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How Do Pandemic Policies and Communication Shape Intergroup Outcomes? Initial Findings From the COVID-19 Pandemic and Open Questions for Research and Policy

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Abstract

Government policies can be productive tools for protecting citizens while simultaneously forging more egalitarian societies. At the same time, history has shown that well-intentioned governmental actions, such as those meant to quell pandemics (e.g., blood-donation restrictions), can single out members of marginalized groups (e.g., men who have sex with men). How did government actions shape intergroup outcomes during the COVID-19 pandemic? Here, we draw from emerging research to provide informed conjectures regarding whether and how government actions affected stereotypes (e.g., beliefs about gender), prejudice (e.g., anti-Asian bias), and intergroup violence (e.g., hate crimes against Asian individuals) during the COVID-19 pandemic. We discuss research examining the impact of policies intended to curb the spread of the disease, and we consider possible effects of the strategies used to communicate about the virus. Furthermore, we highlight open questions regarding how and why pandemic policies and communication shape intergroup outcomes, propose key directions for future research, and note possible implications for future development of policy and communication strategies.

Keywords

COVID-19, stereotyping, prejudice, violence, pandemic policy, pandemic communication

In early 2020, governments throughout the world implemented policies with the intent of slowing the spread of the newly identified coronavirus (COVID-19), which caused a contagious respiratory disease (Karatayev et al., 2020). Despite these efforts, the pandemic quickly spread around the globe (World Health Organization, 2023). Several organizations attribute the rapidity of the virus's spread to the ineffectiveness of government policies and communication. For example, Rochelle Walensky—director of the U.S. Centers for Disease Control and Prevention (CDC)—stated that guidance to the public was "confusing and overwhelming" and called for an overhaul of the CDC's organization (LaFraniere & Weiland, 2022). Particularly given the lack of preparedness demonstrated by governments, it is important to consider how pandemic policies and communication might have had unintended consequences for intergroup stereotypes (e.g., beliefs about gender), attitudes (e.g., anti-Asian bias), and behaviors (e.g., hate crimes against Asian individuals).

Such an analysis is particularly warranted given examples from past pandemics of how even when government policies and communication are well-intentioned, they have sometimes singled out marginalized social groups. For example, the overrepresentation of diagnoses among men who have sex with men at the start of the HIV/AIDS pandemic led many countries to implement policies that restricted the donation of blood from men who have sex with men (Savage & Ohlen,

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2020). In addition, communication from government officials, scientists, and the media initially referred to the disease as "Gay-Related Immune Deficiency" (Altman, 1982). Today, decades after the inception of the HIV/AIDS pandemic, men who have sex with men still face HIV-related stigma across the globe (e.g., Arnold et al., 2014; Wei et al., 2016). As this example illustrates, policy and communication are two potentially meaningful ways that government response to pandemics can shape intergroup outcomes. Here, we explore these two pathways in the context of the COVID-19 pandemic.

Needless to say, there are important differences between COVID-19 and past pandemics, and government actions have been distinct. For example, many officials initially ignored the gravity of the HIV/AIDS pandemic (Richert, 2009), whereas COVID-19 received a swifter response (CDC, 2022). Despite these differences, however, it is nonetheless important to ask whether and how more recent pandemic policies and communication might have also affected intergroup outcomes. The COVID-19 pandemic provides an opportunity to evaluate this question and chart directions for future research.

We draw from the burgeoning empirical literature on the COVID-19 pandemic to provide informed conjectures about the impact of policy responses and communication strategies on stereotyping, prejudice, and intergroup violence during the COVID-19 pandemic. Specifically, we discuss the potential impact of policies intended to curb the spread of the disease. Empirical findings to date have spoken to potential effects of stay-at-home orders, travel restrictions, and states of national emergency, sometimes collectively grouped under the general term "lockdown." We also consider the potential impact of two common communication strategies: framing the pandemic through a metaphorical lens and linking social groups to the origin and spread of the virus.

When available, we describe empirical research examining the correspondence between COVID-19 policies or communication strategies and intergroup outcomes (e.g., anti-Asian bias). In cases for which such research has not been conducted, we instead draw from previous research (e.g., on past pandemics) to assess how the policy or communication strategy might have shaped intergroup outcomes in the context of the COVID-19 pandemic. Throughout this review, we also highlight limitations of current research and open questions for future research that could inform policy.

