

Human Behaviour during the COVID-19 Pandemic: Observations from India

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KEYWORDS

COVID-19, Human behaviour, Pandemic, Selfish behaviour, Social solidarity

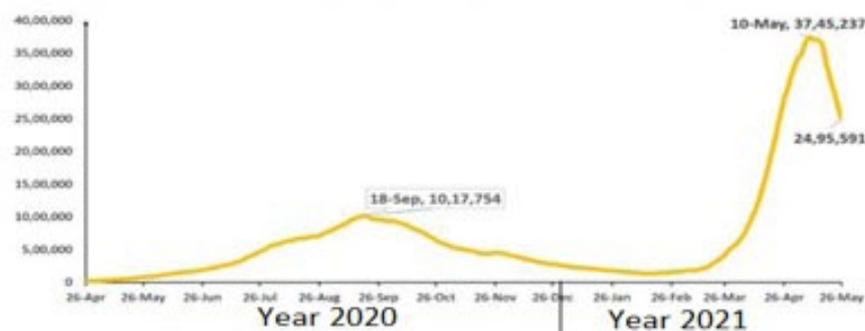
ABSTRACT

COVID-19 has changed the everyday life of the human being worldwide with an unprecedented threat. Although medical science has a crucial role in combatting the disease, concerted efforts incorporating the knowledge from social and behavioural sciences are also vital to mitigate the COVID-19 induced crisis. The actions of individuals, groups and the state play a significant role in alleviating the COVID-19 crisis. In this connection, we have analysed human behaviour from various contexts: individual, social, and policy-making levels. Evidence from news media, different blogs and published articles are analysed for this purpose. We have identified both positive and negative behaviours of a human being during this pandemic. On the positive side, we could see the sense of togetherness and building up solidarity. Some negative behaviours were also observed, where some people acted selfishly to maximise their utility without thinking about society. Such negative behaviour led to a 'social dilemma' state and created negative externalities to the community. The analysis suggests that selfless individual and collective behaviour will be an instrument for effective responses to combat the pandemic.

Introduction

The COVID-19 pandemic has badly affected the health system and economy globally (ILO-OECD, 2020). It has created several challenges to human beings like physical, psychological, economic and social challenges. Several moral and political questions are being raised by one another during this pandemic! In India, the first case of COVID-19 was reported in Kerala on 30th January 2020 and then, on 24th March 2020, the world's most extensive nationwide lockdown was declared by the Government of India with a notice of fewer than 4 hours. It limited the public transport and many other economic activities (Government of India, 24th March 2020). On the day of the declaration of the lockdown, 37 new confirmed cases were reported in the last 24 hours.

Figure 1: Daily reported cases of COVID-19 in India during the pandemic



Source: Ministry of Health and Family Welfare, Government of India

The second wave of COVID-19 in India started in March 2021; as on 2nd March 2021, the number of confirmed cases were 12, 286. Since then, the daily number of positive new cases started increasing and the curve became steeper since 29th March when 68020 confirmed cases were reported in the past 24 hours. The curve has seen a decreasing trend in the second week of May 2021, after a record of more than four lacks of new positive cases in the last 24 hours. India has seen a severe health crisis during this second wave of COVID-19. Many people died without proper treatment (Biswas, BBC News, 2021 April 19), there was a lack of oxygen (The Wire, 2021, May 7; The New York Times, 2021, May 3) and essential medicines. To flatten the curve, the Government adopted several measures (masks, hand hygiene, social distancing, self-isolation/quarantine, travel restriction and lockdown). It also has extended support on various relief and structural adjustment programs.

