To Be Critical Than To Say What Would Be Better.”

But I do have several thoughts about what might be helpful. And I received some very helpful suggestions in response to my post.

First, we should distinguish between giving advice to the public and giving advice to individuals.

### **Advice to the General Public**

The type of advice to the public that I criticized, advice that identifies 4 or 5 or 6 “pillars” of living well, strikes me as generally neglecting the different circumstances and cultures in which people live.

For example, advising people to eat well when huge numbers of people are lined up for free food because they are out of work, as they were early in the pandemic, strikes me as insensitive and useless in the extreme. Also, it neglects the fact that this is the most obese nation in the world and that the airwaves are filled with ads for scrumptious, unhealthy food.



# One<sup>very</sup> Old Man

I'm sorry, I know that's just more criticism. Frankly, I'm not sure what advice would be helpful to these people in these circumstances. Maybe more education woven into the help they are getting to survive. Maybe advocating for food banks to have appealing healthy food. Maybe advertising that shows healthy foods being enjoyed by celebrities.

In general, it's important to make the advice appealing and to keep in mind what will make it difficult for people to take advantage of the good tips they've been provided. Amplify the advice with suggestions about how to overcome the obstacles.

It also strikes me that the method of communicating public information is exceedingly important. Most of the suggestions that I criticized assume that people read, when in fact lots of people, maybe most, learn from other media: radio, TV, and various social media.

And there are also vast cultural differences in sources of information and the way in which information is communicated. Want to reach the Black community of Baltimore (where I live) for example? Best to get the message delivered by a leader of a Black church or on a soul music station. Want to reach young people? Social media are probably the best vehicles.

All of this strikes me as pretty obvious. The commercial world is good at it. Almost everyone uses deodorant whether they smell bad or not. Advertising and marketing strategies are remarkably sophisticated. Public health could benefit from their advice (which they might find hard to take).

Actually, I think the public health professionals who try to persuade the general public to behave differently know what they need to do—and sometimes do it. For example, the anti-smoking campaign was remarkably successful. It combined anti-smoking messages with advertising that, for example, suggests that smokers are sexually less attractive, with tax policy that drove up the price, with legal barriers to sales, etc.



Contrast that with the feeble effort that has been made to get people to eat healthy food—mostly preaching to end healthy food deserts despite cultures that savor foods that are unhealthy. And now in a context of celebrating oversized people who need oversized clothing. That doesn't encourage people to eat well. My favorite counterforce to healthy eating is advertising for medications to treat diabetes that say you should eat well and exercise but show distinctly overweight people dancing and singing happily because they've taken one or another of these new meds. This is not to say that you have to be thin to be healthy. It is to say that there are powerful counterforces at work that include encouraging people not to lose weight.

I'm not satisfied with my response to the challenge regarding what to do. But I think it's important to go beyond a few "pillars" of living well. There need to be efforts to respond to the circumstances in which people live. There needs to be thoughtful selection of media to deliver a message that is more than a pillar. Imagery is especially important. There need to be multi-dimensional campaigns that provide facts, of course, but that also address motivators such as cost, sexual opportunity, and the sadness of, for example, sick children or old people with dementia or animals freezing in winter.

## **Advice to Individuals**

For advice to individuals, it seems to me that the most important thing is not to expect rationality. That is, don't expect people to be motivated to change their behavior by good reasons to do it.

For example, for many years my doctor told me that I needed to lose weight, that I should eat less and exercise more. As if I didn't know that and as if I would finally do what he said I should. But year after year, I left my annual exam hungry, having fasted before the exam, and had a bacon cheeseburger and French fries. I knew I was medically obese and I would have liked to be thin and beautiful, but I was hungry. One year that changed. I was diagnosed with diabetes. I pictured my grandmother who had had diabetes, went blind, and had a leg amputated. I did a quick calculation and figured I was about to lose 10 years from my life. I wanted to live longer. I



lost 40 pounds over the next 3 months. The image of disability and the likelihood of premature death are what moved me. At about that time, I had a friend with severe diabetes who ate lots of sugary food. “You’re going to kill yourself,” I told him sanctimoniously. “OK with me,” he replied. Turned out that he had a miserable marriage and a grown son addicted to drugs. Living longer did not motivate him.

## **And motivation is the key.**

Ken Terkelsen, a psychiatrist in Massachusetts, sent this response to my post: “I am reminded of a fellow... who suffered the complete rupture of the large muscle in one of his thighs. When he went for rehabilitation after surgery, he was asked what he wanted out of rehab. When he replied, ‘To get better.’ the therapist asked, ‘What do you want to be able to do?’ He responded, ‘I want to get back to taking my dog for agility training.’ In that moment he had envisioned a highly desirable activity... That served as his motivation for an all-in course of rehabilitation.... Without this kind of envisioning, advice... invariably leads to nothing more than guilt and diminished self-esteem, for not being able to do the hard thing that is recommended.

Allen Zweben, who recently retired as Associate Dean of Columbia University’s School of Social Work and who is an expert on motivational interviewing sent this response: “Eliciting the other person’s ideas is crucial to giving advice... Asking permission before offering information and giving priority to what is most wanted or needed can be helpful in supporting autonomy. Gaining feedback about the person’s understanding... and response to the information provided may help to move the process along productively.”

And this from Brian Wettstein, my personal trainer: “... ‘stubborn creatures of habit’ are less likely to take advice than folks determined to learn new things and evolve as they age. I have learned to be creative helping clients find simple/comfortable ways to lean into the things that are ‘good for them’. This requires more listening.... more collaboration... helping folks



brainstorm their own answers that actually work for them in their lives. More questions like “what are you already doing?” and “what if you tried this?” Many people come up with their own solutions in this process. All the prescriptions of what one ‘should do’ only work in theory. Folks need help finding their own epiphany so the payoff becomes real and it is theirs! Then and only then might they get on a wellness journey that actually improves their quality of life. There are really simple things that can improve anyone’s life at any age.... The advice needs to resonate with them and be achievable.”

And from Ken Barish, a child and family psychologist in New York who has published several books to help parents with their kids: “I give a lot of advice, especially to parents and struggling students. Anyone who gives advice to the general public should definitely keep your comments in mind... However, there are some qualifications. First, some people actually need this advice. [Second] in my individual work, ... I presume that any advice I offer may be hard to take, so the advice is always individualized and emerges from a discussion of what makes it difficult and what might make it possible. Ken Terkelsen’s comment on envisioning a better future is profoundly right.”

I find these observations useful and hope that you do too. There’s lots more that could usefully be said, but I think I’ve touched on a number of key points if you want people to take advice. I won’t repeat them, but I do want to emphasize the most fundamental point:

**People are not entirely rational.**

Not by a long shot. If you want to get them to follow your advice, you’ve got to figure out what will motivate them—not you, them. And for sure don’t expect people to be persuaded to change behavior, especially habitual behavior, just by being presented with good reasons to do so.