It is important to recognize that there are various factors that likely operated in tandem to shape intergroup outcomes during the COVID-19 pandemic, including policy responses (e.g., implementation of stay-at-home orders), communication strategies (e.g., framing the virus's origin), the pandemic itself (e.g., spread of an infectious disease), and the overarching political context (e.g., political leaders' beliefs; government actions on nonpandemic-related issues). It is difficult, if not impossible, to fully disentangle the unique and interactive roles of each factor. Despite these inherent complications, however, it remains important to consider how these factors might have shaped intergroup outcomes as a means of identifying meaningful avenues for future research and designing better responses to future pandemics.

Policies Intended to Mitigate the Spread of COVID-19

In this section, we review research examining how the implementation of COVID-19 mitigation policies related to stereotyping and prejudice. Although at the time of this writing there is little empirical research directly assessing this question, several studies have begun to shed light on how mitigation policies might have affected these intergroup outcomes. Here, we conduct a focused review of several such studies.

The unexpected nature of the pandemic and uncertainty surrounding whether and when policies would be implemented required researchers to conduct quasi-experiments that primarily capitalized on preexisting studies. Thus, studies vary widely in measures of intergroup outcomes and nature of the quasi-experiential design, which necessitates caution when comparing studies. At the same time, there are some similarities across studies (e.g., the use of self-report measures). To reduce the likelihood that extraneous factors shaped findings, we do not review studies that simply examined attitude or belief changes over time (e.g., from before to after the pandemic) without clear reference to specific policies (e.g., Golec de Zavala et al., 2021; Nir et al., 2022; Reeskens et al., 2021). This approach allowed us to draw clearer conclusions regarding the potential impact of policies on intergroup outcomes.

Existing research supports the possibility that COVID-19 policies may indeed have affected people's beliefs about some specific social groups. In particular, the evidence most strongly points to changes regarding gender groups. For example, a two-wave study assessed the degree to which people endorsed gender stereotypes (e.g., that men are more adventurous and that women are more hygienic) and conformed to gender roles (viewing themselves as masculine or feminine) both before and immediately after the U.S. government declared a state of national emergency. The researchers found that people more strongly embraced gender stereotypes and reported conforming more to gender roles after (vs. before) the policy was put in place (Rosenfeld

& Tomiyama, 2021). Likewise, a study conducted in Italy examined people's agreement with gender stereotypes after the government implemented a lockdown that required people to stay at home and then again at the end of the lockdown period. They observed that people more strongly endorsed traditional gender roles after (vs. before) having lived through the lockdown (Tintori et al., 2021). Both Lithuanian men and women also more strongly endorsed some cultural ideals about body size during (vs. before) a national lockdown (Baceviciene & Jankauskiene, 2021).

Some findings also suggest that the implementation of COVID-19 policies corresponded to outcomes beyond gender stereotyping. In an analysis across 23 countries, Han et al. (2022) found that both lockdown duration and severity were associated with perceiving immigrants as more threatening (e.g., as increasing criminality). Associations were most reliable in European and American countries. Associations emerged independent of objective (e.g., actual degree of COVID infection) and subjective (e.g., perceived infection risk) disease threats, suggesting that characteristics of the policies (e.g., their degree of restrictiveness) might have shaped perceptions of immigrant threat.

However, the effect of COVID-19 policies on intergroup attitudes appears to have been limited to certain social groups rather than manifesting as general shifts in people's attitudes toward groups writ large. For example, Stern and Axt (2022) examined whether the implementation of travel recommendations and stay-at-home orders at the beginning of the pandemic (February–June 2020) corresponded to overall changes in Americans' explicit and implicit attitudes toward groups, including those based on sexual orientation (gay, straight) and political party (Democrat, Republican). No meaningful attitude shifts were observed after these policies were implemented, suggesting that people's attitudes toward groups in general did not change.

Taken together, the available evidence suggests that pandemic policies may have uniquely affected stereotypes toward only certain groups, particularly gender groups. What mechanisms might explain this shift? Perhaps pandemic policies that required people to stay at home for extended periods of time affected beliefs about gender because these groups were highly relevant and frequently encountered—that is, most people continued to have same- and cross-gender contact (e.g., with siblings and romantic partners) during the pandemic. Gender is also one of the most universal categories that people use to organize information about themselves and others (Bem, 1993). Thus, strict and clearly structured gender roles may be particularly appealing during times of uncertainty (Baldner et al., 2022). For example, pandemic policies created additional housework and child-care demands, and people appear to have conformed to gender stereotypes as a way of resolving who would complete this labor (Alon et al., 2020; Del Boca et al., 2020).