The pandemic has not only threatened our economic and health status, but it has also threatened our solidarity. To fight against the pandemic, we need solidarity (Guterres, 2020) over our self-interest, and support to those most affected. But the behaviour of people during this period has shown different pictures like noncompliance with Government orders (The Economic Times, 2020, August 26), overbuying of commodities (Kharat, 2020) and medicines (BBC, 2020, March 5), hoarding (Zee News, 2020, March 30) and selling essential commodities with higher/premium price (Business Standard, 2020, November 1). Such selfish behaviour of few persons has created negative externalities to the society. According to the utility theory of economics, the economic behaviour of an individual is to get maximum utility for each unit of money he spends to buy goods or services. Then the question arises, why do some people take moral decisions despite that? The answer is, when people make moral decisions, they think about how others would judge them for behaving selfishly at the cost of others, regardless of whether they are observed or not (Crockett et al., 2017; Jordan et al., 2020). Therefore it was important to observe the individual behaviour during the pandemic. Several socio-economic researches have been conducted on the impact of the pandemic on food security (Mouloudj and Fehit, 2020), mental health (Rajkumar, 2020), utilisation of health care services (Shankar et al., 2020), education (Jena, 2020) and economy (Agarwal and Singh 2020; Kumar et al., 2020). However, there is a dearth of research on such types of selfish human behaviour during this pandemic. The current study will provide a little focus on why some people behave selfishly during this pandemic. The primary objective of the study is to provide examples of human behaviour during the pandemic. We will also discuss how such behaviour is a threat to social welfare during this pandemic. The first section of the paper describes the COVID-19 pandemic scenario in India and the need for the current research. In the second part, we have discussed the methodology. In the third part, we have presented evidence of selfish activities around the country during the pandemic. The fourth part portrays the interrelation between selfish economic behaviour, welfare, market failure and the Government intervention need. In the last section, we have concluded our findings and discussed the role of Government and social work intervention in reducing selfish behaviour and building solidarity to fight against the pandemic.

Methodology:

To highlight some evidence on how people are behaving during the COVID-19 pandemic, we have collected information from the following sources,

1. Published scientific articles in Journals
2. Published articles in news media and blogs
3. Primary observations from the fields

For easy understanding, the observations were analysed issue wise, using a conceptual framework.

Findings and Discussion

The pandemic brought the global economy to the stage of recession with a financial emergency. It has also affected people's behaviour, such as non-compliance with Government orders, panic buying, hoarding, overpricing, etc. Such behaviour may lead to serious social issues and other negative externalities such as more flare-ups of COVID-19 cases. This situation led our society towards a social dilemma state. In a social dilemma, reasonable behaviour at the individual level leads to a situation where everyone is worse off (Ling and Ho, 2020). During this pandemic, people have tried to maximise their self-interest by acting egoistically, selfishly in a very rational manner rather than making a cooperative decision. As a result, rational behaviour at the individual level has created negative externalities at the aggregate level. Let us try to understand the social dilemma theories through economic theories.

The first principle of Economics is considered to be the assumption suggested by F.Y. Edgeworth "that every agent is actuated only by self-interest". In a market economy, the means of production are owned mainly by the individuals who exchange them with goods and services in the marketplace. Government plays a minimum role here. The price is determined by the market forces, i.e. by demand and supply. Adam Smith, over 200 years back, has explained such 'invisible hand' mechanism. In the market, neither the buyer nor the seller sells or purchases goods or services for the benefit of society; they do it to satisfy their own needs. In this process, valuable goods and services are produced, which can benefit many people. For example, when a driver drives a bus, he does it to earn money, but he creates a good service for society. Here individual self-interest maximisation leads to maximisation of social welfare. Therefore we can say that a market economy is a self-regulated economy if there are enough buyers and sellers, where an individual's behaviour can't influence the market price to a large extent. But what happens when individual self-interest maximisation does not lead to social welfare maximisation? Let's cite three different examples.

Example 1: A COVID-19 positive patient had to pay ten times more to book an ambulance to reach the hospital. Here the individual benefit of the ambulance owner is very high, and the cost to the patient is also very high. We can't measure social welfare here.

Example 2: A COVID-19 positive patient with mild symptoms received early treatment at a reasonable cost and was cured. It benefits both the patient and society because the infected person without an early diagnosis, treatment, and isolation could infect many other people in the community. Therefore, treatment with a reasonable cost is a 'Pareto optimal' situation, where the social welfare increased at least for one person without decreasing the utility of the others.

