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Disciplinary Brief

PUBLIC HEALTH, LOVE, AND THE CHRISTIAN TRADITION

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As O'Donovan (2026) rightly observes in his Theology Brief on "The Sovereignty of Love," the Christian tradition puts love at the center of its ethics, and at the heart of what it means for humans to flourish. Jesus taught that the greatest commandment was to love God and to love one's neighbor, and all other commandments and law depend upon this (Matthew 22:35-40; cf. Romans 13:8-10). Echoing Saint Paul, Thomas Aquinas considered love or charity as the greatest of all virtues (Aquinas 1948/1274, I.II.66.6; II.II.23.6) and as the form, foundation, and end of all other virtues (Aquinas 1948/1274, II.II.23.8; O'Donovan, 2026) and what ultimately unites us to God (Aquinas 1948/1274, II.II.23.1,3; II.II.24.2).

Although public health seeks to promote population-level health and well-being, discussion of matters of love is relatively uncommon. The present essay puts forward an argument that this can, and should, be changed. Drawing upon both theological reflection on the relation of love to health (VanderWeele, 2024, 2026), but also, and principally, upon theoretical and empirical evidence outside of a distinctively Christian set of presuppositions (VanderWeele and Lee, 2025), I will argue that work in public health to promote love and also more universal forms of love – love of neighbor and even love of enemy – would contribute substantially to advancing many goals of the public health community. I will further argue that for the public health community to achieve its goals as best as possible, the promotion of love is not only helpful, but necessary.

Drawing in part on earlier work (VanderWeele, 2024; VanderWeele and Lee, 2025; VanderWeele, 2026b), I will present evidence for the effects of love on health for both (i) recipients of love and (ii) those loving; and argue additionally that (iii) such love sustains relationships and communities, which themselves contribute to health, and that (iv) love is needed to sustain our societal institutions upon which public

health depends with love also being critical in navigating our disagreements in the context of a pluralistic society. It is argued that one might view the promotion of love as a public health effort as a distinctively Christian contribution to the public health community (VanderWeele, 2024, 2026). Work towards the promotion of love within public health does not require a set of distinctively Christian presuppositions. However, the centrality of love within the Christian tradition perhaps helps more clearly see its potential value and importance within public health in a pluralist context as well.

Concepts and Definitions

Love might be understood as a stable orientation of desire and will towards some good (cf. O'Donovan, 2026; VanderWeele, 2023). Love arguably has both a unitive and a contributory dimension (Aquinas 1948/1274; Stump, 2006). The unitive dimension of love seeks union with the beloved person or object. The contributory dimension seeks the good of the beloved for its own sake. Or more precisely, unitive love might be understood as "a disposition toward desiring a perceived good or desiring union with it, either as an end itself or with it being a source of delight in itself" and contributory love as "a disposition towards desiring good for a particular object for its own sake" (VanderWeele, 2023). Any use of the verb "love" arguably indicates either one or both of these unitive and contributory dimensions (VanderWeele, 2023). Often in human relationships we expect or hope that both the unitive and contributory dimensions are present.

Love, understood thus, effectively orients us towards what is good, and thereby orients us towards flourishing (VanderWeele and Lee, 2025). The argument in this Brief is not that *health* is a central object of love, but rather than our love for *other people* is a central force shaping our health. If this contention is correct, then promoting love may play a powerful, and at present underutilized, role in fostering population health. The exposition here will consider both love within specific human relationships: parent-child, marriage, friendship, etc. but also more universal forms of love, what in the Christian and other traditions may be called "love of neighbor" (Goodman, 2008; Rothenberg, 2008). Such love of neighbor might be understood as a disposition towards desiring to be present with and to contribute to the good of each person one encounters (Goodman, 2008; VanderWeele et al., 2026). The Christian tradition also takes love of God as central to flourishing, and I will briefly return to this matter and its relation to love of neighbor, at the end of the essay. However, with regard to advancing public health in a pluralistic context, I will focus here principally on love in human relationships.

Love as a Cause of Health for Recipients of Love

Positive Health Effects of Parental Love

Love affects the health and well-being of the one who is loved. This is perhaps most evident in parent-child relationships (VanderWeele and Lee, 2025; Huppert et al., 2010; Chen et al, 2019ab; Wilkinson et al., 2026). There is evidence from rigorous longitudinal studies that parental love or warmth affects the

