

Introduction to the Special Issue of Social Representations of Covid-19: Rethinking the Pandemic's Reality and Social Representations

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This special issue of PSR focuses on the social representations of SARS or Covid-19. The first study by Pizarro and colleagues analyzes the prevalence of social representations about the Covid-19 pandemic in 17 countries in the Americas, Europe and Asia, their association with perceived risk and their anchoring in sociopolitical beliefs, such as RWA and SDO. The second and third articles comment on the social communication processes around Covid-19 in Brazil and France (Apostolidis, Santos, & Kalampalikis, this issue; Justo, Bousfield, Giacomozzi, & Camargo, this issue), the fourth in Italy and a last one in South Africa (de Rosa & Mannarini, this issue; Sitto & Lubinga, this issue). Three studies (fifth, sixth and seventh) examines the structure of social representations related to Covid-19 using questionnaires, the free-association technique and inductive terms like Coronavirus (Colì, Norcia & Bruzzone, this issue; Fasanelli, Piscitelli & Galli, this issue) and the new normality (Emiliani et al., this issue), analyzed by different techniques like automatic lexical analysis (*IRaMuTeQ*). Finally, Denise Jodelet makes a final comment and closes this issue with a

reflection on Covid-19 “a separate epidemic”. In this introduction, rather than summarizing the articles, we will develop the themes and the questions they raise.

Keywords: social representations, covid-19; anchorage, propaganda, conspiracy, cognitive polyphasia

SOCIOGENESIS OF SR AND STAGES OF SYMBOLIC COLLECTIVE COPING: AWARENESS, DIFFUSION AND HEGEMONIC SR

A first theme common to all the articles is the sociogenesis of the beliefs around Covid-19. Social representations arise when society deals with a new phenomenon, such as the Coronavirus pandemic, and are a sort of collective coping strategy through which the new and unpredictable reality is understood and framed (Vala & Castro, 2017). Novelty, relevance, threat and unfamiliarity are supposed to be antecedents to emergence of social representations (SR) (but see de Graft, 2012, for a critical view in the role of unfamiliarity).

Some authors refer to the symbolic coping model of the scenario (Wagner, 1988; Wagner & Kronberger, 2001; Wagner, Kronberger & Seifert, 2002). In the first stage of awareness the pandemic emerged as a public concern, preventive discourses prevail, legitimated by World Health Organization (WHO) and scientists. In this stage the prevalent mode of communication is diffusion and hegemonic social representations emerge. Diffusion favors the unconscious imitation of what others do or think. It amplifies the pressure to conform, creating a collective ethos of social rejection of anyone who behaves or thinks differently. In this way, a majority opinion is created that reduces uncertainty, provides a solution to a problem, and strengthens social cohesion and collective solidarity. In the first moments of the pandemic, this type of communication predominated: unanimity among political parties, social agents, generalized absence of criticism, etc. When the aim is to reach the entire population, this level of inclusiveness between the transmitter and the public is indispensable (Páez & Pérez, 2019). Hegemonic representations explain the epidemic based on unquestioned and shared beliefs - the WHO discourse that Covid-19 is a dangerous viral infectious disease. A SR of Covid-19 as a viral disease was dominant in 17 nations (Pizarro et al., this issue). An independent study carried out in Brazil confirms, through the free association of ideas to Covid-19 stimulus, analyzed by the Alceste method, that a hegemonic SR emerges at the beginning of pandemic. A lexical class, unrelated to social variables, defines - SARS-CoV-2 as a virus

of rapid spread worldwide (pandemic), with symptoms and mode of transmission characteristic of influenza, causing a disease in the lungs, which can evolve, mainly in elderly people, to a picture of respiratory difficulty, needing the help of respirators for treatment and leading to death (do Bú et al., 2020).