Example 3: A social welfare organisation distributes masks and hand sanitisers to poor people who otherwise cannot buy them. The social welfare organisation collects donations of Rs. 100 per household from such households that can afford it. The use of masks in public places will reduce the risk of transmission. Here the money value of the cost paid by the donating household is much lower than the social benefit of infection control.

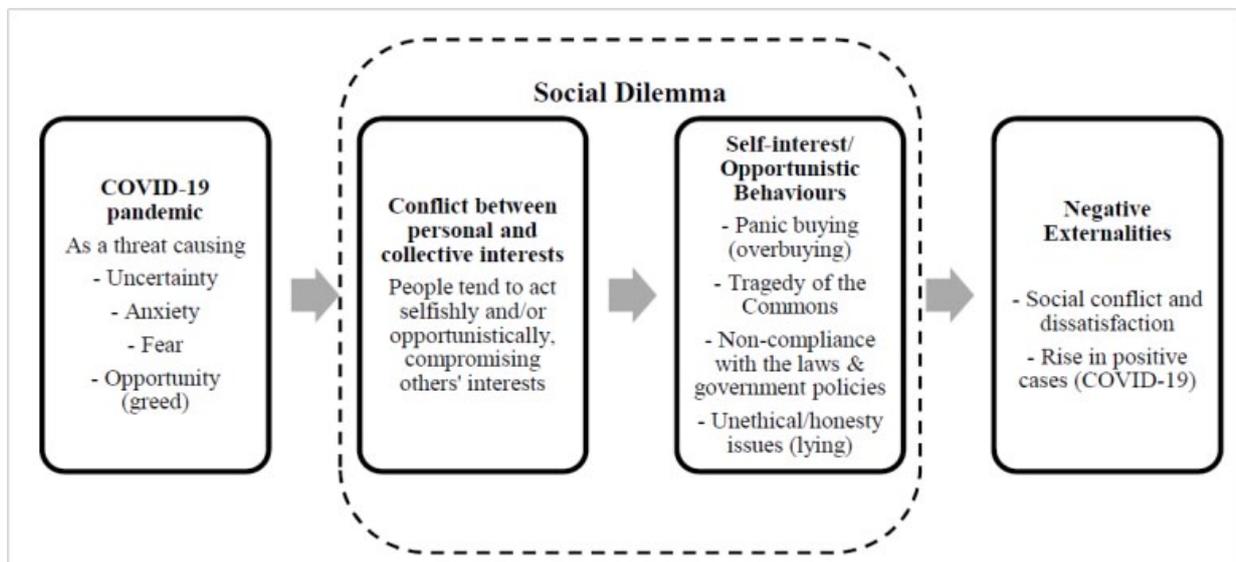
Example 4: A group of enthusiastic volunteers provide free food at the doorstep of the COVID-19 positive patients by collecting individual contributions. Without this support, these COVID positive people would visit the marketplaces to buy food items and people who would come into close contact with them will be likely to be infected. Through this process, there will be a rise in the COVID-19 positive cases in the community. Here also the social benefits are much higher than the individual cost.

From these above-stated examples, it is clear how fairness and solidarity can help us contain the disease. But in many cases, some individuals behave in a self-centred way and such behaviour creates external diseconomies to other individuals and sometimes to the society. The Government and social workers have a significant role in controlling such self-centred behaviour to maximise social welfare.

How COVID-19 induced threat is changing individual behaviour

Referring to figure 1 below, we can see that individuals behave fundamentally for their won benefits and utility, paying little heed to other people's welfare aspects. Such cunning behaviours here include dishonesty, duplicity, cheating, and lying related to shady practices. Subsequently, both inadequate self-interest and opportunistic behaviour bring about adverse externalities or create a social cost. Negative externality implies a choice or an activity made by an individual which creates harmful impacts on others. These social costs are often non-quantifiable (Ling and Ho, 2020).

Figure 1: A conceptual framework on the interconnection between COVID-19, Social dilemma and negative externalities



Source: Ling and Ho (2020)

Contextualising the above theory into the current circumstance of the pandemic revealed that the pandemic has led to a social dilemma. Everyone competed over daily essentials like foods, medicines, masks, sanitisers etc., resulting in panic buying and hoarding. Subsequently, these outcomes have created conflict among the people.

