Maintaining Lockdown and Preparing an Exit Strategy: A View from Social and Behavioral Sciences

April 16, 2020

On April 14, a group of Belgian social psychologists prepared and presented this memo to the federally appointed committee that is preparing “the gradual exit strategy” from the COVID-19-related lockdown in Belgium. APS Fellow Batja Mesquita, a professor of social psychology at KULeuven, is a signatory of the memo. She shared the memo with APS.

The main challenge that the lockdown and the implementation of an exit strategy pose to our society is the creation and maintenance of a sense of collective identity, connecting and coordinating citizens at the local and the regional or federal level. It is this sense of collective identity that will ensure the continued collective action necessary to keep the virus at bay, while gaining back some normalcy and starting up the economy. To sustain collective action in an effective manner and over a prolonged period, such a collective identity would have to reflect the lived experiences of the pandemic by all citizens and include perspectives from the different local communities and social categories that make up civil society. Social psychological research has extensively studied, through field and laboratory research, which conditions promote and challenge collective identity as well as the possible outcome (i.e., when individuals do and do not come to think, feel, and act as a collective). This research did not concern the specific context of a pandemic but it can definitely inform the current lockdown and exit strategy.

Three key ingredients make collective identity, and by extension collective action, effective and sustainable over a prolonged period:
1. **A common cause**: There must be a conjunction between the self-interest of individual citizens and the common cause of sustaining social cohesion while containing the virus. In the current context, the necessity of this conjunction is crystal-clear: People need to protect themselves to protect others and vice versa. Even so, different stakeholders or communities may perceive specific actions taken as part of the exit strategy to be against their own or group interests. It will be essential to acknowledge different perspectives in order to sustain a broad commitment to the common cause.

2. **A sense of collective efficacy**: People should (a) be clear about the behavioral norms to achieve collective health, (b) perceive that the actions that they collectively undertake do indeed exert the intended effect, and (c) perceive that all citizens will share in the benefits of these collective actions (equity). This means that publicly tracking the results of the measures taken (accountability and transparency) is essential for the motivation of the public to engage in continued collective action.

3. **Collective emotions**: Emotions are an important driver of collective action. In the present case, fear, which increases vigilance, empathy towards victims, caring for each other, hope as well as loss may play this role. These emotions are most likely to be effective to the extent that they are perceived as collectively shared by the community (e.g., through synchronous manifestations of such emotions).

---

**Visit APS’s main COVID-19 page for more psychological science research and Insights.**

To achieve a sense of collective identity, and by extension, collective action, social psychological research yields the following specific recommendations for action (many of which the crisis team followed successfully so far):

1. Promoting identification with the collective by **emphasizing the shared cause** to promote protective behaviors rather than using coercion and control. While police forces need to feel full public support to implement necessary measures, the use of coercion should thus be proportionate and limited.
2. Emphasizing **clear behavioral norms** aimed at preserving collective health, and being clear about how to achieve these norms (e.g., making visible displays of healthy behaviors, etc.).
3. Communicating about **the efficacy of the actions** that have been initiated (positive outcomes, etc.) in order to increase a sense of efficacy. At the same time, providing reliable and realistic information about negative outcomes (from the loss of loved ones or income to logistic problems or failures such as in elderly homes) along with concrete actions to support victims, remedy problems, and prevent failure in the future – with a view to maintaining public trust.
4. **Ensuring that the information and the sources are convincing and believable.** This is the case when (medical) experts publicly endorse the measures taken and decided by politicians. This is critical, should not be taken for granted, and should remain so in the future.
5. **Attuning communication to different groups** in society (youth, elderly, gender, French-/Dutch speaking, migrant minority, etc.) by tailoring media, language, and messaging to particular target audiences, and by including influencers who have an appeal to specific groups in society.
6. Addressing consequences for different segments of the population, and make sure that actions are taken to **address inequality of benefits** (e.g., extend medical care to people in elderly homes).
7. **Creating and encouraging new forms of sociability** aimed at fostering social connectedness and emotional synchrony among people (e.g., promoting social connection and joint celebration at symbolic moments while keeping physical distance; applauding the health personnel, or paying tribute to those who are directly or indirectly facing the illness).

