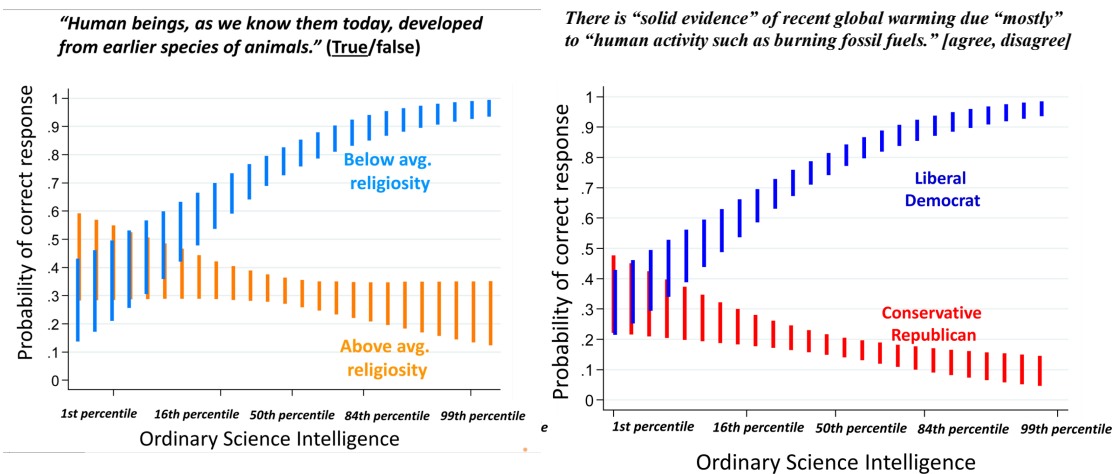


Tribal Politics

What an ordinary person does — as consumer, voter, or participant in public discussions — is too inconsequential to affect either the climate or climate-change policymaking. Accordingly, if her actions in one of those capacities reflects a misunderstanding of the basic facts on global warming, neither she nor anyone she cares about will face any greater risk. But because positions on climate change have become such a readily identifiable indicator of ones’ cultural commitments, adopting a stance toward climate change that deviates from the one that prevails among her closest associates could have devastating consequences, psychic and material. Thus, it is perfectly rational — perfectly in line with using information appropriately to achieve an important personal end — for that individual to attend to information in a manner that more reliably connects her beliefs about climate change to the ones that predominate among her peers than to the best available scientific evidence.

(Dan Kahan, “Climate-Science Communication and the Measurement Problem”)

Kahan’s empirical claim is that disbelief in global warming or evolution is not evidence of scientific ignorance. If you separate groups on a left/right basis, belief in warming increases with increasing scientific intelligence in the group predisposed to believe in it (left), decreases with increasing scientific intelligence in the group predisposed not to believe in it (right). Similarly with evolution if you divide the groups into more or less religious. The effect is shown in these graphs, where “Ordinary Science Intelligence” is a measure of to what extent someone understands how science works.



His explanation ...:

If that person happens to enjoy greater proficiency in the skills and dispositions necessary to make sense of such evidence, then she can simply use those capacities to do an even better job at forming identity-protective beliefs.

The [article](#) has lots of interesting stuff in it. Among other things, if you test people to see how much they understand about the theory of evolution, those who believe in it do no better than those who don't. Similarly for global warming. That fits my observation. Back before I gave up on

arguing climate change issues on FaceBook I concluded that almost nobody there on either (any) side of the argument understood the mechanism of greenhouse gas warming.

They thought of CO₂ as an insulator, like a blanket. If that were all it was it would block incoming heat from the sun as well as outgoing from the Earth. The essential characteristic of a greenhouse gas is selective transparency, the fact that it is more transparent to the short wavelength light coming down from the sun than to the long wavelength light going up from the Earth.