Open research questions and implications for policy

Identifying and explaining variability in how pandemic policies affected intergroup outcomes. To date, researchers have generally examined the relation between intergroup outcomes and pandemic policies implemented on a relatively broad scale (e.g., at the country level, examining "lockdowns" that combine several policies; Han et al., 2022; Rosenfeld & Tomiyama, 2021). One open question concerns whether distinct policies that vary in content (e.g., travel restrictions vs. mask mandates) may have differentially affected intergroup outcomes. To test this question, researchers could take advantage of geographic variability in whether and when different policies were implemented. For example, some U.S. states implemented only a subset of policies and did so at different times (e.g., Wu et al., 2020). Such analyses would allow researchers to test, for example, whether policies that required people to stay at home and, in turn, created increased interdependence among men and women were more likely to enhance gender stereotyping, whereas those that highlighted international relations (e.g., travel restrictions to certain countries) were more likely to shape attitudes toward groups stereotyped as "foreign" (e.g., immigrants). Examining such variability would allow scientists to identify policy content that might predict which groups will be affected after a policy is set into motion.

A related question is whether characteristics of policies might produce systematic differences in intergroup outcomes. For example, COVID-19 lockdowns varied across regions in important ways (e.g., severity, duration; Han et al., 2022). Future research could conduct more systematic analyses of whether and how characteristics of policies that occurred across geographic areas yielded distinct impacts on intergroup outcomes. For example, did variation in restrictiveness of stay-at-home orders across states correspond to different degrees of gender stereotyping? Researchers could also conduct meta-analyses to synthesize within and across policies as the literature and number of publicly available data sets grow. Analyses could also include other longitudinal data sets, such as studies that did not specifically focus on the role of policy but incidentally collected intergroup measures before and after the implementation of a policy. Such comparisons could shed light on how characteristics of policies (e.g., more vs. less severe) in addition to their direct content (e.g.,

staying at home vs. wearing a mask) relate to intergroup outcomes—and, in turn, better prepare policymakers for how their decisions might inadvertently alter how people think about groups.

Gauging the breadth of how pandemic policies related to intergroup outcomes. Although evidence to date has identified shifts in beliefs toward only a few specific groups, it is important to recognize that the recency and unexpected nature of the pandemic means that research has so far been relatively constrained in the social groups examined. It therefore remains possible that broader shifts in attitudes (e.g., toward groups based on religion or social class) might nonetheless have occurred in yet-undetected ways. Further exploring the breadth of shifts in group-based beliefs will help researchers identify which types of groups (e.g., those that possess particular characteristics) are most likely to be affected—key information both for theory development among scientists and response preparedness among policymakers. Exploring this question would also yield generative insight for researchers examining how stereotypes contribute to broader forms of inequality in society, such as educational and health disparities.

Combating adverse effects of pandemic policies. To the degree that pandemic policies play a role in worsening intergroup outcomes (e.g., increasing stereotyping), can these shifts be prevented, and if so, how? Several commentators have suggested that policies could be tailored toward preventing inequality during a pandemic (e.g., Flor et al., 2022), but it is currently not clear exactly what form such policies would take or how psychological research would inform their creation.

One effective way of addressing social inequalities appears to be "wise interventions," which prompt people to perceive positive meaning in their life (Walton & Wilson, 2018). Could such interventions coupled with situations that offer affordances for success help ameliorate negative intergroup outcomes during a pandemic? For example, would allowing people to work from home while employing interventions that foster feelings of social connection mitigate the exacerbation of gender stereotyping? Testing how psychological strategies could be directly incorporated into pandemic polices will help connect behavioral scientists and policymakers in the future.

COVID-19 Communication

In the following section, we review two important aspects of communication during the COVID-19 pandemic that might have played a role in shaping intergroup outcomes: (a) metaphorical framing used to describe the pandemic and (b) the degree to which certain social groups were linked to the origin and spread of the virus. After discussing these two aspects of communication, we highlight the implications of these communication strategies for intergroup outcomes and discuss how these two strategies might interact.

Metaphorical framing of diseases

People commonly use metaphorical language to communicate about illness and disease (e.g., "This year's flu season is on steroids"; Gibbs & Franks, 2002; Jasen, 2009; Sontag, 2001). Metaphors offer people a means of fluently communicating and processing information in understandable terms when topics are complex or uncertain (Keefer et al., 2011; Keefer & Landau, 2016; Landau et al., 2017). Given the unpredictability of pandemics and disease outbreaks, the fact that diseases are typically not visible to the naked eye and that most people lack the training to discuss diseases in scientific terms, it is not surprising that metaphors are commonly employed in discussions about disease.