subsequent health and wellbeing of the beloved child (Huppert et al., 2010; Chen et al, 2019ab). Many of the existing studies use assessments of parental warmth or relationship quality that effectively serve as proxies for love. Chen et al. (2019a) provided evidence that the experience of parental warmth growing up was associated over ten years with subsequently greater flourishing, including greater emotional wellbeing, psychological wellbeing, and social wellbeing, as well as less depression and drug use. Huppert et al. (2010), likewise provide similar evidence for effects of parental care or warmth on psychological wellbeing, including personal growth, mastery, purpose, positive relations, and self-acceptance. Chen et al. (2019b) examined various parenting practices and presented evidence from several years of longitudinal data indicating that parenting styles characterized by high levels of both warmth and discipline were associated with greater emotional processing and expression, fewer health problems, lower risk of obesity/overweight, less depression, and less overeating. When examining other parenting styles it appeared to be parental warmth that was especially dominant in giving rise to these outcomes (Chen et al., 2019b). Attachment theory likewise points to the importance of love in development, and suggests that this is a fundamental need (Cassidy et al., 2013; Holmes, 2014). A recent study of retrospective assessments of the experience of parental love in childhood suggests, across twenty-two different countries, that such parental love powerfully affects a host of health and well-being outcomes (Wilkinson et al., 2026).

Positive Health Effects of Marital Love

A second body of evidence concerns marriage and marital love (Manzoli et al., 2007; Robles et al., 2014; VanderWeele and Lee, 2025). Most of the relevant longitudinal research does not, at present, specifically assess love, but rather uses assessments of relationship quality, or marriage itself, as its measure, which might be taken as proxies for love, yet proxies that, within many marriages, may bear a relatively close connection to love itself. Marriage in many contexts is a source of love. Individual studies and meta-analyses of longitudinal studies have indicated associations between marriage or marriage quality and lower all-cause mortality in both clinical and non-clinical samples (King and Reis, 2012; Idler et al. 2012; Manzoli et al., 2007; Wood et al., 2007; Robles et al., 2014). Other studies have found that as adolescents grew up and transitioned to marriage, they experienced a decline in depression symptoms and suicidal ideation (Amato, 2015). Reviews of the relationship between marriage and health have found consistently positive relationships between marriage and subsequent wellbeing (Koball et al. 2010, Wood et al. 2007). Chen et al. (2023) report longitudinal associations over 25 years between entering marriage and lower mortality, coronary heart disease, and stroke; lower depression, loneliness, and smoking; and greater happiness, purpose in life, and hopefulness.

Love affects the health and well-being of the one loved. The contributory dimension of love provides for the health and well-being needs of others, but also affirms their worth in being loved. The unitive dimension of love likewise affirms of goodness of being of the beloved and fills a fundamental need (Cassidy et al., 2013; Holmes, 2014; Lyubomirsky and Reis, 2026). It is perhaps thus unsurprising that being loved is a source of health for the beloved.

Love as a Cause of Health for the One Loving

Love will also often have positive effects on health and well-being for the one loving. Evidence for this comes from a variety of sources concerning studies closely related to love. One body of evidence concerns experimental and longitudinal studies on beneficent action (cf. Curry et al., 2018; VanderWeele, 2020; Nakamura et al., 2024). Such beneficent action intended to promote good of others is not necessarily love since one can carry out beneficent action for reasons other than love. However, love in most cases will result in beneficent action, and beneficent actions are often motivated by love.

Volunteering

A number of longitudinal studies have indicated that volunteering, which might be seen as a sort of commitment to repeated acts of kindness, can contribute to one's own health and wellbeing. Individual studies and meta-analyses of longitudinal studies, supported by some small randomized trials, have indicated that those regularly engaged in volunteering tend to subsequently be happier, have more social activities, have better physical and mental health, and also live longer (Okun et al., 2013; Anderson et al., 2014; Pool et al., 2017; Post, 2017; Kim et al, 2020). Likewise, evidence from randomized trials, and a meta-analysis (Curry et al., 2018) of randomized trials, of promoting acts of kindness suggest that such acts of kindness increase one's happiness and life satisfaction, and help one feel more engaged, less anxious, and more connected (Buchanan and Bardi, 2010; Ouweneel et al., 2014; Kerr et al., 2015). Such acts of kindness promote not only the wellbeing of others, but the wellbeing of the actor. Likewise randomized trials of interventions to promote compassion and loving-kindness suggest effects on greater happiness (Jazaieri et al., 2014; Kirby et al., 2017); less depression (Galante et al., 2014; Kirby et al., 2017) and less worry or anxiety (Jazaieri et al., 2014; Kirby et al., 2017).