DIVERGENCE STAGE, PROPAGATION AND EMERGENT REPRESENTATION: COVID-19 AS AN ECOLOGICAL PROBLEM

In the second stage, of divergence, multiple discourses emerged, both within scientists and politicians, and between lay persons and experts, increasing the uncertainty about the pandemic. Propagation is a communication that seeks to increase individual's participation in the beliefs of an already constituted group, of which he or she is a member, and that adjusts new events to the group's ideology. The content of the message is not adapted here to the receiver as in the case of diffusion but to the ideology of the group. The information is not of interest in itself, but insofar as it is relevant to the strengthening of the militancy of its members. The information is rewritten in form and content according to the style and language of the group, so that it can be assimilated by the members of the group. As the two main vectors of the pandemic and confinement that we are experiencing are fear of the disease and of its socio-economic consequences, it is already beginning to be observed that this communication strategy applies to these dimensions. Conservative newspapers describe political conflict and doubts about government action, while liberal newspapers insist on how ¹ the government handles health issues and social problems. Emancipated social representations coexist in common sense. For example, Covid-19 as a serious epidemic associated with modernization and socio-ecological crisis was a representation shared by a half of the people surveyed in 17 nations (Pizarro et al., this issue).

¹ A study illustrates communication by propagation. Twitter updates of two Spanish newspapers' accounts during the pandemic were analyzed. Throughout an automatic process of topic modeling and network analysis methods, this study identifies eight news frames for the pre-crisis period, the lockdown period and the recovery period. The center-left media *El País* (EP) focused on family life and living issues the most, while the center-right media *El Mundo* (EM) focused on the Spanish capital news – focusing on the political conflict between the conservative major and center left government. EP focused the most on public health professionals and real-time alarming information during the first two periods. Center right media EM coverage on Twitter focused on the state of alarm and confinement related information (Yu, Lu & Muñoz-Justicia, 2020).

DIVERGENCE STAGE, PROPAGANDA, POLARIZATION AND POLEMIC REPRESENTATION: COVID AS A HEALTH, ECONOMIC AND SOCIAL THREAT

Polemic SR of Covid-19 as mainly a health threat versus an economic threat, were developed during this period. Polemic SRs are those generated in a context of social conflict, controversy, and which society does not share homogeneously (Moscovici, 2000). The communication system whose aim is to create or maintain social differences is the essence of propaganda. Its main characteristic is to accentuate conflictive social differences between groups, parties, communities, countries, religions, etc. For this purpose, a Manichean representation of the groups applies (see below Self/Other thema): the good one (mine) and the bad one (the other). Information is controlled and even contaminated to maintain disinformation, which is a key factor in making propaganda effective and serving as a call to action — such as the discourses “the WHO is a pro-China organization and its opinions are anti-USA”. Propaganda is often associated to polemical representations. Two examples of polemical representations relate to the view of minimization and the emphasis on economic representation versus representation of the virus as a serious health pandemic requiring a preventive effort.

Representation of Covid-19 as an ‘economic crisis’ considers the disease as a threat to the country's economy, emphasizing the increase unemployment and the slow process of economic recovery. This view also considers the pandemic information as being manipulated by the media, and states that there is an exaggeration in the size of the disease, in an attempt by the media to cause panic among-people, minimizing Covid-19 as a "small flu". Opinion leaders such as Trump, Bolsonaro, Lopez Obrador and others, emphasized the economic threat posed by Covid-19, downplaying its threat to health (McKee et al., 2020). This representation opposes the representation of Covid-19 as a serious health crisis. This last one questions the other of hiding the precarious working conditions for health and benefiting employers. The representation of Covid-19 as a ‘health crisis’ takes into account the information that the health system will be overwhelmed due to the demand resulting from a large number of upcoming hospitalizations, and defends the need to maintain social distance, according to the guidelines of WHO. Scientists then defend containment, the use of masks and physical distance as preventive measures against Covid-19 (Páez & Pérez, 2020).

