

To combat COVID-19, behavioral pitfalls must be addressed

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During any crisis, timely, and sometimes life-altering, decisions must be made, requiring an extreme amount of sound judgment under uncertainty. The Covid-19 pandemic is no different.

In a commentary piece for *The Lancet*, researchers from Princeton University and the Sunnybrook Research Institute review eight behavioral pitfalls that challenge these judgments. Among the issues they



explore are common human traits: a fear of the unknown, personal embarrassment, and hindsight bias, among others.

The co-authors suggest that awareness of these pitfalls might help to maintain the behavior changes needed to fight the Covid-19 pandemic. They also offer solutions.

"Following the strong initial reactions to such a challenging and difficult time, awareness of judgmental pitfalls might help maintain things on the right path," said Eldar Shafir, Class of 1987 Professor in Behavioral Science and Public Policy at Princeton's Woodrow Wilson School of Public and International Affairs.

Shafir co-authored the piece with Dr. Donald Redelmeier, senior scientist at the Sunnybrook Research Institute.

The eight pitfalls, and solutions, they explore are as follows.

- Fear of the unknown. Threats like Covid-19 are mysterious because they are unknown, but the initial mystery soon fades away. Repeated reminders linked to the situation are important to avoid complacency.
- Personal embarrassment. To reduce the spread of Covid-19, people have been encouraged to engage in certain behaviors, like not touching their faces, but people do so reflexively. Some may see lapses as a personal failure. Opinion leaders can highlight one of many celebrities who have tested positive as a way of mitigating the stigma. Authorities should also counsel that momentary lapses are natural and should be followed by returning to best behaviors.
- Neglect of competing risks. Many are so consumed by Covid-19, they may neglect sleep, exercise, or human companionship.
 Therefore, clinicians should advise their patients to promote



- safety against other harms.
- Invisible diseases. Social distancing and isolation could potentially exacerbate chronic psychiatric disorder. Increased mental health care and communication supportive of a healthy home environment are warranted.
- No clear feedback. Time delays associated with Covid-19—incubation period, intervention, and test results—cause unnerving emotions and feelings. Authorities should urge caution against acting on daily epidemic reports, like momentary declines or sudden increases, because random volatility might be mistaken for a real trend.
- Status quo bias abounds. People want to maintain normalcy during a crisis, but a temporary shaking of the status quo is an opportunity to refocus and look at things anew. Once the initial urgency is diminished, hospitals could reconsider how clinicians adapt to new forms of telemedicine. A more radical suggestion, the co-authors write, is revisiting the broader policy debates on whether nations without universal health care might return to a new normal.
- Ingrained societal norms. Human behavior is shaped by norms like shaking hands, hugging, and other forms of human contact, and these norms are not easy to change. Slogans, images and other reminders could help facilitate the necessary change. Doctors and nurses should model the right behaviors, and can also spread the information, as they are role models to patients.
- Hindsight bias. Once Covid-19 subsides, hindsight bias will lead to castigating medical authorities who might have overreacted or underreacted. The uneven distribution of cases within and between countries will further lead to charges of inequality and injustice. Some of the critiques will be correct and justified, but dynamic and contradictory data might make it difficult to establish exactly what was known at what time, and how differently things could have turned out otherwise. A collective



mentality that we are all in this together may prove difficult but highly useful.

The commentary, "Pitfalls of judgment during the COVID-19 pandemic," will appear online April 23 in *The Lancet*.

Provided by Princeton University

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