

Expert Group Psychology & Corona

New challenge

Special corona measures to protect us against the virus have asked an **exceptional concerted effort from citizens**. The measures infringe on our customary ways of life and require enduring adaptive changes. Whereas specific restrictive measures were initially introduced as temporary we are now evolving towards a **new stage of more permanent behavioral change**. We now have to turn these adaptive changes into new habits or habitual behavior. New habits take root mainly through frequently repeated planned behavior, so that they become part of new behavioral scripts in our brain that are spontaneously activated without requiring continuous effortful monitoring. In order to facilitate new habit formation psychological research suggests five core principles.

Core Principles

- A clear mental model: **Accurate knowledge** about the virus and about effective protective behavior to contain contagion risks and prevent new contagion waves is essential. This knowledge should be mentally available and organized into a clear **mental model** that can easily be activated. Using telling “visuals” is hence a strongly recommended form of effective knowledge transfer. An estimated 10% of all citizens would be characterized by low “**health literacy**”: they have insufficient access to mainstream communication channels – such as newspapers, television – and/or lack sufficient resources or support to correctly understand and adequately apply health information. New channels and modes of communication will have to be tailored to connect to these segments of society.
- Self-efficacy: Knowledge is a necessary but not a sufficient condition for behavioral change. Citizens may know what is protective (e.g., keeping physical distance) yet lack a sense of effectiveness to act accordingly. If some measures are too demanding, effortful or complex, many citizens may start doubting whether they will be able to maintain protective behavior. Moreover, even though each separate measure may be perceived as feasible, citizens may still doubt their ability to apply the combined measures as they go about their daily lives. Clear instructions, high trust, positive role models, defining feasible subgoals, and giving encouraging feedback are effective ways to increase a sense of self-efficacy.
- Planning: To enable the formation of habitual behavior, in a first stage planned behavior is crucial. When we have a concrete plan, it is more likely that we will do the right thing and persist. **Specific plans** such as ‘when I am about to cross someone on a sidewalk, I cross the street ‘work better than more abstract intentions such as ‘I keep my distance’. Also plans to deal with difficult situations or **conflicting** goals are key (e.g., ‘when I am invited for a BBQ with many friends, I will openly discuss contact restrictions.’). More clear plans make for a stronger chance to act as planned and less self-doubt to persist in difficult situations. Inspiring role models, platforms where ‘good practices’ can be shared, and where different preferences can be expressed, reinforce awareness of the need to plan and effective planning.

- Autonomous motivation: In addition to health knowledge and self-competence, a sense of **ownership** is key to sustain the motivated engagement of citizens in changing their behavior. When people understand the importance and endorse the reasons of the measures, they are autonomously motivated to enact these measures. They show a stronger “**commitment**” so their motivation is more enduring, even when it is hard to resist risky behavior or to keep up civic engagement. The **autonomous motivation** to behave in line with the measures against the virus has been declining gradually since the start of the lockdown: whereas 80% of the participants in repeated corona surveys were autonomously motivated at the start, today this percentage is down to 50%. At the same time, so-called “must”-ivation has been on the rise, which increases the risk of opportunistic behavior and disengagement from the collective cause of keeping the virus at bay. To foster autonomous motivation, it is key to explain the reasons and the principles of protective behavior, to include different segments of society in more participative ways, to showcase diverse practices that are in line with the measures, to recognize barriers and resistance and to show empathy with dissenters, and to create transparency about the conditions to relax or restrict current measures.
- Collective purpose: Humans are social beings: they need to belong to social groups, are sensitive to social affirmation or disapproval, and learn through social modeling. The formation of new habits is thus afforded within social groups and will be greatly facilitated if the **power of the collective** is optimally mobilized. To this end, public communication should highlight the collective purpose of protecting each other against the virus, encourage mutual support and solidarity, recognize connective rituals (such as applauding our health heroes), involve social role models, embedded influencers, and testimonies of their corona experiences, practices and motives or values by citizens from different communities or segments of society. Through positive collective actions or popular media campaigns exemplary adaptive behavior can be effectively modeled and quickly shared at the collective level. When citizens self-identify with a collective purpose, this reinforces collective ownership of the protective measures.
- Nudging: Behavioral change becomes habitual behavior also through contextual props or ‘nudges’ that support adaptive behavior. In case of **nudging** the environment is designed so as to elicit adaptive behavior and discourage risk behavior (e.g., arrows on the floor to indicate direction of circulation in a supermarket). Thanks to nudging adaptive behavior can be activated in the situation without conscious effort from the individual person. Implementation should preferably involve behavioral experts as advisers.