Justo et al. (this issue) describes the polarization process associated to this type of polemic representations and the mode of communication propaganda. Polarization in

discussion of political measures (such as quarantine and social distancing) taken by the government (and others like governors in Brazil, USA) was a common relevant theme in analysis of newspapers and social media contents in Argentina, Brazil and USA. This polarization appears in the existence of two topics on the news discourse or cluster of attitudes in surveys, which generally capture two opposing political position, like conservatism versus “liberalism” (pro-Trump versus anti-Trump) in USA, pro- and anti-Bolsonarism in Brazil, pro- and anti- Peronism in Argentina, left- and right- wing in Spain (Calvillo et al., 2020, Justo et al., this issue, Rosati et al., 2020). A survey conducted in August 2020 confirms that the pandemic has had a polarizing or divisive effect on a sense of national unity in many of the countries: a median 48% think that divisions have increased, while 46% feel more national unity now than before the coronavirus outbreak – confirming a cohesive effect (Devlin & Connaughton, 2020).

Regarding the content of these polemic SR’s, international surveys show that people perceive Covid-19, first as an economic threat, second as a threat to social order and third as a threat to health (Bouchat, Metzler, & Rimé, 2020; Nisa et al., 2020). However, contrary to the discourse of these opinion leaders who propose giving priority to the economic over health, the results do not corroborate the view that people engage in health versus economy zero-sum thinking in the fight against Covid-19. (Nisa et al., 2020). Moreover, perceived economic risk predicted preventive health behaviors and support for strict containment policies, while perceived health risk had less influence. While the economic and health threat reinforces preventive behavior, the perceived threat to social order was negatively related to compliance with preventive behavior (Kachanoff et al., 2020)

CONVERGENCE AND NORMALIZATION STAGES

Convergence refers to the fact that a group converges in the interpretation of a social object, it can take the form of interrelated metaphors, images or beliefs that converge with the social interpretation of the majority. In the last stage, normalization, the explanation of the event is integrated into common knowledge, becoming less emotional, more mundane and based on hegemonic scientific representations. As time passes with the management of the COVID-19 crisis, society will take measures to face the challenge to its lifestyle and successfully cope with the stressful event. Flecha-Ortiz et al. (2020), in a partial cross-sectional examination of the stage model, confirm that the elements of exposure to the social and mass media were related to vigilance or awareness and,

simultaneously, reinforced the attention to humorous media messages to deal with the stressful situation, conceived as an indicator of the stage of divergence. Both these elements were also related to statements interpreting the problem of the Covid-19 crisis in the messages adopted by most users - conceived as indicator of the convergence stage. Finally, these previous items were also related to the low prevalence of memes used to cope with the stressful emotional experiences of the Covid-19 crisis - these items are supposed to represent the normalization stage.

Some complementary comments are necessary. First, convergence and normalization phases are ahead of us - in 2022-2023 – if we are optimistic. Second, some studies of recent infectious epidemics have not found all phases (Idoiaga, 2012; Idoiaga, Gil & Valencia, 2018). Third, as in all phase models, phases often do not occur sequentially in reality, there are phenomena of regressions and leaps - see classical analysis of mourning phase models (Bonano & Boerner, 2007). Finally, the normalization phase may actually culminate in the forgetting and denial of the pandemic. Studies on collective memory systematically have found that most people mention World War II as a major historical event, followed by World War I, but do not mention 1918 “Spanish flu” pandemic². The former killed about 70-80 million people (3% world population), the latter 18-22 million (around 1.5% world population). But the influenza pandemic of 1918-1920 (“Spanish flu”), which killed at least 50 million (3% and possibly as high as 100 million 6% world population) and sickened about 500 million people, or about one-third of the world's population, is rarely mentioned as an historical event (Honigsbaum, 2014; Lima & Sobral, 2020; Pennebaker et al., 2006; Liu et al., 2009). As a newspaper state in an article about the cultural forgetting of 1918 “Spanish flu”: The 1918 flu faded in our collective memory: We might 'forget' the coronavirus, too (International New York Time, 2020).³

² However, it is important to remark that most of the estimations of casualties suffered during the WWI do not count the huge casualties among the African civilians forcedly recruited as porters (Strachan, 2004). Studies about collective memory in Africa gave significantly prominence to health issues (contrasting to other regions of the world like America, Asia and Europe), for example, participants made references to a “cure for AIDS” and other diseases (Cabecinhas et al., 2011).