A common metaphor for disease is that of war. Several diseases that have affected large numbers of people throughout the world have been characterized through a lens of militaristic action. For example, discussions about both AIDS and cancer have frequently been framed as part of a prolonged war that humanity must wage (Garrison, 2007; Lerner, 2003; Sontag, 2001). U.S. President Richard Nixon even went so far as to publicly declare a "War on Cancer" around the time of signing the National Cancer Act of 1971 (Surh, 2021).

Communication regarding COVID-19 also frequently adopted the terminology of war (Panzeri et al., 2021; Sabucedo et al., 2020; Schnepf & Christmann, 2022). For example, analyses of Twitter discussions about COVID-19 highlighted that although various metaphors have been employed (e.g., monster, tsunami), war has been one of the most common framings (Olza et al., 2021; Wicke & Bolognesi, 2020). The war metaphor was also in common use among public officials throughout the world (Atuhura, 2022; Isaacs & Priesz, 2021; Rajandran, 2020). For example, Donald Trump—U.S. president during the start of the pandemic—described himself as being "a wartime president" (Oprysko, 2020). In addition, Dr. Anthony Fauci—director of the National Institute of Allergy and Infectious Diseases during the start of the pandemic—described the difficulty of evaluating pandemic policies as "almost like the fog of war" (Cohen, 2020).

Critically, social-scientific research suggests that the war metaphor for disease is often ineffective at promoting preventive health behaviors and can sometimes even backfire (Hauser & Schwarz, 2015, 2020). For example, Hauser and Schwarz (2020) observed that reading descriptions of cancer that contained bellicose

metaphors (e.g., battle, fight) led people to perceive cancer treatment as more difficult, increased fatalistic beliefs about the likelihood of getting the disease, and failed to mobilize preventive health behaviors (seeing one's doctor).

Initial findings suggest that the war metaphor was also ineffective at promoting constructive health responses to the COVID-19 pandemic. For example, reading about COVID-19 described in terms of a battle (vs. nonbattle) metaphor did not lead to greater support for curfew and mask-wearing policies and prompted lesser beliefs that social-distancing rules were an adequate policy (Schnepf & Christmann, 2022). Relatedly, Burnette et al. (2022) found that an article describing the COVID-19 pandemic as a wartime situation (vs. a challenge that people can change) neither enhanced feelings of self-efficacy to manage the virus nor increased growth mindsets about avoiding the virus.

Linking groups to diseases

A second key dimension of pandemic communication is how the origin and spread of the virus is framed. People are inherently curious about the origins of social and physical phenomena (Higgins, 1998). Disseminating information about the origins of a disease could, if done cautiously, satiate this "need to know" while also potentially helping people avoid contracting the disease (e.g., through avoiding areas with high rates of infection). Unfortunately, however, communication patterns about the origin and spread of diseases sometimes default to narratives that implicate social groups (Filip-Crawford & Neuberg, 2016; Hogarth, 2017; Nussbaum, 1999, 2010). For example, Jewish people were largely—and inaccurately—blamed for the inception and spread of bubonic plague during the 14th century in Europe (Cohn, 2007), and Chinese people were blamed for an outbreak of the plague in San Francisco in 1900 (Risse, 2012).

This pattern of group-based blame likely emerges in part because humans tend to be particularly concerned about out-group members harboring infection and disease (Moran et al., 2021; Petersen, 2017). Members of marginalized groups are also commonly stereotyped in ways that can make them easy explanations for the origin of infectious diseases. For example, Black Americans are viewed as living in polluted spaces (Bonam et al., 2016), Mexican immigrants entering the United States are characterized as vermin scuttling across national borders (Marshall & Shapiro, 2018), and gay men's sexual activities are perceived as involving bodily waste (Nussbaum, 2010).

This same process of tying a disease to a social group appeared to play out in communication regarding the COVID-19 pandemic. The reporting of a case of COVID-19 pneumonia in Wuhan, China, in 2019 led many government officials and scientists to immediately and publicly refer to China as the known inception point of the pandemic (Zeng et al., 2020). Although Wuhan is now widely considered as being the originating location of the virus (Maxmen, 2022), early in the pandemic, other locations, including Spain and Brazil, were also possible contenders (Zeng et al., 2020). Despite this initial uncertainty around the origin of the COVID-19 virus, references to the COVID-19 virus as the "Chinese virus" or "Wuhan virus" were prevalent (Vazquez, 2020). These attributions for the origin and spread of the COVID-19 virus appear to have quickly generalized beyond China and more broadly included people of Asian descent, such as Asian American individuals (Cho et al., 2021).