The pandemic episode is considered an extreme threat, causing vulnerabilities, stresses, anxieties, uncertainties and dreads among people concerning whether there will be a sufficient stockpile of necessities to support their livelihood or how long the pandemic will last. Hence, individuals are persuaded to act selfishly through panic buying, over purchasing, non-compliance to the Government's orders and even participating in self-interested and unethical activities to make themselves self-secured. Therefore, with the help of the above mentioned conceptual framework and following evidence, it will be clear how individual behaviour leads to a social dilemma.

The price of grocery goods had continued to go up during the lockdown period (Landon School of Economic, 2020, April 17). The shop owners were selling their goods at a higher price during the relaxation period because they were uncertain about the extension of lockdown; however, they had to

sell their goods for livelihood. Such overpricing had negatively impacted poor people to access essential commodities for themselves. Ambulance and auto drivers and wood sellers for cremation are a few examples of people who charged higher prices for their products or services due to uncertainty. The truckers were demanding more as they were risking their lives to deliver essential commodities.

In the context of fear, numerous unclaimed bodies were found floating on the river Ganga in Uttar Pradesh and Bihar states. The reason was religious faith as well as poverty. The enormous expensive cost of performing cremation during the pandemic forced the locals to throw the dead bodies into the river. Such incidents occurred due to income uncertainty, fear of being infected, and the absence of solidarity during the pandemic. For instance, in Bihar, over one hundred fifty unclaimed dead bodies were found floating on the Ganga river in the Buxar district (Times Now, 2021, May 11). After an interview, it was found that it was triggered as a result of poverty. Therefore, the villagers could not cremate the bodies. The majority of such households belong to vulnerable groups with a dried-out source of income. With the rising scarcity and price of essential commodities, it was difficult for them to follow the Government's regulations; they feared that they wouldn't have anything left for feeding themselves if they spent their last penny on a funeral.

The level of anxiety raised due to scarcity of essential commodities, people in many places, were seen gathering in temporary markets and violating social distancing. They started panic buying and stockpiling of the essential commodities. For instance, despite the flare-up of positive cases, a massive crowd was seen at Dadar and in Shivaji park market in Mumbai without any protective measures (The Indian Express, 2021, March 20).

All the above-stated events were the products of selfish behaviour. It was also seen that people were not getting tested for COVID-19 due to fear of quarantine. These examples speak how anxiety, uncertainty and fear lead to social dilemmas and create a conflict between individual and collective interests during this pandemic. Knowingly or unknowingly most of us have acted on self-interest and such self-discernment ultimately brought a negative externalities and that has marginalised the social welfare.

Regardless of the Government's orders to maintain social distancing, urging people to wear masks and self-isolation, people have been seen violating these regulations. For instance, large religious gatherings in Markaz Nizamuddin mosque (NDTV, 2020, April 1), the Kumbh Mela festival (BBC News, 2021, April 17) and big wedding parties in various parts of India (Indian Express, 2021, March 3) had a significant contribution towards flare-up of Covid-19 cases. It was seen that people were piling up in markets, violating social distancing and not wearing masks (The Times of India, 2020, May 19; The Wire, 2021, April 2). Despite having symptoms, some people did not get tested lest they were quarantined (Scroll, 2020, October 25). Political events were carried out in five states, namely, Assam, Kerala, Puducherry, Tamil Nadu and West Bengal for assembly elections, which eventually witnessed high rising cases of COVID-19. These selfish and self-centred behaviours had significantly contributed to negative externalities to social welfare and increased number of COVID-19 positive cases.

Uncertainty of livelihood has also played a negative role in maintaining or following different Government's orders during the pandemic. For instance, when the first lockdown was declared, the migrant workers gathered in large groups in various railway stations, bus depots violating social distancing norms, not wearing masks etc. For example, hundreds of unregistered migrants gathered near the Bandra station in Mumbai to board Shramik Special trains to reach their destinations (The Times

of India, 2020, May 19).