³ This lack of normalization is obviously only a possibility in the case of Covid-19. The oblivion in the collective memory of the 1918 pandemic (it is not mentioned in encyclopedias, there are no works of art or monuments that remember it) has been explained by the fact that World War I overshadowed the disease. In addition, because it was a huge failure of modern medicine - usually defeats are not remembered. Scientists at the time did not even know that a virus, not a bacterium, caused the flu. Finally, invisible enemy such as the 1918 flu made little narrative sense. It had no clear origin, killed otherwise healthy people in multiple waves and slinked away without being understood (Honigsbaum, 2014; Lima & Sobral, 2020, see also Wertsch in International New York Time, 2020).

ANCHORING AS A PRIOR FACET TO OBJECTIFICATION

Most studies discuss anchoring and objectification. The process of objectification refers to the schematization and materialization of beliefs. It has been argued theoretically and empirically that anchoring acts prior to the process of objectification (Wagner & Hayes, 2005). Anchoring for authors such as Wagner and colleagues (2002) is the first phase of a response to a new object that challenges the group's worldview. Once this object (a disease like Covid-19) has been assimilated into the cultural framework, the "new" has been transformed into something familiar, a process of simplification, concretion and creation of a core of basic images and ideas continues - that is, objectification. Wagner and his collaborators support their "phased" model in a systematic study. These concepts are linked to equilibration of cognitive structures of assimilation [anchoring] and accommodation [objectivation] studied by Piaget (1975/1985). The former occurs when we modify or change the new information to integrate it into our previous schemes. We maintain new information or experiences in addition to what already exists in our mind. Accommodation is when we restructure or modify what we already know so that the new information is better integrated (Duveen, 2013; Jodelet, 1986; 2011).

However, other authors do not share this idea of a "natural history" of the creation and development of social representations. For example, the statement "objectification moves science into the domain of being, anchoring it in the domain of doing", suggests processes parallel with complementary functions (Gaymard, 2020). Finally, in the approach of Doise, Spini and Clémence (1999), anchoring refers to the way a set of beliefs structures SR on a social, ideological or psychological basis (Scheidegger & Tischer, 2010). As an example of this conception of anchoring, we can mention the social representations of Covid-19 as a "Chinese" disease resulting from the consumption of bats, or of Covid-19 as a biological weapon of the great powers, which are anchored in anxiety about the disease and in the authoritarian beliefs of right-wing authoritarianism (RWA) and of social dominance orientation (SDO), as shown in the study by Pizarro et al. (this issue). These SR's are also anchored on Self/Other thema (Marková, 2015; Moloney, Williams & Blair, 2012; Moloney et al., 2015).

ANCHORING, THEMATA AND SR: SELF/OTHER OR EXCLUSIVE AND INCLUSIVE COLLECTIVE IDENTITY IN COVID-19 SR'S

Another aspect raised by Pizarro et al. (this issue) is that two interdependent opposites Self/Other thema (Marková, 2015; Smith, O'Connor & Joffe, 2015) gives rise to an externalizing social representation (see also de Rosa & Mannarini, this issue). However, this externalizing SR has maybe a limited life span in the case of a global pandemic. Moreover, Self/Other thema can give rise both to othering and to otherness (de Rosa & Mannarini, this issue). As these authors argue, Covid-19 increased awareness of human vulnerability on a global scale, engendering concurrent representations of "otherness", which refer to humankind as the common in-group. This process - as opposed to the "othering" occurring in the projection of the disease cause onto devalued outgroups - implies the assumption that the "other may be me/us". It is true that theoretical frameworks like behavioral immune system theory (Taylor, 2019; Thornhill & Fincher, 2014) and the terror management theory (Karkowski et al., 2020) suggest that Covid-19's threat would lead to attitudes that are more exclusionary. The threat to life, the fear of death and the salience of mortality seem to be particularly appropriate for reinforcing conservatism. However, mortality salience is supposed to reinforce hegemonic cultural values (e.g., democratic values) and not just conservative values. Burke, Kosloff and Landau's (2013) meta-analysis supports this hypothesis of defending a worldview with an effect size larger than the conservative shift effect – effect of reinforcing the preexisting worldview $r = .35$ versus shift toward conservatism $r = .22$. Mortality salience is capable of motivating authoritarian or liberal change if conservative or progressive norms and values are salient—or meet the needs of the individual's 'worldview'. For instance, a study showed that Swiss liberals did not significantly increase their conservative opinions—and, in fact, showed a tendency towards becoming more liberal—after the actual death of a close relative (Chatard, Arndt, & Pyszczynski, 2010). The perceived threat to life by Covid-19 reinforces rightist agreement with the authoritarian measures, but also leftist support for the values of solidarity (Bouchat et al., 2020). On the other hand, as proposed by the model of common in-group social identity the pandemic would promote inclusionary attitudes by creating a common in-group in the face of a global threat (Adam-Troian, & Cigdem Bagci, 2020). In a study from Turkey, the threat of Covid-19 was directly associated with more positive attitudes towards Syrians immigrants. Threat has also an indirect effect, both positive (through a sense of common identity) and negative (through perceptions of immigrant threat) on attitudes towards immigrants. A narrative review concludes that psychosocial responses of the general population to previous outbreaks of infection (SARS epidemic, Ebola epidemic