Implications of pandemic communication for intergroup outcomes

The two forms of communication outlined above—war metaphors and stereotypes linking social groups to the root of a problem—often co-exist in social discourse. For example, in the United States, the idea of a "war on terror" occurred alongside stereotypes about Arab and Muslim individuals being a source of violence (Kruglanski et al., 2007; Steuter & Wills, 2009), and the concept of a "war on drugs" was disseminated at the same time that racially minoritized groups (e.g., Black Americans) were stereotyped as being the source of drug use and distribution (Lusane & Desmond, 1991; Nunn, 2002).

Did these forms of communication interact to shape intergroup outcomes during the COVID-19 pandemic? Although we are aware of no research that has directly explored this question, we can gain some tentative insight into this question by examining related lines of research. One way of determining the potential impact of these communication strategies is gauging whether certain groups experienced heightened bias during the pandemic. Indeed, evidence suggests that Asian individuals became targets of bias and discrimination during the COVID-19 pandemic. For example, an analysis of Google Trends data revealed that Google searches for COVID-19 corresponded to greater search rates for anti-Asian slurs and reduced interest in Chinese restaurants in the United States (Vachuska, 2020). Moreover, other research found that hate crimes—violent acts directed at people because of their group membership—increased against Chinese people in London after the start of the pandemic (Gray & Hansen, 2021). Although this research focused specifically on available data from London, there is reason to suspect that the

uptick in hate crimes and stigma generalized to other nations as well: For example, after the start of the pandemic, Hong Kong and Taiwan residents directed greater stigma toward individuals from mainland China, and even Chinese individuals living elsewhere in mainland China became more hostile toward people living in Wuhan and Hubei (Xu et al., 2021)—areas communicated as ground zero for the pandemic (Zeng et al., 2020).

Some research also more directly suggests that communication patterns linking Asian individuals to COVID-19 might heighten bias. For example, emphasizing that COVID-19 began in China, as opposed to describing it as a mutation without mentioning China, increased negative attitudes toward Asian Americans (Dhanani & Franz, 2021). Moreover, given that information tying China to COVID-19 was widespread (Islam et al., 2020), even ostensibly "neutral" reminders of the threat of the virus may have increased bias. Supporting this possibility, simply reading a brief excerpt from the World Health Organization about the dire state of the COVID-19 pandemic reduced people's interest in living with Asian individuals (Lu et al., 2021). Increases in anti-Asian prejudice were magnified among people experiencing greater threat from the pandemic, such as people living in areas with greater numbers of COVID-19 cases or people who lost their jobs during the pandemic (Kaushal et al., 2022).

Supporting the unique role of communication about the virus's spread, the available evidence highlights that stigma fueled by the COVID-19 pandemic was not randomly directed at social groups. Greater concern about the COVID-19 virus corresponded to holding more negative attitudes toward Asian Americans but not other minoritized groups (Reny & Barreto, 2022). Americans also adopted more negative attitudes toward Asian Americans after the start of the pandemic but not toward other racially minoritized groups (Nam et al., 2022). Relatedly, at least in London, violence did not increase toward ethnic groups other than Chinese people (Gray & Hansen, 2021). To summarize, increases in prejudice and stigma appeared specifically targeted at Asian individuals, potentially because of communication that likened the pandemic to a war while identifying Asian individuals as its source.

Open research questions and implications for policy

How do war metaphors interact with disease stereotypes to shape prejudice? As discussed, the war metaphor was frequently used to communicate about COVID-19, Asian individuals were stereotypically linked to the disease, and Asian individuals encountered heightened levels of bias and violence during the pandemic. An open question is whether and how these communication patterns might cause intergroup bias. For example, did the war metaphor in combination with disease stereotypes lead people to view Asian individuals as "the enemy"? For people who held this perception, was receiving the COVID-19 vaccine viewed simply as winning a battle against the virus or also against Asian individuals? Research could explore the impact of war and other types of metaphors (e.g., fire metaphor; Semino, 2021) on prejudice when coupled with disease stereotypes. Given their intuitive appeal, metaphors are unlikely to disappear from disease communication. Thus, discerning which metaphors do and do not heighten bias will be critical for successfully navigating future pandemics.