The rush of COVID-19 has caused mass emergencies, leading to higher demand for essential commodities, which ultimately lead to hoarding and black marketing. Some individuals were making an unusual profit at the cost of others' welfare; it has created many external diseconomies among the vulnerable groups. Various cases support these social costs, such as the cops have booked cases for hoarding of clinical hardware and black marketing, which had created deficiency of clinical supplies, masks and other essential commodities. These selfish behaviours had significantly contributed to create negative externalities to social welfare.

Various evidence supports these assertions, such as the cases related to hoarding of medications, injections, and oxygen cylinders. Likewise, the police have captured 140 black marketeers, 450 vials of Remdesivir injections, 285 oxygen concentrators, and 242 oxygen cylinders were seized. Further, the Delhi Police found that ambulances were charging patients up to Rs. 1 lakh per trip under the Prevention of Hoarding and Profiteering Bill, 2010 (The Hindu, 2020, April 9).

The Delhi Police sources disclosed to the media that the racket was occurring on an enormous scale. While vials of Remdesivir were sold at Rs. 2,500, the Tocilizumab injections were being sold at costs between Rs 7 lakh and Rs 10 lakh. The actual cost of a Tocilizumab vial is at around Rs 40,000. The cost of Remdesivir was dropped to around Rs 899 after the solicitation of the Center. In the interim, in Karnataka, 90 individuals were arrested for selling Remdesivir in the black market and cases were filed against 38 people for packing fake Remdesivir (The Hindu, 2020, April 9). It was also tracked down that people had made fake websites of the Health Ministry and were offering COVID-19 antibodies at Rs 4,000 and the police tracked them down through these sites (The Hindu, 2020, April 9).

During this pandemic, unfamiliar selfish practices and various opportunistic behaviours like selling products at high cost and hoarding products have ultimately tolled the weaker section of society. Such opportunistic behaviours were spreading faster than the virus. To mention a few, medical shops were hoarding essential drugs like Azithromycin, Ivermectin, Remdesivir. Digital thermometers and pulse oximeters, which generally cost around Rs.100 and Rs.1000 respectively, were sold for Rs.200 and Rs. 3000 respectively. Moreover duplicate pulse oximeter were also being sold, showing pulses of non-living things like wood, pens etc. (India TV News, 2020, July 30). The media also reported the selling of duplicate products of N95 masks and sanitisers (India Today, 2020, March 15). The tragic black marketing of oxygen and Remdesivir drug have been reported by several media in India. In many places, ambulances were charging an illegitimately high price to carry COVID-19 positive patients despite strict Government's orders for fixed rates (India Today, 2021, May 4). The Government should play an important role here to control such malpractices. But what if the Government acts selfishly? The country has witnessed influential Government leaders making political rallies during this pandemic with a massive number of unmasked people and with absolutely no social distancing (The Print, 2021, April 6). Such behaviour might have brought them political gain with a considerable cost to society. The Government supported the religious anxiety during the pandemic, as we can see that from January to April, 2021 nearly 9.1 million pilgrims took the holy dip in sacred the Ganga river (Scroll, 2021, June 12). These events worked as a super spreader and might be responsible for the second wave.

Need for Social Solidarity

According to Durkheim, solidarity represents shared beliefs (sentiments) and practices that involved

acting and feeling guided by a set of values and common norms of behaviour (Evans and Evans, 1977). Roblain et al. (2020) has explained the solidarity in volunteerism, supporting the marginalised population, political activism or collective actions. The pandemic calls for social solidarity at the community, country, and global level because it may act as the primary key to controlling the pandemic. The emergence of social solidarity may encourage people to act for social welfare instead of their personal interest; with this, individuals may pay more attention to public health concerns and encourage people to maintain Government orders related to pandemic. The Government and the Civil Society have a vital role in developing such solidarity feeling among the citizen of the country during the pandemic.