and H1N1 outbreak) included anxiety/fears, depression, anger, guilt, grief and loss and stigmatization, but also a greater sense of empowerment and compassion towards others. This shows that exclusion and stigmatization are not the only responses triggered by an epidemic, but inclusion and solidarity can also occur (Chew et al., 2020; Taylor, 2019).

ANCHORING, THEMATA AND SR: DANGEROUS VERSUS GENERATIVE MASSES OR LEBON VERSUS DURKHEIM IN COVID19 SR'S

Another thema that appears in Pizarro and colleagues' study (this issue) is related to two opposite visions of collective behavior: dangerous masses versus creative masses. Two discourses on the role of crowds, masses and collective behavior in catastrophes and social dynamics are opposed. The first, shared by authors like LeBon, Tarde and Freud, states a negative representation of crowds and the masses: people in crowds have less self-control, are more emotional, unpredictable, volatile, suggestible and tend to be violent, destructive, and/or antisocial (Moscovici, 1981; McPhail, 1997; Neville & Reicher, 2020). Some of these ideas, like suggestibility and spontaneity, are endorsed in current sociology, while others, such as the intense emotionality and unanimity, are largely rejected in current social sciences texts (Schweingruber & Wholstein, 2005). However, this view is partly reproduced by modern social psychological studies on deindividuation, diffusion of responsibility, group decision (risky shift, polarization and groupthink) and studies of conformity and obedience (Moscovici, 1981). In the critical phases of pandemics, it is suggested that there is panic and a lack of collective control. The selfish and irrational behavior of many people is criticized (e.g., panic buying and later shortages of toilet paper – which in fact occurred). These LeBonian social representations of the masses legitimizes social control and the need for authoritarian government intervention (Páez & Pérez, 2020; Sabucedo, Alzate, & Hur, 2020) and it is also shared by the institutions of social control like the army and police (Bendersky, 2007). Showing the dominance of this discourse, the SR of masses as villains or the view that people act selfishly and irrationally, was shared by two-thirds of the respondents in 17 nations (Pizarro et al., this issue).

A second discourse, based on Durkheim (1912/2001), conceived the masses and the collective gatherings as moments of creativity, enhancing wellbeing, social cohesion and moralization, in renewed agreement with values and ideal social beliefs (Moscovici, 1988; Drury, 2020). This Durkheimian image legitimizes collective encounters as a place where the social is recreated, values are reasserted and social cohesion is recreated (for