A related question concerns whether communication patterns drawing from metaphors and disease stereotypes would affect prejudice toward groups who were not directly implicated in communication. As reviewed above, prejudice increased toward Asian individuals, who were linked to COVID-19. Prejudice also appears to have sometimes extended to groups stereotyped in a manner tied to cleanliness and health even if those groups were not directly targeted in communication about COVID-19. For example, COVID-19 salience related to anti-Hispanic bias (Lu et al., 2021). However, people also came to initially hold more positive attitudes toward some social groups (e.g., asylum-seekers and refugees) after the start of the pandemic (Bagci et al., 2023; Schiller et al., 2022). At the time of this writing, we are aware of no compelling explanation that would account for these divergent patterns of prejudice. Uncovering the characteristics that make groups more susceptible to pandemic-related bias would allow policymakers to tailor interventions to the most vulnerable groups while constituting a generative step forward for future research.

How do political context and beliefs interact with communication framing? The COVID-19 pandemic has become a politically polarized topic (Ruisch et al., 2021). Thus, it is important to consider whether the broader political context (e.g., ideology of the government in power) shaped people's intergroup responses to the pandemic. Given that leaders vary in how they obtain and express power (e.g., dominance or prestige; Cheng, 2020), the same information could be disseminated or viewed differently depending on the ideology of the person or group in charge. For example, some people might have been more strongly exposed to messaging from leaders that linked COVID-19 to China, which could have affected the degree to which they subsequently expressed bias against Asian individuals. Conducting comparisons across countries or other sociopolitical units (e.g., states) that vary in leaders' political views and expressions of

power could help determine the role of ideological context on how people respond to communication patterns in intergroup domains.

The political ideology of everyday citizens might also shape their responses to pandemic communication. Some evidence suggests that people might be more responsive to COVID-19 messages that match their political motivations, such as conservatives sometimes being more responsive to war metaphors (Panzeri et al., 2021; Schnepf & Christmann, 2022). At the same time, however, other research suggests that liberals and conservatives can respond to war metaphors in a similar manner (Burnette et al., 2022). Relatedly, some research suggests that people's political beliefs did not modulate the impact of COVID-19 threat on intergroup attitudes. For example, people in the United States adopted more negative attitudes toward Asian Americans after the onset of the pandemic regardless of their political ideology (Nam et al., 2022). These findings highlight that there is likely important nuance yet to be uncovered regarding whether and when personal political beliefs modulate responses to pandemic communication, and we encourage scholars to continue exploring this question.

How can people avoid implicating social groups in pandemic communication? As reviewed, communication often focuses on groups to explain the origin of pandemics (e.g., linking COVID-19 to China). To prevent the emergence of bias, the World Health Organization developed rules for the naming of diseases that include avoiding offensive names or language that would link diseases to particular groups (Kupferschmidt, 2015). During the COVID-19 pandemic, some politicians either inadvertently or purposefully violated these guidelines (Vazquez, 2020; Zeng et al., 2020), as did many scientists (Su et al., 2020).

Given that science and government communication play a central role in informing the public about pandemics (Hyland-Wood et al., 2021; Matta, 2020; Pollett & Rivers, 2020), it is critical for scientists and government officials to adhere to these guidelines and employ alternative approaches that avoid mentioning groups when describing diseases. For example, health-focused messaging about COVID-19 increases self-protective behavioral preferences (e.g., avoiding unnecessary travel; Deslatte, 2020) while leaving intergroup attitudes untouched (Dhanani & Franz, 2021). Such strategies appear to offer a safer alternative to group-focused messaging.

However, avoiding the direct or indirect mention of groups might be impossible in some situations, such as when needing to restrict people from entering a particular area where a disease is spreading. In this case, researchers will need to explore how to simultaneously employ strategies that mitigate bias when group memberships are accessible (e.g., highlighting shared goals; Van Bavel et al., 2020). Thus, a key question for future research will be to determine the communication factors that shape protective health behaviors in the context of pandemics without inadvertently fostering greater prejudice.

Summary and Concluding Remarks

Here, we provided a brief and focused review of how select policy responses and communication related to stereotyping, prejudice, and intergroup violence during the COVID-19 pandemic. We also noted open questions for future research that will make social and behavioral science better situated to shape policy. As research continues to emerge, we encourage scholars to conduct similar reviews about other intergroup outcomes (e.g., educational and economic disparities). Overall, we hope that the review we have provided here will serve as a valuable tool for scientists and spur future research into how societal challenges can be effectively addressed without worsening intergroup outcomes.

Transparency

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