Foreword

Social distancing, really? When international organisations and the media initially reported about the spread of a new deadly virus spotted in China, governments took some time to react. As the tsunami of contaminations started to threaten other parts of the world, epidemiologists informed the public that, along with scrupulous hand hygiene, so-called social distancing was the weapon 'par excellence' in order to deal with a pandemic. Many social and behavioural scientists frowned and commented on the lessons of research stressing the critical role of social relations, especially when people face challenging events. As the various contributions in this book make clear, of all terms, 'social distancing' is probably as inappropriate as one can get. To be sure, keeping a distance between individuals and cutting society down into very small groups (families and work teams) that have no physical contact with each other offers an efficient means to slow down the spread of the virus. But from the perspective of social psychology in particular, what is key in times of hardship – and the COVID pandemic surely qualifies as a prime instance of a large-scale disaster – is to work towards more 'social bonding' between people.

By the end of February, the number of cases had increased rapidly in Italy and elsewhere in Europe, and keeping the deadly virus at bay quickly became *the* common cause. Given the dearth of information about the evolution of the illness and its associated symptoms, all citizens were potential victims and the decision of most governments was to ask people to retreat securely into their homes. But how can you shut down thriving societies in an instant? How can you convince thousands of businesses to close? How can you get people not to go to work, children not to see their schoolmates, friends not to organise parties, shoppers not to go to malls, fans not to attend sporting events or music festivals? Would people resist sudden restrictions of their freedom of movement? Would they disregard the recommendations, eventually jeopardising the capacity of the health systems? Although contemporary political gospel has it that individual rationality and self-interest guide human behaviour, the imminence and size of the danger changed things radically. A number of leaders did not take long to understand that the success of a radical lockdown would rest on their ability to create a sense of collective identity, connecting and coordinating citizens under one common banner. Political figures from various strands of the ideological spectrum changed gears entirely and came to realise that only creating shared identity would allow bringing millions of peoples to stay home willingly and to embrace the preventive measures with faith. And it worked …

Over the course of the last couple of months and in every single aspect of the fight against the pandemic, it has become clear that one should approach the issue in ways that stress the social over the individual, reinforce the sense of belonging as opposed to a feeling of independence, and acknowledge common identity in contrast to uniqueness. To be sure, it is individuals who carry the disease, contaminate others, and, in some cases, die. It is individuals who buy an excess of toilet paper, who prove reluctant to wear a mask because they fear ridicule or neglect to wash their hands for the twentieth time upon entering their workplace. And it is also individuals who stay inside in spite of the sunny weather, who work remotely and endure the burden of schooling their children, who run to the supermarket for their elderly neighbour on the second floor. But what needs to be understood is that all these behaviours follow from perceptions, emotions, and decisions eminently shaped by social forces. More often than not, people self-define in terms of significant memberships, and all the more so when they feel uncertain. Behaviours are not the product of isolated souls, but emerge in a socially meaningful context, a context in which people make up their minds and undergo emotional experiences as part of larger entities.

The impressive number of research efforts assembled in the present contribution and generally stimulated by the so-called social identity approach makes one thing very clear: nurturing the social in people's minds is not the problem but it is the solution. By capitalising on appropriate social identities, often at the national level, group leaders can work and make people become more sensitive to specific messages. This is because the persuasiveness of a communication rests on the extent to which the audience sees the source as 'one of us'. By ensuring that people continue to feel connected with fellow members of significant social entities, one can avoid the perils of social isolation and lack of social support, two prime causes of deteriorating health and premature death. It is thus crucial that citizens are provided with opportunities to feel emotional support. This can take the form of close relatives talking over the phone or organising drinks over social media, of heretofore-unknown neighbours dropping a warm note under the door. People also need to feel 'in touch', as when they see others applaud on their balcony to celebrate the dedication of nurses and doctors working in intensive care units. By promoting selected ways of delineating the social landscape, it is possible to create a sense of collective identity that then feeds into collective action. Indeed, in so many ways, fighting COVID-19 becomes a prototypical form of collective action. And research shows that successful collective action rests on the definition of a clearly defined common cause, hangs on a sense of collective efficacy, and capitalises on the energy flowing from collective emotions.

This means that, more than ever, the current events require so-called 'entrepreneurs of identity'. There is a need for people who emphasise the shared cause while acknowledging different perspectives in order to keep everybody aboard. There is a need for people who communicate clearly about those behaviours that ought to become the norm, who are credible as they convey their trust in the population's ability to comply, and who are transparent about progress but also setbacks. There is a need for people who make room for emotional experiences, signifying that, while fear is understandable and may even help increase vigilance, empathy and hope are key to getting us all through. Finally, by attuning communication to different groups in society, and even more so by addressing the specific consequences of the pandemic for different portions of the population, one should be able to prevent the dislocation of the collective.

The message is clear: social distancing is a real misnomer. While physical distance undoubtedly contributes to preventing contamination, this book provides ample evidence that the vital feature of any successful action against the virus is to capitalise on shared identity and group-based emotions, in short, on a common definition of 'who we are'. Only by embracing such a perspective can one hope to minimise the subjective costs of individual sacrifices and promote the aspiration for collective dividends that will eventually benefit all parties involved. In sum, the key to addressing large-scale crises such as the outbreak of COVID-19 resides in our ability to stay away from individualistic interpretations of the events and to acknowledge the fact that what truly defines human beings is their inherent disposition for social bonding.

These are the various messages that this book communicates and consolidates. And this is why, in this most challenging of times, this book is so important.

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