evidence supporting this view see Páez et al., 2015). There is also a discourse of collective resilience, with emphasis on prosocial behavior, the absence of panic and selfishness, and the emphasis on solidarity and self-control. Systematic studies on responses to crises, emergencies, and disasters show how people act in a controlled manner, helping and supporting each other, even at considerable risk to themselves, and this mutual aid even extends to strangers. Underlying this is a sense of shared identity that arises from a common fate and that results in empathy and solidarity for one's fellows. In short, hard times can create social cohesion and invoke widespread compassion (Drury, 2014; Reicher & Scott, 2020). Half of the respondents in 17 nations (Pizarro et al., this issue), shared this representation of collective resilience. In this vein, the articles describe remote collective rituals at distance, like "rounds of applause" as an homage and as a sign of appreciation for healthcare professionals working on the frontlines of the fight against the epidemic. However, this heroic and honeymoon phase of intense social sharing, solidarity and prosocial behavior generally lasts about a month and then diminishes- according to several studies on the evolution of the reaction to natural disasters and collective traumas (Rimé, 2020). Collective rituals fade away – and social distancing impedes many normal collective gatherings and ceremonies, probably eroding social cohesion.

High SDO and right-wing authoritarianism predicts agreement with the selfish and irrational representation of the masses. Authoritarian and hierarchical people tend to perceive that the pandemic generates irrational and non-solidarity responses in people: they share a LeBonian representation of dangerous masses. RWA was also negatively associated with the representation of collective resilience. People who are egalitarian and reject conservative traditionalism share more of a Durkheimian representation: the masses are supportive and do not act selfishly or irrationally.

SOCIAL REPRESENTATIONS, THREAT, ANXIETY REDUCTION, CONTROL AND HEALTH BEHAVIOR

Social representations are supposed to be functional and serve to assist the group in dealing with the threat. The functions include reducing the sense of threat, anxiety and preserving the positive identity of the national society or in-groups (Jodelet, 1986; 2011). It is assumed that the process of anchoring reduces the perception of the severity of the new disease. For example: "flu-like"; "cousin of the common cold" and so on. In the early stages of Covid-19, its similarity to the annual flu cycle was also considered, making it less dramatic. Nevertheless, the fact that the anchor serves to reassure is a hypothesis that

has not been confirmed in all previous studies. For example, as in the case of Covid-19, in the 2003 SARS epidemic, the anchor that was frequently used was of the 1918 Spanish flu epidemic, which caused the death of some 50 million people, being more alarming than reassuring (Washer, 2004; 2006).

From a complementary point of view, but also linked to this idea that the contents and processes of social representations are associated with the management of threat and anxiety, a model states that an externalizing/blaming others SR of a disease, should be related to less personal risk and conducive to low level of preventive behavior (Riley & Baah-Odom, 2010). The first assumption is that the more people share a stereotyped/stigma SR of the disease (i.e., stigma related SR of AIDS), the less they perceived threat; 2 out of 4 studies on SR on this sexual disease reviewed or carried out by those authors supports this assumption. A second assumption is that sharing a stereotype/stigma will correlate with less preventive behavior; 1 in 3 studies support it. Finally, reduced perceived threat will be correlated with less safety in behavior; two over five studies support this idea. Finally, two mediational analysis examining the total model (SR through reduced vulnerability influence behavior) were unsuccessful to confirm it (Riley & Baah-Odom, 2010). These results are consistent with meta-analyses that show that risk perception only modestly predicts intentions and health behavior (Brewer et al., 2007; Floyd, Prentice-Dunn & Rogers, 2000; Sheeran et al., 2014). With respect to Covid-19, one study found a positive association between perceived risk and preventive behaviors in 10 nations (Dryhurst et al., 2020) and another that the effectiveness of preventive behavior was a central predictor rather than perceived risk (Clark et al., 2020).

Finally, agreeing with an externalizing SR, -but also with a conspiratorial explanation of Covid-19 -, allows at least some symbolic control and should reduce the discomfort and anxiety, in particular of threatened and lower status groups. In any case, what Pizarro and colleagues (this issue) found is that the perception of vulnerability is positively associated with agreement with this type of representations. Of course, a sequential model cannot be excluded: threat and anxiety feed a search for meaning, and the generation and adoption of conspiracy explanations or an externalizing SR of disease subsequently causes a decrease in anxiety. However, this hypothesis has not yet been demonstrated.