Forgiving

Some evidence for effects of love on the health of the one loving can also been seen in research on forgiveness. Forgiveness might be understood as a restoration of contributory love following an offense. Large longitudinal studies have indicated that forgiveness of others is associated with subsequently lower levels of depression, anxiety, and psychological distress and higher levels of happiness, self-esteem, emotional processing, social integration, and volunteering (Chen al., 2019c; Long et al., 2020). Randomized trials, systematic reviews, and meta-analyses of randomized trials, of forgiveness interventions have indicated that these interventions to promote forgiveness have effects not only on increasing forgiveness, but also on reducing depression and anxiety and increasing hope and well-being (Wade et al., 2014, 2020; Ho et al., 2024).

Human persons have the capacity to do good and to love and serve others. In some ways, the orientation to the good in love is an orientation towards flourishing. When we love others, we attain something of human potential. This itself, the evidence indicates, contributes to the health and well-being of the one

loving.

Love, Social Relationships, and Health

Love of course also fosters relationships (Simpson and Campbell, 2013; VanderWeele and Lee, 2025). Desiring to be with another person, spending time with that person, and seeking their good is effectively what allows relationships to form, develop, and deepen. There is a joy that comes in loving, and a joy that comes in loving relationships; there is a sharing of life, a delighting in, and a deepening of the understanding of the other person (Simpson and Campbell, 2013; Maddux, 2024). Such relationships are of intrinsic value in and of themselves, but also provide social support which often contributes to the material and psychological wellbeing of those in relationship, both generally and perhaps especially in times of need. There is now a large body of evidence on the effect of social support, social relationships, and social connection on outcomes ranging from all-cause mortality to depression to numerous other aspects of well-being (Holt-Lunstad et al., 2015, 2022; Hong et al., 2023). Social relationships support health. However, the origin of such relationships begins with various forms of love. We are relational creatures and we flourish in relationships; we flourish when loving, and when being loved; we flourish when that love is mutual. Love through relationships helps promote the health of those in relationship.

Love in Sustaining Society and Its Institutions

The promotion of population health requires a well-functioning society and well-functioning institutions – certainly that of public health itself, but also healthy families, schools and communities, and a healthy political environment. Unfortunately, there is evidence that trust in institutions is declining and political polarization is increasing (Jones, 2024; Gallup, 2026). The promotion of more universal forms of love, such as love of neighbor (Goodman, 2008) and love of enemy (Brooks, 2019) may be critical in addressing our tensions and divisions. Political interactions could likewise be improved by more loving dispositions towards all, towards one's neighbor, and even towards one's opponents or enemies (Brooks, 2019; VanderWeele and Lee, 2025). Seeking the good of others, even those with whom one disagrees, has the potential to better enable understanding of divergent viewpoints and of finding greater common ground. Recognizing the inherent dignity and value of political opponents has the potential to limit harmful actions taken against others, and may enhance a political community's capacity to work together across disagreements.

Breaking Cycles of Hatred and Violence

The Christian teaching of "love of enemy" (Piper, 1979; Reiser, 2001) can be particularly powerful in this regard. If our love of neighbor is truly universal then such love is to extend to all – even to those to whom one may be opposed, those who may have a settled ill-will against oneself, or towards whom one may be inclined to have ill-will (VanderWeele et al., 2026b). However, in recognizing the inherent value and dignity

of each person one can still desire good for those who might be seen as one's enemies. Such of love of enemy does not mean that the disagreements do not matter, and indeed if one truly desires good for the other then this would entail also a desire that the other changes their understanding of what is good. The practice of such love of enemy has the potential to free oneself from hatred, to end cycles of hatred and violence, and potentially even transform also the one loved (King, 1957).

Forgiveness also has the potential to heal societal division. Injustices, wrongs, and hurts persist. Forgiveness, understood as the replacing of ill-will towards the offender with good-will, may be understood as the restoration of love. It is in such forgiveness that we are released from the offense, and from the offender, and that relationships can, when appropriate, be restored. Forgiveness is not incompatible with justice or with just punishment; one can forgive and desire the ultimate well-being of the offender, and yet still seek a just outcome (Holmgren, 1993). But forgiveness frees the victim, promotes health (cf. Toussaint et al., 2015; Long et al., 2020), and opens the way for a restoration of wholeness to the individual and the community. Forgiveness itself can help heal divisions and restore trust.

Love, as consistent desire for the good of the other, can moreover, empower justice (O'Donnovan, 2026; VanderWeele, 2024). We are more likely to treat each person as they deserve, to respect their rights and to seek to uphold those rights if this also comes out of a sense of love for the other, a consistent desire for their good. A universal love of neighbor can empower a universal pursuit of justice. Love can enable the upholding of justice and rights. If our institutions are to persist, including the institution of public health and the trust in that institution, we need to work towards better promoting love, trust, and reconciliation. We need to better establish a "civilization of love" (John Paul II, 1991; Catholic Church, 2004, 580-583; Osewska and Simonič, 2019).