The ignorance is not limited to FaceBook. There is a [video](#) online that purports to demonstrate the greenhouse effect with a simple experiment performed by a young student. What it actually demonstrates is that CO₂ is less transparent than ordinary air, not that it is selectively transparent, which is what being a greenhouse gas requires. The video is presented by the Cleveland Museum of Natural History and the Clean Air Conservancy.¹

The same pattern of how people choose what to believe is described in more detail in a [post](#) by Scott Alexander about the way in which beliefs and attitudes tie into ideology. Each side of the political spectrum has a view of the world. When something happens that makes a good fit with one side's view that side pays a lot of attention to it, the other does its best to pretend it never happened. When something more ambiguous happens, each side interprets it in a way that fits their narrative. Someone's attitudes on issues ranging from global warming to Ebola can, to a considerable extent, be predicted by whether he self-identifies as conservative or liberal.

The Red Tribe and Blue Tribe have different narratives, which they use to tie together everything that happens into reasons why their tribe is good and the other tribe is bad.

After giving an imaginative account of how global warming should have been presented if the objective was to play into the conservative narrative instead of the liberal:

If *this* were the narrative conservatives were seeing on TV and in the papers, I think we'd have action on the climate pretty quickly. I mean, that action might be nuking China. But it would be action.

And finally:

I blame the media, I really do. Remember, from within a system no one necessarily has an incentive to do what the system as a whole is supposed to do. Daily Kos or someone has a little label saying "supports liberal ideas", but *actually* their incentive is to make liberals want to click on their pages and ads. If the quickest way to do that is by writing story after satisfying story of how dumb Republicans are, and what wonderful taste they have for being members of the Blue Tribe instead of evil mutants, then they'll do that even if the effect on the entire system is to make Republicans hate them and by extension everything they stand for.

Which demonstrates that the Scott understands the logic of situations where individual rationality fails to produce group rationality.²

¹ I discussed it in a [blog post](#). [replace by chapter if I write it]

² The subject of a [chapter](#) in the third edition of my *Machinery of Freedom*.

Kahan’s conclusion applies to himself as well as to others. One of his questions to test knowledge of warming was whether “human-caused global warming will result in flooding of many coastal regions.” He took it for granted that the answer was “yes.” In fact, the high end of the range for the projection of global sea level rise by the end of the century in the high emissions scenario of the fifth IPCC report is about a meter, less than the difference between high tide and low. Kahan has accepted exaggerated claims by the side of the global warming controversy that prevails among his closest associates, the one that it could have devastating consequences, psychic and material, for him to reject.

Gun Control and Homicide Rates

One issue that fits the pattern of tribal allegiance is gun control — the left for, the right against. One argument offered is "we know gun control laws work because the U.S. has a much higher homicide rate than countries such as Canada or the U.K., which have much more extensive restrictions." A common response is that there are other countries, such as Mexico and Brazil, with both restrictive laws and homicide rates much higher than in the U.S., and countries such as Czechia or Switzerland with relatively permissive laws and low murder rates.³ That raises question of in what respects the U.K. is more like the U.S. than Brazil or Czechia is.

An alternative approach is to ask whether the difference in homicide rates existed prior to the difference in regulation. According to the Wikipedia page on [Firearms Policy in the U.K.](#), the first restrictive legislation was the pistol act of 1903, but:

The Act was more or less ineffective, as anyone wishing to buy a pistol commercially merely had to purchase a licence on demand over the counter from a Post Office before doing so. In addition, it did not regulate private sales of such firearms.

The first significant restriction was the Firearms Act of 1920. There were additional acts in 1937, 1968, 1988, 1997 (almost completely banning private ownership of handguns) and 2006.

The [data](#) on Homicide rates per 100,000:

Year	U.S.	England&Wales	Ratio
1900	1.2*	0.96	1.3
1910	4.6*	0.81	5.7
1920	6.8*	0.83	8.2
1930	8.8	0.75	11.7
**1946	6.4	0.81	7.9
1950	4.6	0.79	5.8

³ Czechia requires a license for ownership of most types of firearms but any adult citizen can get a license provided he passes requirements similar to those for a driver’s license and is not disqualified by a past criminal conviction or inability to get a positive health report. Anyone with a license is permitted concealed carry and most legal firearms owners have concealed carry permits. Switzerland requires no license to own a firearm, a shall issue permit to purchase a firearm other than a single shot or bolt action rifle. Concealed carry, however, is restricted.

