

The Consequences of Conspiracy Theories in the Era of COVID-19

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ABSTRACT

The COVID-19 pandemic has overtaken the lives of millions around the world. While this has helped the virtual technology make advances, it has restricted social beings to their households for over a year. It is only natural to want a change from the boring view of the house and the Olympics being conducted itself is one of the global feats that showcase the resilience of people to strive forward without letting the virus command their lives. With frustration predominating the powerful emotions, people are slowly beginning to resign to the acceptance of the dangers of the deadly virus with its constantly evolving nature. The latest delta variant is the most dangerous one so far. Despite the extensive research being carried out by various diligent scientists, the ultimate cure has yet to be found. Until then, our best hope is the vaccination and following the guidelines of social distancing and protection with masks. These are simple, common-sense rules that need the least amount of instruction yet people seem to find it hard to adhere to these new norms. There is increasing hesitancy and fear due to lack of research but if people can be brave enough to weather the perils of the virus at a universal scale, they should be able to brave the tiny prick as well.

Keywords: Coronavirus disease-19 infection, Conspirator theories, Vaccination

Coronavirus Disease (COVID) has affected the civilian lives for over a year now and most of us have accustomed ourselves to our work-from-home routines, bathroom schedules of our family members and television programs to suit our work patterns. Not to mention, our culinary skills have also improved along with our interpersonal relationships (mostly). If one has experienced any of the aforementioned changes in daily routine, the pandemic deserves part of the credit or the blame, depending on the perspective and consequences of the changes. Year 2020 has indeed been a testing year and fiction writers are now speculating what to call it. 'The Lost Year' is a term that has been suggested by Green [1]. 'The Lost Year' could be right and catch on but the dangers of COVID-19 still persist. It begs the question -could the pandemic be confined to just the year or is 'Lost Years' a term our future holds? The COVID-19 pandemic is not the worst pandemic to hit our world but that doesn't mean that it fares any better at preserving humanity [2]. The global statistics reveal that the death claim of COVID-19 is over two million and the cases are still on rise. The current case count is over a hundred and twenty eight million [3,4]. In India, a surge in cases has been observed in the last few weeks. On 7th May 2021, over four lacs fourteen thousand new cases were recorded resulting in the largest spike since last October [5].

Coronavirus Disease-19 is an air-borne virus that affects the respiratory system leading to Severe Acute Respiratory Syndrome (SARS). There have been previous outbreaks of the Coronavirus-SARS in 2002 and Middle East Respiratory Syndrome (MERS) in 2012. These epidemics were not as widespread because of immediate action and effective containment [2]. COVID-19, it has been found to have higher transmission rates and according to Fauci AS et al., the efficiency of transmission has important implications on the containment of the disease [6]. This is precisely why strategies like social distancing, telecommunicating and isolation have been put into effect. Strategies that seem logical and proven but people are now beginning to tire of these restrictions. Lasting health behaviour changes are extremely challenging [7]. Health behaviours like exercising are hard to start and even harder to maintain, so it would seem logical that even a simple yet crucial behaviour like wearing a mask would eventually get tiresome. Repeating the behaviour to make it a habit could help people adhere to the new norms. And if behavioural school of thought were to be consulted, a reward for the good behaviour could be another alternative to help ensure that

people respect the rules. But incentivising each and every single person? It would probably drain the country's resources.

Pharmaceutical companies have been hard at work since the spread of the pandemic to come up with a vaccine to combat the disease. As of 18th February 2021, there are atleast seven vaccines that have been approved and released. According to Zimmer C et al., writing for New York Times, researchers are currently testing 82 vaccines in clinical trials on humans of which 23 have reached the final stages of testing [8]. There are atleast 77 pre-clinical vaccines under investigation in animals. Over 500 million people have been administered the vaccine all over the world. In India, the count has crossed 60 million [9]. A vaccine is being considered as the game-changer for the status of the disease [10]. But then, why are cases still on the rise? Why is the situation not getting any better?

There could be more than one reason; unemployment may be the most important reason. Kenya saw a rapid rise in the statistics of COVID-19 since last January - with the rise in infection rate that is ten times what it was and hospital admissions being up by 50% in the last two weeks of March 2021. But a reporter from British Broadcasting Corporation (BBC) found that the local markets in Kibera, the largest slum division of Nairobi, were still open for business and the people were carrying on like everything was normal because, according to the reporter earning a living takes the priority than being threatened by the virus [11]. The same is the case in India, along with other reasons. Another reporter, Rajini Vaidyanathan, found that although the vaccine roll-out has been steady, the uptake was not the same. Reporter thinks the cause for the lack of uptake is complacency-people think that due the declining death rates the threat from the virus has reduced [12]. People were not engaging in social distancing and freely mingling without their face masks on. There is also a growing vaccine hesitancy amongst the people. Despite launching the vaccination drive with the aim to vaccinate 300 million people in the first phase, the hesitancy to take the vaccine has grown recently. This hesitancy can be attributed to the lower rates of infection, the unprecedented side effects of the vaccine and also the production capacity of the vaccine in India [13]. But this behaviour only serves to damage further the efforts to fight the disease. The rates are on the rise once more thus prolonging this pandemic. Could there be other reasons? Are there other larger factors at play?