CONSPIRACY BELIEFS AND ANCHORING

Conspiracy beliefs were discussed by different papers (e.g. Apostolidis et al., 2020) and shared by a significant minority of people surveyed in 17 nations (Pizarro et al., this issue). 26% of the French think that Covid-19 was created in a laboratory. As Apostolidis et al. (2020) state the emergence and spread of conspiracy theories on the manufacture of Covid-19 in a Chinese or American laboratory is reminiscent of the similar etiologies that still prevail over the origin of HIV. In 17 nations surveyed by Pizarro et al. (this issue), three people in ten agree with conspiracy explanations of Covid-19 as a biological weapon and two people in ten agree Covid-19 is a way to “solve problems”. Moreover, half of the people share a partially paranoid suspicion by representing the political elite as a villain (e.g., “government deceives us”).

Conspiracy explanations are associated with the following psychosocial traits: a) need to make sense of the world; the motivation to make sense is central to conspiracy theories, as it provides explanations for events and, more often than not, an entity to blame (Moscovici, 2020); b) low perception of control over situations; c) fear, anxiety and vulnerability; d) right-wing authoritarianism characterized by agreement with obedience to an authoritarian leader, a mentality deeply rooted in traditional social values, and, at the same time, a distrust of some government structures - right-wing authoritarians support conspiracies involving deviant groups and some high-powered groups (e.g., Jews and “oligarchs” conspiracies), which threaten the status quo -; e) Orientation towards social domination or preference for hierarchical social system orientation is associated with conspiracy theories involving deviation of low status groups (e.g., homosexuals, ethnic minorities, immigrants), as they are believed to also threaten the status quo. Conspiracy beliefs, RWA and SDO operate as justification functions of the system, as a defense system to protect the socio-political status quo (Goreis & Voracek, 2019; Imhoff & Bruder, 2014). Confirming previous studies, SDO, RWA and the perceived risk significantly predicted polemic conspiracy SR’s in the study conducted by Pizarro and colleagues (this issue).

OBJECTIFICATION AND WAR METAPHOR

Most studies review the process of anchoring and objectification. However, the use of metaphors as linguistic tools used to describe the pandemic, which make it more psychologically tangible, was only partially discussed. The metaphor is a good rhetorical figure to satisfy that need to transform the unknown into something close, since it associates the new with an image of a known situation. The deployment of militaristic

rhetoric in response to the pandemic was manifested in Singapore, Taiwan and China, (President Xi the “Commander of the People’s War” against Covid-19). In France, President Macron used the phrase “we are at war” (*nous sommes en guerre*) in March when he announced that France was entering lockdown, and he declared a “first victory against the virus” when quarantine measures were lifted in June. In the UK, the Queen had “evoked memories of Britain’s Blitz spirit” by comparing “measures to beat coronavirus with wartime evacuations” (Jasper & Nerlich, 2020; McCormick, 2020; Reicher & Scott, 2020; Sabucedo, Alzate & Hur, 2020). War metaphors such as combat, fight, and defeat are employed to demonstrate how governmental control can foster a sense of collective action, but also, how it can justify fighting the enemy at all costs. The metaphor of war is also associated with obedience, identifying an enemy and defending the in-group. The war metaphor is an obstacle to the goal of building consensus through flexible leadership, as it evokes warlordism, order and command. It also questions the democratic values of dissent and criticizes (“in a war the first victim is the truth”). Criticism of the management of the commands is perceived as high treason. Finally, this metaphor can “naturalize” the role of the police and army in imposing order (Sabucedo et al., 2020).

COGNITIVE POLYPHASIA AND COVID-19

Cognitive polyphasia was discussed by de Rosa & Mannarini (this issue) and Sitto & Lubinga (this issue), but it was an underdeveloped theme. Cognitive polyphasia implies a dynamic coexistence of different modalities of knowledge: the traditional and the new, on the one hand, and the "slow", discursive, logical, and analytical versus the “fast”, heuristic, or magical on the other (Moscovici, 2000). In social representations, contradictory contents and simple and logical ways of thinking coexist, one example is of Westerners of higher education reasoning according to the magic laws of contagion and similarity (Pérez, 2004). In the case of conspiratorial or plotting representations, this coexistence occurs: the same people who believe that Bin Laden was dead before his execution by the US, also believe that he is still alive (Yzerbit & Klein, 2020). Contrary to what some people claim - that it is the people who are poorly versed in statistics and poorly educated who reason quickly, simply and magically – as previously confirmed, it has been found that university students in the US and Spain reason according to the logic of contagion (“once in contact always in contact”). They refused to wear washed clothes or cutlery that belonged to sick people. Cognitive biases affect statisticians and health