1960	5.1	0.62	8.2
1970	7.9	0.69	11.4
1980	10.2	1.11	9.2
1990	9.4	1.09	8.6
2000	5.5	***1.71	3.2
2010	4.8	1.14	4.2

* Based on data from only some states.⁴

**No data for the U.K. 1940-1945

***The figure is for the U.K. rather than England and Wales

Looking at the data, it is hard to see any effect of U.K. regulation on either the murder rate or the U.S./U.K. ratio. I would not be surprised if some restrictions on firearm ownership reduced the homicide rate but any effect is lost in the noise.

As this example shows, factoids that show up in this sort of argument, even when true, are rarely as solid evidence as those who offer them claim. Sometimes they are not even true. One commenter on my blog wrote, about the U.K.:

They don't record a murder as an actual *murder* until someone is convicted for the killing.

Challenged, he was unable to produce any evidence in support of that claim.

For another example of a controversy that has become linked to tribal identity ...

International Health Care Comparisons: The WHO Numbers

Back when Obama was pushing his version of health care reform his supporters offered a World Health Organization study [ranking](#) the health care systems of 192 nations as evidence of the need for change. A common claim was that, despite spending more per capita than any other country, the U.S. ranked only 37, behind most developed countries.

That claim was at best misleading. "Overall Health System Performance," the measure on which the U.S. ranked 37, takes expenditure into account, downrating the U.S. because it spends so much. There is another measure, "Overall Goal Attainment," which does not take account of expenditure. On that the U.S. ranks 15, still behind a fair number of other developed countries but not nearly as many.

Even that is misleading, however, because if one reads the [notes](#) explaining how the numbers are calculated it turns out that "Goal Attainment" is based on five different characteristics of a health care system, only one of which is an (imperfect) measure of how much health care the system

⁴ "The United States has been publishing homicide rates since the year 1906, but these are not reliable until 1933 simply because they were based on death certificates taken from a "registration area" that did not until then cover the whole nation." Roger Lane, "Murder in America: A Historian's Perspective," *Crime and Justice*, 1999, Vol. 25 (1999), pp. 191-224.

provides. That one, "Health level," is average life expectancy adjusted to make a disabled year count for less than a healthy year; the US does better than some developed countries, worse on more. It is an imperfect measure because life expectancy depends not only on health care but on lifestyle variables such as smoking or obesity and factors such as the death rate from murders and traffic accidents.

A second variable, responsiveness, measures how good people in each country think their health care system is, as determined by questionnaires. On that one the U.S. comes in first. The other three variables are all measures of distribution not level of care. "Health distribution" purports to measure how unequal the distribution of health care in each country is. It was based, because of data limitations, on a measure never clearly explained of the distribution of infant survival, apparently how many infants die at what point in their first five years. The relevant data existed for only a minority of countries; for the rest the report substituted an estimate based on variables such as poverty level. "Responsiveness distribution" was calculated from questionnaires and designed to measure the degree to which respondents believed that various groups in their country were disadvantaged with regard to health care. Finally, there is "fairness in financial contribution," defined as how nearly health costs are distributed in proportion to income minus the cost of food. That measure is strongly biased in favor of state-run health care plans, since in order for both health care and its cost to be distributed in the way the authors of the report approve of there has to be a sizable redistribution of cost from poorer families getting health care to richer families paying for it.

My conclusion is that the numbers produced by the report are very nearly useless for purposes other than propaganda since they are not a measure of how good the health care systems of different countries are at delivering health care. If a country improved health care for the top half of the population, left it unchanged for the bottom half, its rating would probably go down, since three of the five numbers are measures of equality. I do not know how one would do a much better job of comparing international health care systems, given the data limitations when trying to look at 192 different countries.