8. **Acknowledging equally legitimate emotions** in the current situation that might not contribute to the desired collective action of distancing (grief about lost ones, loneliness, loss of meaningful activities); for example, by creating collective rituals or activities to give them a place.

The sense of collective identity is also likely to face **multiple challenges**:

1. An emphasis on coercion and control to promote protective behaviors may inadvertently stigmatize those who are ill as being responsible for their plight either because of what they do (as, e.g., the youth afflicted by COVID-19 after the “lockdown parties”), or because of what they are (elderly, obese people, etc.);
2. Such an emphasis on repression will also threaten collective identification; public authorities that consider citizens as unable to understand the situation or unwilling to behave responsibly, risk to come across as paternalistic and provoke distrust and disengagement from the common cause.
3. Individuals experiencing specific constraints (e.g., financial difficulties) or disadvantages (e.g., “at risk” professional groups, cultural minorities, gender and age groups) may come to see their own individual or subgroup interests as conflicting with the common cause. This is likely to make competing interests or factions salient, thus challenging the collective effort.
4. As subgroups of people (e.g. based on professions or age) will progressively “exit” the lockdown, this may create new psychological barriers between social categories. These categorizations may come across as illegitimate and lead people who feel treated unfairly or even excluded, to disengage from collective action.
5. To the extent that public authorities (at the local and especially at the regional and federal level) currently embody and represent the collective, people’s sense of collective identity will be impaired if these authorities come across as lacking in competence or commitment to the common cause.

Inevitably, different groups in society will articulate demands associated with their specific predicament. Many of these demands will involve seeking financial help and this may put authorities in a particularly difficult situation. It is very important to stress the fact that **identification to these groups can be made compatible with a shared commitment to the common cause**. The task of the authorities is thus not to undermine or ignore these different group identities but to ensure that they are viewed as compatible with the common purpose. To achieve this, it is crucial that these different groups have a sense that the authorities acknowledge them and treat them in a fair manner (even if one cannot meet all financial claims). Obviously, if some groups in society feel that the collective does not take their interests to heart, they may disengage from the plight of the wider society. The subversion of groups who feel unfairly treated or excluded is the greatest threat to the more long-term efficacy of the lockdown and exit strategies; much greater than random individuals pursuing their own interests. Subversion may also create a vicious circle in which authorities adopt harsher policies to control “rebels” and thereby foster a sense of illegitimacy (especially on the part of those who “played by the rules”). This can disenfranchise large swaths of the population and set the stage for a resurgence of the epidemic.

As can be seen, the goal should be to ensure that **all strands of the population stay on board**,
collaborating under this collective banner. To this end, the authorities ought to capitalize on the fact that people are rational beings who need to be trusted in seeing the win-win situation of working together. Excluding members of the collective, whether by sanctioning the non-conformers, dehumanizing the ill or the weak, or derogating specific groups in their requests, paves the way for distrust and egoistical reactions, and risks ruining the collective effort. Legitimacy of the public authorities at all levels (with the help of experts) and a sustained sense of belongingness (common fate, common future) among the population are thus the two key factors to success.

Vincent Yzerbyt (Professor of social psychology UCLouvain; contact person for the French-speaking universities)

Karen Phalet (Professor of social psychology, KULeuven; contact person for the Dutch-speaking universities)

On behalf of the following signatories:

Assaad Azzi (Professor of social psychology ULB)

David Bourguignon (Professor of social psychology, UCLouvain)

Annalisa Casini (Professor of social psychology, UCLouvain)

Benoit Dardenne (Professor of social psychology, ULiège)

Ginette Herman (Professor of social psychology, UCLouvain)

Olivier Klein (Professor of social psychology ULB)

Christophe Leys (Professor of social psychology ULB)

Laurent Licata (Professor of social psychology ULB)

Bernard Rimé (Professor of social psychology, UCLouvain)

Claudia Toma (Professor of social psychology ULB)

Karl-Andrew Woltin (Professor of social psychology, UCLouvain)

Vincent Yzerbyt (Professor of social psychology UCLouvain)

Filip Boen (Professor of social psychology, KULeuven)

Jozefien Deleersnyder (Professor of social psychology, KULeuven)

Vera Hoorens (Professor of social psychology, KULeuven)
References:


