COVID-19 and Influencing Behaviours

DAVIS PIER

Introduction

The COVID-19 pandemic has resulted in a pressing need for behaviour change to reduce the risk of spreading this highly infectious disease. To be effective, the vast majority of people must be compliant with public health direction, but what they are being asked to do is very different from what is natural to them.

Behavioural science, which is an area of study that combines knowledge from fields such as psychology, economics, sociology, and neuroscience, can help us understand how to influence behaviour change effectively.

The general premise of behavioural science is that humans do not always make seemingly rational decisions, but our irrational behaviour can be predictable. Our decision making and subsequent behaviour is much more influenced by instinct and automatic reaction than rational analysis. We are influenced by numerous, scientifically proven cognitive biases.

Understanding these biases provides an opportunity to better design policy and interventions to address the current public health crisis.

"Behavioural science presents a number of promising, low cost approaches to help improve the effects of public health measures. We can't underestimate the behavioural barriers to complying with these important rules."
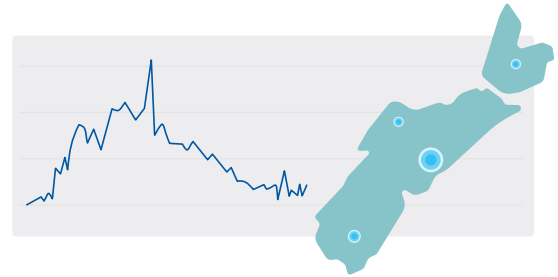
- Mike Davis, Behavioural Scientist and Managing Director, Davis Pier

Behavioural Challenges

COVID-19 is presenting significant behavioural challenges for people. They are being asked to act in a manner that is not natural in order to stay healthy and safe.

Ingrained behaviours, which are very difficult for people to change, are putting the public at risk.

- Physical distancing is unnatural and can be difficult, and mentally taxing, to continually do.

- Our hygiene practices, like hand washing, are a result of years of experience.

- Wearing masks is an odd practice to the majority of us.

Simply providing facts and information is not an effective way to alter people's behaviour.

- People suffer from information overload, leading them to avoid decisions or to errors in judgement.

- We ignore messages we assume to be repetitive.

- Most do not proactively seek out information, so it can be difficult to share important facts

People can easily become complacent and do not continue with important measures

- We act differently when people are not watching or aware of what we're doing.

- People have short memories and are overly optimistic once they see things improving.

- We can be overconfident about our specific situation.

Behavioural Biases

Some of the most common behavioural biases are impacting us all as we navigate our lives within the COVID-19 pandemic.

- **Bounded rationality** – we have finite capacity to think and deal with information.

- **Social norms** – we tend to do things simply because we see many other people doing them.

- **Reciprocity and altruism** – we do nice things for people simply because they did nice things for us, or because it makes us feel good.

- **Recency bias** – we give more weight to information we have more recently learned.

- **Optimism bias and overconfidence** – we overestimate the probability of positive events and our own abilities.

- **Present bias** – we give significant weight to benefits in the immediate term, especially when compared to future trade offs.

Nudges and Choice Architecture

There are many ways to use behavioural biases to our collective benefit, making it easier for people to comply with rules and in a way that is ultimately aligned with how they want to act. A 'nudge' refers to the introduction of a small change in our environment, including things like carefully selected wording in communications, that influence behaviour. 'Choice architecture' involves redesigning a decision-making process, like the layout of an online tool, to make it easier for us to choose a more beneficial path forward. There are numerous tactics that have been proven to be successful.
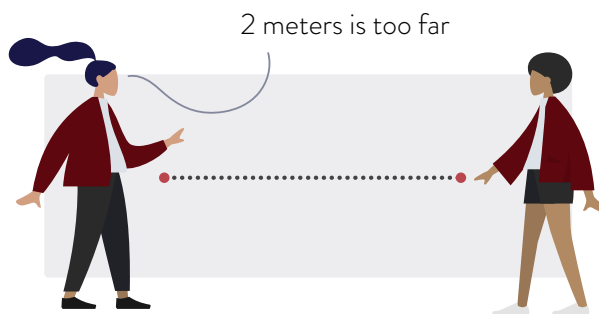
- **Defaults** – many decisions have an option that will be selected without an active choice; this 'default' is very often the decision we make simply because it is the default.

- **Framing** – articulating information as positives vs. negatives, gains vs. losses, and personal vs. generic information can impact our perception and decisions.

- **Salience** – using techniques to bring more attention to key information helps ensure that we don't unconsciously ignore things.

- **Emotions** – how facts 'make us feel' impacts how we act on them; if something makes us feel good, we tend to do it even if it isn't the most rational choice

- **Prompts** – simple, timely reminders tend to be very helpful to guiding behaviour

- **Messenger** – we gave much different weight to information based on who is communicating it

Impact on COVID-19

Recent public health and behavioural science research specific to COVID-19 provides evidence-based direction about the most effective ways to influence decision making regarding key interventions.

Physical Distancing

- Distancing is very unnatural. Create a "new normal" that makes physical distancing the easy and preferred default.

- Press releases or detailed signs on doors are not enough. Reminders of the need for physical distancing should include easy to understand messaging that emphasizes that others are benefiting from your actions.

- Space needs to be redesigned to make it 'cognitively easy' to physically distance. Arrows on floors are easy to ignore. Physical layouts should require physical distancing, making it easy to comply.

2 meters is too far

Isolation and Quarantining

- Messaging that "compliance is the norm" makes people more likely to comply.

- Messaging that emphasizes the health benefits to others also improves compliance.

- Endorse the new norm of staying home when workers feel ill.

- Create awareness of the need to self-isolate in the presence of any (even less common) symptoms of COVID-19.

Wearing Masks

- Whether others around us are wearing masks is the most significant factor determining whether we wear a mask.

- Emphasize that masks are not an alternative to physical distancing.

- Focus efforts on trying to make this the norm going forward (and perhaps go as far as making it a 'default' by requiring people to wear them in environments that will not allow for physical distancing).

I am not used to wearing a mask

Handwashing

- Others are not aware of how much we wash our hands. Using altruistic messaging (e.g. 'protect loved ones') tends to be most effective.

- Convenience and triggers play an important role such as placing hand sanitizers and colourful signage in central locations.

- Prompts and cues are helpful: bright infographics that highlight the most important information (e.g. amount of time to wash) and step-by-step procedures should be displayed prominently.

- Availability of moisturiser to protect hands from increased exposure to soap helps encourage handwashing.

Final Thoughts

COVID-19 is presenting more than only physical health concerns. Decision-makers also need to consider other impacts such as mental health, social wellbeing, and economic factors.

- Decisive actions from policy makers are important in improving mental health. People who deem their governments' measures insufficient are reporting higher levels of worry and depression about the pandemic.

- Transparency and achievable plans are important. Extending the isolation period beyond initial suggestions can demoralise people.

- The socioeconomic impacts of a pandemic response cannot be forgotten. At-risk populations are disproportionately negatively impacted, with the economic slowdown causing greater socioeconomic disparity.

Policy makers and public health officials need to be aware of the evidence and learnings from behavioural science and how it can and should be used to respond to the COVID-19 pandemic. This whitepaper is based on a literature review of numerous peer reviewed articles which is available upon request at solutions@davispier.ca.