experts, because they show the heuristic of risk aversion when they prefer certain alternatives depending on whether the situation is presented as a gain, avoiding risk, or when the same situation is presented as a loss, preferring uncertain options, seeking risk (Kanheman, 2012)⁴. It is likely that this magical reasoning will manifest itself in the case of Covid-19. During the first week of quarantine, in March 2020, some products related to personal hygiene were sold out in the respective establishments: sanitary masks and hydro alcoholic gels, but also toilet paper was sold out⁵, in most European countries, United States and Australia. It is assumed that this type of behavior is related to fear, anxiety and magical thinking. A longitudinal study found with a Spanish social sample that levels of magical thinking and pseudo-scientific beliefs increase during lockdown (Escolà-Gascón et al., 2020).

A manifestation of cognitive polyphasia is the lack of relationship between possessing a style of thinking and scientific knowledge and preventive behaviors related to Covid-19. A study inquired about scientific reasoning and analytical thinking ability, correct knowledge of Covid-19, conspiracy beliefs, health preventive behavior and attitudes towards Covid-19 vaccination (will you get the coronavirus vaccine if one becomes available?). As expected, scientific reasoning correlates positively with knowledge and negatively with conspiracy beliefs related to Covid-19– that correlates negatively with attitude towards Covid19 vaccination. However, no correlation was found between scientific reasoning, analytical thinking, knowledge on Covid-19 and willingness to get a coronavirus vaccine if available. Similarly, regardless of scientific reasoning, people reported the same amount of correct health behaviors, such as hand washing, wearing facial masks to protect others, and working from home. Moreover,

⁴ People prefer options with certain outcomes (i.e., they show risk aversion) when making decisions about gains, and they prefer options with risky, uncertain outcomes (i.e., they are risk seeking) when making decisions about losses. These tendencies extend decisions involving actual gains and losses to outcomes that are merely “framed” to appear to be gains or losses. Tversky and Kahneman classic task that illustrate these processes is the following:

The country is threatened by a serious epidemic from Asia that puts 600 people at risk. Two types of health interventions, A and B, are being developed. Choose yours.

Version one A) If the program is adopted, 200 people will certainly be saved B) If the program is adopted, there is a 1/3 chance of saving 600 people and a 2/3 chance of not saving any

Version two A) If the program is adopted, 400 people will certainly die B) If the program is adopted, there is a 1/3 chance that no one will die and a 2/3 chance that none will be saved or that all 600 will die.

In version one, that emphasize saving lives or gain one most people choose A certainty alternative.

Tversky and Kahneman defined this tendency as risk aversion. In version two most people choose B a probabilistic or “risky” alternative when death or a loss frame is emphasized. Although the content of the alternatives is equivalent.

⁵ A satirical vignette ironically depicted the behavior of accumulating toilet paper. Referring to the dinosaur's extinction, it presented two dinosaurs: one said to the other "a gigantic comet is coming, I'm running to buy as much toilet paper as I can".

correct and incorrect health behavior did not intercorrelated strongly negatively – researchers were unable to find two opposites factors (Cajolova et al, 2020). This suggests that acceptance of the Covid-19 vaccine or correct health behaviors may be based on beliefs of all kinds. The coexistence between scientific and medical knowledge is evident in the combined use of scientific medical measures and popular medicine in many countries, as illustrated by one the studies of this special issue. Analysis of conversations in social media found that modern Western medicine is perceived as the most effective, but at the same time people think that traditional medicine can be used to deal with Covid-19 (Sitto & Lubinga, this issue).

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Spain, November 2020, year one of the Covid era

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