There is, however, detailed data on the comparison between the U.S. health care system and those of the other anglosphere countries in [*The Quest for Quality in the NHS: A Chartbook on Quality of Care in the UK*](#) by Sheila Leatherman and Kim Sutherland. I went through the book looking at outcome measures for which numbers were provided for both the U.S. and the U.K. (in some cases England or England and Wales). The U.S. was superior on six, the U.K. on 2.⁵ My conclusion, based on this very fragmentary data, is that U.S. healthcare outcomes are on the whole better, not worse, than UK healthcare outcomes.

⁵ The US did better in breast cancer survival, cancer mortality rates, colorectal cancer mortality rates, circulatory disease mortality rates (but the rates were converging, so by now the UK may have caught up with or passed the US), mortality from acute myocardial infarction (heart attack), and stroke mortality rates. The U.K. did better in mortality from coronary heart disease and ischaemic heart disease (but the latter was a near tie —146 to 147).

Affirmative Action, Richard Sanders, Thomas Sowell and Adam Smith

Some years ago, Richard Sanders offered evidence that affirmative action by law schools reduces the number of black lawyers. If you classify law students by academic credentials and what tier law school they go to, black students and white students have about the same bar passage rate; a black who goes to (say) a second-tier law school is about as likely to pass the bar as a white with similar academic credentials who went to a similar law school. But if you classify students only by academic credentials, blacks have a much lower bar passage rate than whites.

Sanders' explanation was a mismatch between students and schools. Law schools compete to get black students, there are not enough well qualified ones, so elite schools accept black students with qualifications well below those they require for white students. The result is that many black students end up in schools and classes they are not qualified for, learn little and fail to pass the bar; they would have done better in a school designed for students more like them. Sanders concluded that a race blind admission policy would result in fewer black students going to law school but more passing the bar.

The argument was not original with Sanders. More than thirty years ago, in his very interesting *Choosing a College: A Guide for Parents and Students*, Thomas Sowell made the same point in the context of colleges. Black students at MIT had math scores well above the national average but far below the average for white students at MIT; they would have gotten a better education at a less elite engineering school.

A black student whose academic credentials suit him for a second-tier law school but who gets admitted to Stanford does not have to go to Stanford; SCU will be happy to admit him, probably with a generous scholarship. Both Sowell and Sanders assume that the student will mistakenly choose the school that will do a poorer job of educating him; their argument depends on assuming that students are imperfectly rational. The same objection applies to an argument sometimes offered against features of the welfare system, that they make poor people worse off by reducing but not eliminating the cost of decisions, such as not showing up on time for a job or engaging in unprotected sex, that leave people stuck in poverty. A rational individual would choose the more difficult but ultimately more rewarding alternative.

The problem is pointed out in a paper by Beaulier and Caplan⁶ arguing that supporting such arguments requires ideas from behavioral economics. People tend to overestimate their own ability, underestimate some categories of risk, hence the black admitted to Stanford Law School is likely to believe that he is competent to get through it even if he isn't, the young woman tempted to unprotected sex to underestimate the risk of pregnancy, overestimate her ability, if necessary, to bring up a child on her own.

Very nearly the same argument was offered more than two centuries earlier by Adam Smith:

The counsellor at law, who, perhaps, at near forty years of age, begins to make something by his profession, ought to receive the retribution, not only of his own so tedious and

⁶ As pointed out in an article by Scott Beaulier and Bryan Caplan Scott, "Behavioral Economics and Perverse Effects of the Welfare State," *Kyklos*, [Volume 60, Issue 4](#) pp. 485-507.

expensive education, but of that of more than twenty others, who are never likely to make any thing by it. How extravagant soever the fees of counsellors at law may sometimes appear, their real retribution is never equal to this.

... The lottery of the law, therefore, is very far from being a perfectly fair lottery; and that as well as many other liberal and honourable professions, is, in point of pecuniary gain, evidently under-recompensed.

...

The contempt of risk, and the presumptuous hope of success, are in no period of life more active than at the age at which young people choose their professions.

Time Inconsistency and the Welfare State

Start with a society in which you are likely to lead a much harder life if you do not find some way to earn your living. Someone relying on charity will be seen, by himself and others, as a failure.