Towards an Epidemiology of Love

For public health efforts to better promote love, and thereby also better health, it would be desirable to establish a fuller epidemiology of love (Levin, 2000; 2023) so as to understand the distribution, determinants, and effects of love in its various forms. Some such work has already begun (Lee et al., 2026; Wilkinson et al., 2026) but more adequate measures and additional longitudinal studies would be desirable. Love could be studied both within the context of specific relationships (e.g. parent-child, marriage, etc.) and also with respect to its more universal forms, such as love of neighbor and love of enemy (VanderWeele et al., 2026ab). Better measures of love could also be used in longitudinal studies and within randomized trials. A recent Templeton-funded project on the assessment of interpersonal love has a series of closely related measures assessing both contributory and unitive love across different types of relationship types, including parent-child love, romantic and spousal love, friendship love, love of neighbor, love of stranger, and love of enemy; and the psychometric properties of the love of neighbor assessment is now available for inclusion in epidemiologic and cohort studies (VanderWeele et al., 2026a). A more thorough epidemiologic study of love could help provide evidence-based approaches to promote love in society and thereby also health and well-being.

Promotion of Love in Public Health Campaigns

Public health efforts would not only benefit from greater universal love and trust within society but in principle could also contribute to it (VanderWeele and Lee, 2025). Efforts could be made to run “love of neighbor campaigns.” Assessments of love could be carried out at local, state, and national levels and also tracked over time to evaluate how different forms of love within society may be changing. Local, state, and national level efforts could be made to disseminate evidence-based interventions on acts of kindness, volunteering, compassion, loving-kindness meditation, and forgiveness interventions discussed above, along with future evidence-based interventions concerning the promotion of love once their effectiveness is clear. Efforts could also be made for news and media communications to better promote love and beneficence, rather than mistrust or hatred (VanderWeele and Brooks, 2024; VanderWeele and Lee, 2025). A more caring and compassionate climate could be encouraged for schools, workplaces, neighborhoods and elsewhere. While the effects of each of these individual efforts might be small, given the potential for outreach and dissemination, the overall effects on society could be substantial.

Importantly, efforts to promote universal love – love of neighbor and love of enemy – do not necessarily require complete agreement on what is good. It may be the case that one has different views on what is good than the one whom one loves; and this may apply across different types of relationships from parent-child relationships, to friendships, to relations between opponents, political or otherwise. Love as desiring the good of the other, and some form of union or reconciliation with the other, does not mean accepting the other’s notion of what is good. However, it will involve seeking to understand their notion of what is good, and the desire for it, potentially trying to change their understanding of what is good, but also navigating actions in ways that still convey value and respect even if disagreements remain. This is relevant in navigating potential tensions across political lines, and also tensions that may arise been public health and religious institutions. At present, traditional Christian teaching on matters ranging from abortion, to family, to sexual ethics are contrary to what is often promoted by the public health community. In these various contexts, the notion of love neighbor, extended to those to whom one may be opposed, can help maintain better relations and even partnerships amidst inevitable tensions (Murray et al., 2011; Gunderson and Cochrane, 2012; Levin, 2014; Idler et al., 2019). Continuing to treat one another with respect and to find elements of common pursuit, even amidst disagreement, will be critical in navigating disagreement and lessening political tensions and divisions. The promotion of more universal forms of love may assist in this.

Advancing a Civilization of Love Advances Population Health and Wellbeing

The Christian tradition has love central in its understanding of ethics of and of human flourishing. As argued here, love should arguably also be given a more prominent place in public health. In the Christian understanding, love of neighbor, of all those who one encounters, provides the orienting principle for right action. However, in the Christian understanding, that love is itself to be directed by a love for God. That

love for God, and yet more fundamentally, God’s love for us, brings an ultimate union with God, which is the end and goal of human life (Aquinas 1948/1274; Garrigou-Lagrange, 1999; VanderWeele, 2024). However, our love for God and God’s love for us is also to empower our love for our neighbor. In seeing the neighbor, and one’s enemies, as being loved by God, as being created in the image of God, and as one who God commands one to love, we are enabled to better love (King, 1957; O’Donovan, 2026; VanderWeele, 2024). Our love for God and God’s love for us is to ultimately also empower our love for our neighbor. While such matters extend beyond public health in a pluralistic context, they do again highlight the centrality of love in Christian teaching and may give clues as to the power of participation in religious community in promoting health and well-being (Balboni et al, 2022; Koenig et al., 2024). However, if such communities are truly living out their faith and teachings, these communities will ultimately be contributing to the promotion of love. Such promotion of love can be done by religious communities and by public health communities alike. Such promotion would help advance a civilization of love, and thereby also advance population health and well-being.

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