Everyone has heard of the 'Earth is Flat vs. Round' argument. Why is it still an argument when there are definitive images and eons of proof refuting the claim of a flat earth? Conspiracy theories have a way of staying put. Dr. Karen Douglas, a social psychologist and an expert in the field of conspiracy theories, says that conspiracy theories are motivated by the need for knowledge, security and society. She calls it epistemic, existential and social need. In epistemic need, people tend to want to know. They want to know the truth. They need to fill the gap in their knowledge and with vagrant information available, they do indulge in filling that gap with that information. They simply fail to realise that they are looking for information in the wrong places. Existential need is more of a need for safety. People want to keep themselves safe so they gather all available information to make sure that they have the upper hand and are in control of the situation. The social need is when people want to have that little extra piece of information to rise above their peers, to feel a little extra special to have a feeling of superiority over others. It makes them feel good about themselves. Ultimately, believing in a conspiracy theory gives people a sense of uniqueness, a way to stand out. And if this happens in a group context, it gives the whole group the idea that they are right and everyone who is against their beliefs is wrong or evil [14].

One could agree with Stein RA et al., that conspiracy theories surrounding the COVID-19 vaccine are only detrimental to the containment of the virus [15]. Some conspiracy theories are so fictional that they claim the spread of the virus through electromagnetic waves (5G), non existence of the virus in the first place or that it was secretly developed as a bioweapon or that it was purposely released into the environment as part of a grander scheme and then there is of course, Bill Gates to blame. Added to these is the misinformation about the vaccine, that a volunteer for the first UK trial died of the complications; that the vaccine is somehow a tracker to establish a global surveillance network and the vaccine should be avoided at all costs. Misinformation spreads faster and lasts longer and this only poses an added threat to the war against the pandemic. Bierwaczonok K et al., conducted a study at the peak of the pandemic last year in August 2020 and learnt that even if the belief in conspiracy theories did lessen with time, they do pose a significant threat to the population at large as adherence to protocols like social distancing reduce, thereby increasing the chances of getting infected [16].

Dr. Dolores Albarracín studied how people respond to misinformation. Her study on 'debunking' - changing people's minds after they have been presented with fake information - revealed that misinformation was as sticky as super glue. To overcome these hard-set ideas, she says, brief description of the misinformation and then presenting the correction could be the solution. There has to be an explanation of why the information was wrong in the first place. She also advocates using the behavioural approach for the lay person. Just like if someone starting a new diet avoids junk food from establishments like McDonald's, people should avoid reading news from social media like Facebook. She advises reading news from relevant and reputable sources [17].

Other ways to debunk conspiracies, according to Dr. Douglas, are using facts. But this tact is most useful only if the facts are presented prior to exposure to conspiracy theory. In this way, the conspiracy theory loses traction. Giving people facts post exposure is not as effective. Another way to tackle the misinformation is presenting people with a forewarning that they might be presented with fake news and for misinformation that is already out there, strong counter arguments could help the debunking process. It is also vital to aid people with ways to be critical in analysing the information they have been presented with [18].

All of these conspiracies and misinformation also cause people to have vaccine hesitancy, a state that was aforementioned. Vaccine hesitancy, which is rather self explanatory, is the hesitancy to take the vaccine. It has the potential to lead to a more dangerous outcome

of being anti-vax. Anti-vax is being vehemently against taking the vaccine. The Anti-vax movement mostly in force in US, UK, Australia and Canada [19], has been likened to religious movements like cults [20]. Cults are groups that have strong and rigid beliefs that are mostly unacceptable to the society. Just as cults have the reputations of being sinister and unreasonable, anti-vaxers have the same reputation in the academic circles. Giving cults a negative label only promotes them to develop the 'us vs. them' dynamic, which further creates martyrs, radicalisation and polarisation. If we apply the same consequences to the anti-vax movement, it could only result in increased anti-vax activities. Mylan S and Hardman C, thus suggest a more inclusive approach towards the anti-vaxers with inquisitive dialogue and contextual understanding [20].

Dr. Gretchen Chapman is a cognitive psychologist who studies how people make health decisions, including whether or not to get vaccinated. According to the research, it was found that there are three ways to get people vaccinated- providing information (changing their thoughts and beliefs), comparing their behaviour to others (pro-social approach) and intervening their behaviour, out of which the third technique was most successful. Intervening their behaviour would mean not attempting to change the behaviour but enforcing desired behaviour. Her example is as follows, at a doctor's appointment, the doctor could tell the patient they are due for the vaccine and it could be administered after the checkup. Presumptive doctor recommendation, she says, is the most effective approach to get a person vaccinated [7]. In addition to the grave fact that people of different communities harbour different feelings towards taking the vaccine, oppressed communities and minorities have displayed suspicion and hesitancy due to past experiences [18]. The rush in the development of the vaccine manufacture and delivery along with the limited knowledge about the consequences are the other reasons that cause suspicion. Effective open and honest communication by the health officials is the ultimate necessity as every bit of information impacts people's behaviour [7].

This 2020 might be the 'Lost Year' but it has been a year that has been rather educational. Scientists have learned and are still learning how to tackle the deadly virus -the pharmaceutical company 'Pfizer', as of 1st April, came out with the most efficacious vaccine thus far that promises protection of upto six months [21]. Politicians have still to learn, but that is a personal view. Governments all across the world need to learn to have more effective, well-grounded and thorough strategies in place to cope with calamities of such devastating reverberations. We need to be collective in our approach as a community by following mandated guidelines for the safety of others, and ourselves so that we can help manage the anomalous consequences of this disease. COVID-19 is called novel coronavirus for a reason. It is a new strain and the researchers are still learning about it and only patience and perseverance could get us through promptly and safely and help us confine COVID-19 as soon as possible to limit the lost years.

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