Add a generous welfare state. For a generation or so the old attitudes persist. As time passes, it becomes clearer and clearer that going on welfare is not evidence of failure, hence not something to be ashamed of; it provides less money than a job but a lot more leisure. If you want to go off to Prague or Barcelona for a week or two you are free to do so, provided you don't mind doing it on the cheap. As more and more people see welfare as a reasonable choice, attitudes change. You end up with a society where anyone who prefers a life of leisure with a moderately restricted income takes it, leaving fewer and fewer people to pay the taxes that support that life.

The implication is that a welfare state will look better in the short term, when most of the people collecting welfare have attitudes shaped by a society without it, than in the long.⁷

Denmark may have made it to the long term:

In the past, people never asked for help unless they needed it," said Karen Haekkerup, the minister of social affairs and integration, who has been outspoken on the subject. "My grandmother was offered a pension and she was offended. She did not need it.

The response of the state, according to the NY Times article, is not reduction of welfare but additional state action:

Instead of offering disability, the government intends to assign individuals to "rehabilitation teams" to come up with one- to five-year plans that could include counseling, social-skills training and education as well as a state-subsidized job, at least in the beginning. The idea is to have them working at least part time, or studying.

Endogenous Disability

A proposal advocated by some in Britain is that patients suffering from lifestyle illnesses, medical problems mainly due to behavioral choices such as being overweight, ought to have to pay for

⁷ A [webbed piece](#) making a similar point about other institutional changes.

their own medical care rather than having it provided for free by the National Health Service. It is a proposal that provokes strong responses both against and for.

It is also one that raises the more general issue of to what degree problems people have do or do not deserve our sympathy. Much of the support for policies that favor disabled people, public and private, comes from the assumption that disabilities are entirely exogenous, have nothing to do with choices the victim made and so are entirely undeserved. In many cases that is surely true; birth defects are a clear example, injuries from accidents or military action only a little less so. But not in all.

The first case that comes to my mind is a legally blind woman who was a new member of a group I was part of. The group had weekly meetings. For a while after she joined she succeeded in getting one person or another to stop by her home, pick her up, and drive her to the meeting. Eventually she ran out of people willing to do that and started taking the bus instead. Her disability was real; although not totally blind, she could not see nearly well enough to drive. But how disabled it made her, how much it limited what she could do and thus to what degree it made her dependent on the help of others, was in part a matter of choice.

I have repeatedly observed, usually at science fiction conventions, people in powered wheelchairs who are very much overweight. I expect that in some cases the weight is a consequence of the disability, less exercise and less opportunity to do pleasurable things other than eating. But I suspect that in many others the causation went the other way around. Someone who could get around reasonably well on his own legs if he weighed a normal 150 pounds might find it very difficult at 300 pounds plus. For an extreme example in the other direction, I have a friend with cerebral palsy who walks with some difficulty; not only does he manage without a wheelchair, his hobbies include an active involvement in martial arts.

Looking at it as an economist, the logic of the situation is clear. If someone makes choices that partly disable him and pays all of the resulting costs, he presumably finds the benefits sufficient to justify the cost. If a substantial part of the cost is born by others, whether taxpayers or sympathetic individuals, that is no longer true. Just as in other cases of externalities, the individual may find it in his interest to take actions that make him better off but make him plus the others affected worse off.

Looking at it as an individual judging those around me, something all of us do although some are reluctant to admit it, I get a similar result. I have no objection to someone who smokes in his home, even though it may shorten his lifespan; that is his decision to make. If someone chooses to be massively overweight and is willing to tolerate the resulting costs, there is no good reason for me to think less of him; I may be puzzled at his choice but my own experience with the difficulty of losing weight and keeping it off suggest that perhaps it is even harder for him. But if someone both chooses to make himself to some degree disabled and expects other people to go to some trouble to compensate for that disability, I feel much less inclined to assist him.

Getting back to my original example of the proposed change in British health care policy, however, it is not clear just how the logic of endogenous disability can be dealt with in a system such as the National Health Service. A lot of choices can lead to injury: choosing to engage in athletic activities or a risky profession, driving an older car with fewer safety features. In practice, the policy is likely to be restricted to lifestyle choices that many people disapprove of — smoking or being overweight but not playing football.

