Governments around the world are currently introducing measures to reduce the spread of COVID-19, including closing schools and universities, cancelling events, restricting access to care homes and encouraging home-working. More extreme measures include quarantines for whole areas, requiring people to stay in their homes and not travel.

While there is evidence of the importance of these measures in reducing disease transmission, one of the unknowns is the degree to which people are willing to follow these more stringent measures. There is much media coverage of the experience of those in quarantine and isolation which focuses on the difficulties that people have faced. In these circumstances, it is easy to imagine that people will simply not being the willing to adhere to the new requirements if they are in place for a long period of time.

**THE PSYCHOLOGY OF BEHAVIOUR MAINTENANCE**

But just what do we know about the psychology of this unusual situation? The focus of much of the relevant literature is on starting new behaviours such as hand-washing. There is much less about the psychology of maintaining behaviours. As Dominika Kwasnicka and colleagues identified, few studies evaluate the degree to which longer-term behaviour change has taken place and the information is available, for weight loss programs, smoking cessations and reduced alcohol consumption, is not promising.

Given the long-term behaviour changes that are needed from both a public health as well as commercial perspective, it is critical to understand how long-term behaviour change can be motivated. Some key recommendations include:

**Make activities enjoyable:** While initial behaviour change for COVID-19 will be motivated by a desire to avoid possible negative outcomes (such as exercising regularly to reduce health risks), more positive motivations are needed for long-term adherence are quite different. This is suggested by the precaution adoption process model. People tend to engage more strongly with behaviours that they enjoy (or where there are outcomes that are enjoyable).

In terms of public health, we recommend that advice highlights the positives that people can find in the new behaviours. A period of self-isolation, whilst difficult, may have positive aspects, such as time to do activities that often we don’t have time, for like reading or catching up on life admin. And these can be accentuated.

For brands, this means making sure that the new (digital) channels to market that will inevitably be required are well designed and offer consumers positive experiences. The user design or development of new services will be critical to help achieve this.

**Help build internalized motivation:** Being obliged to do something only works for a limited period of time, after which...
people need to feel personally motivated to do these actions. The literature suggests that when these protective behaviours are congruent with existing beliefs and engagement, they are more likely to be maintained. In the context of COVID-19, this suggests that for policymakers it is important to reference prior beliefs such as the importance of social responsibility and the value of good hygiene. For brands, it may be to emphasize the value of new behaviours such as moving to digital channels; there will be a host of pre-existing beliefs and attitudes towards the perceived value of digital channels that need to be referenced.

**Build positive identities:** People are much more likely to maintain behaviours if they are consistent with the way they see themselves.9 At times, the required behaviours for COVID-19 protection may be inconsistent with the dominant identity a person has. For example, someone’s identity as a friendly, social person may be inconsistent with the sudden need to have very limited social contact. But if the same person also identifies as having an identity of a responsible citizen, it is a matter of bringing this identity to the fore. Both brands and policy makers will need to understand how to draw on positive identities for people to make sense of and adopt these behaviours.

**HELPING PEOPLE TO SELF-REGULATE**

Kwasnicka and colleagues identified a number of important factors beyond keeping people motivated that are important for maintaining behaviours. One of these is self-regulation: helping people to successfully monitor and manage their new behaviours. We suspect that one of the most challenging aspects of self-regulation will be that of maintaining self-isolation behaviours over a long period of time - not least as it is externally enforced, and individuals are typically under stress.

We consider that an understanding of rituals provides some insight into how routines could be developed to be long-lasting.11 Rituals pervade our lives, involving anything from setting of the table for an everyday family meal, to getting married. The important point is that a very specific set of behaviours is undertaken a very consistent way and they are embedded in a larger system of meaning. If our behaviors are guided by ritual then we are more likely to self-regulate and not stop them. This has clear essential applications for the long-term continuation of protective actions against COVID-19.

**Rituals**

Rituals are behavioral patterns that are segmented into chunks and arranged into a specific sequence that is adhered to in a strict way. Applying this to maintaining self-isolation behaviours over a longer period, public health guidance could well suggest creating defined chunks of behaviours within a specific day (e.g., sitting at a specific table for working at home) or across a number of days (e.g. decluttering different rooms of a house) to help people maintain being housebound without developing poor psychological outcomes. A second relevant aspect of rituals is the psychological meaning ascribed to that behaviour. As mentioned earlier, aligning the behaviour with pre-existing beliefs and attitudes can help to motivate those behaviours, but by linking these to shared social meanings there is a potential to build affiliation and develop an understanding of shared knowledge and norms. In this way, providing communications that focus on self-isolating behaviours as a shared activity that we are all doing to reduce disease transmission, or allowing individuals to share their experience in maintaining these activities could potentially build a deeper meaning around these behaviours.

**THE ROLE OF SOCIAL FORCES**

Before government restrictions were implemented, much of the impetus for behaviour change came from direct appeals from experts to citizens through the media, then supported by emerging social normative pressure. Pandemics like COVID-19 are both an immunological problem but also a social problem—social in both a causal role and as central to the solution.

Social forces can spark, accelerate and support the behaviour maintenance strategies already outlined in a variety of ways. Social facilitation and co-action can make activities more enjoyable. A sense of relatedness from the influence from trusted others helps to speed the internalization of motivation. Our social identities from
these connections are essential in sustaining our personal identities. And social influence and normative pressure can trigger inhibitory control and other self-regulatory process as these norms are internalized. In many ways, channeling these social forces can function as a “power-up” for behaviour maintenance strategies.

**IMPLICATIONS**

There is much guidance on the need to consistently practice protective behaviours to reduce the spread of COVID-19. There is also a significant body of work on the formation of habit for health protection behaviour, but many of the motivational and regulatory dimensions that underpin behaviour maintenance are social and cultural in nature.

**REFERENCES**