One more problem in designing such a program is that the same behavior that increases medical costs may decrease life expectancy and so pension costs. Smokers who die early save the public both their social security payments and medical costs that would be incurred in their old age. Smoking might produce, on net, a positive externality.⁸

The closest thing to a full solution to these problems would be a purely private system where everyone paid his own costs, directly or through private insurance. If the latter, it would be up to insurance companies to estimate as expected health costs for each customer and set rates accordingly. That is not likely to be a politically acceptable option in either Britain or the U.S. any time soon.

Endogenous disability is the subject of one of my economics jokes, provided by a Russian friend:

The director of the Moscow zoo noticed that one of the elephants was coughing. So he decided to add vodka to this elephant's bucket of water. The next morning that elephant was completely healthy but the other three elephants began to cough.

When Costs Aren't

From the standpoint of an economist, the logic of global warming is straightforward. There are costs to letting it happen, there are costs to preventing it, and by comparing the two we decide what, if anything, ought to be done. I am fairly sure, however, that many of those who are sure we should be doing something about it do not see the question that way. What I see as costs, they see as benefits.

Reduced energy use is a cost if you approve of other people being able to do what they want, which includes choosing to live in the suburbs, drive cars instead of taking mass transit, heat or air condition their homes to what they find a comfortable temperature. But it is a benefit if you believe that you know better than other people how they should best live their lives—know that a European style inner city with a dense population, local stores, local jobs, mass transit instead of private cars, is a better, more human, lifestyle than living in the anonymous suburbs, commuting to work, knowing few of your neighbors. It is an attitude that I associate with an [old song](#) about little houses made of ticky-tacky—meaning houses the singer didn't like and was therefore confident that other people shouldn't be living in, occupied by people whose life style she thought she knew and was confident she disapproved of. A very arrogant, and very human, attitude.

There are least three obvious candidates for reducing global warming that do not require a reduction in energy use. One is nuclear power—a well established, if somewhat expensive, technology that produces no CO₂ and can be expanded more or less without limit. One is natural gas, which produces considerably less carbon dioxide per unit of power than coal, for which it is the obvious substitute. Fracking has now sharply lowered the price of natural gas, with the result that U.S. output of CO₂ has actually fallen. The third and more speculative candidate is

⁸ Jan J. Barendregt, Luc Bonneux, and Paul J. van der Maas, The Health Care Costs of Smoking, *N Engl J Med* 1997; 337:1052-1057.

geoengineering—one or another of several approaches that have been suggested for cooling earth without reducing CO2 output.

One would expect that someone seriously worried about global warming would take an interest in all three alternatives. Of course, in each case there are arguments against as well as arguments for. But if one believes that global warming is a very serious problem and alternative solutions are costly, one ought to be biased in favor of each of them, inclined to look for arguments for, not arguments against.

In my experience that is not how people who campaign against global warming act. They are less likely than others, not more, to support nuclear power, to approve of fracking as a way of producing lots of cheap natural gas, or to be in favor of experiments to see whether one or another version of geoengineering will work. That makes little sense if they see a reduction in power consumption as a cost but quite a lot of sense if they see it as a benefit.

I have focused on global warming but the pattern exists in other contexts and across the political spectrum. When 9/11 happened, a lot of the people who insisted that the threat of terrorism now made it unfortunately necessary to restrict individual privacy and civil liberties in a variety of ways were people who were in favor of the same policies before 9/11. The general approach is perhaps best summed up in a quote attributed to Rahm Emanuel, back when he was working for Obama:

You never let a serious crisis go to waste. And what I mean by that it's an opportunity to do things you think you could not do before.

The argument for sharply increasing federal spending and doing it with borrowed money was that it was an emergency measure made necessary by the economic crisis. For Emanuel, and presumably his boss, it was an opportunity to do things they would have wanted to do whether or not there was a crisis. The argument for using regulation or carbon taxes to reduce the output of carbon dioxide is that it is made necessary by the threat of global warming. For many of those who make that argument, it is an opportunity to make other people live the way those people think they should.