Role of Government

The Government should play a critical role in the reduction of selfish behaviours during the pandemic. Support to the poorer section of society during the pandemic will create a positive mindset among the beneficiaries that the Government is thinking about them during the pandemic; therefore, they will respect the Government rules, regulations and advice. The Government of India has taken numerous initiatives for supporting the poor. An amount of Rs. 1.70 lakh crore under the Pradhan Mantri Garib Kalyan Yojana (PMGKY) for providing free food grains, LPG for cooking, and cash transfer for a minimum of three months and protection for frontline healthcare service workers (Shahare, 2021; The Economic Times, 2020). In April, the public authority reported that 330 million poor individuals have been helped through money transfer adding up to USD 4,129 million under Prime Minister's Poor Relief Scheme (PMGKY). Under this scheme, 392.7 million individuals got free food grains, and 26.6 million LPG cylinders were dispersed under the PMUY scheme (All India Radio News, 2020). These Government assistance programs have significantly helped in reducing the selfish behaviour among poor people. The person to whom such facilities have been provided will have some decency not to come out unnecessarily, maintain the Government guidelines like social distancing, wearing masks etc. Therefore, these Government schemes have impressively reduced the feeling of self-orientation. However, the benefits of these schemes were not evenly filtered down to the vulnerable groups; in the conditions of self-interest and opportunistic behaviour, circulation and availability of essential commodities to the general population have become critical. Such corruption during the pandemic should be dealt with concrete measures.

The Essential Commodities Act (ECA), 1955 found to be very important during this pandemic. This act regulates cost gouging practices for essential commodities recorded in the schedule, such as drugs, groceries, petrol and so forth. Recently, the Ministry of Consumer Affairs, Food and Public Distribution ordered to add surgical and N95 masks and hand sanitisers to the essential commodities. The costs of 2ply and 3ply surgical masks, hand sanitisers and crude materials utilised for its manufacturing were fixed. The repudiation of this order is a cognisable offence and can prompt detainment of as long as seven years with fines (The Hindu, 2020, March 13). For instance, an owner of a fair price shop was arrested from Northwest Delhi, for violating the Essential Commodity Act and selling around 1000 quintal food grains after duping innocent ration card holders (The Indian Express, 2020, July 12).

Under the Prevention of Black Marketing and Maintenance of Supplies of Essential Commodities Act, 1980 (PBMSECA) the ECA had offered power to the Government to give orders for confining any individual if he/she has acted in a biased way to maintain the supply of essential commodities or has gone against the provision by dealing the essential commodities with the end goal of making profits (Mondaq, 2020, April 30). For instance, from a restaurant at Delhi's Lodhi Colony, 419 oxygen concentrations were recovered (India Today, 2021, May 6). Delhi based men were arrested for the black marketing of Remdesivir at the exorbitant price of Rs.35,000 – 50,000 (ANI, 2021, April 30).

Competition Act, 2002: This contains adequate deterrence to cost gouging practice. It forbids competitive agreements related to the supply and distribution of products between distributors and retailers involved in price gauging. It also restricts manipulative practices like imposing unfair and discriminatory prices. For instance, private hospitals had charged Rs. 70,000 for a day in an isolation room for the COVID-19 positive patients (The Hindu, 2020, May 6).

Only a few occurrences of over-charging and black marketing of essential commodities in the country so far has been dealt by the police under the above mentions acts, however the situation is improving with the reduction in COVID-19 positive cases.

Role of Civil Society

In India, civil society organisations like humanitarian organisations, advocacy groups, religious communities and community-based organisations play a vital role in bridging the gap between the Government and the people in need. They identify the actual need for the grass root and supplement Government services. Sometimes they provide complementary services in untouched and marginalised areas where the Government is not able to reach. Knowing the importance of civil society organisations, the Prime Minister of India called on civil society organisations to support the Government by creating awareness on protective measures for COVID-19 and supplying necessities including medicines to the people in need. The civil society organisations in India responded very promptly during the lockdown. They are still working for the affected populace for providing food, medical help, psychological support and for bringing transparency in Government support services during the pandemic (PIRA, 2020).

Maintaining up hygiene and well-being has been promoted as a prudent step, encouraging individuals to stay safe and keep up physical distancing. Individuals were asked to utilise masks and sanitisers, but what about the families who couldn't even afford a one-time meal? Therefore, such families were given health packs comprising of masks, sanitisers/cleanser. Frontline health care workers and volunteers were given Personal Protection Equipment (PPE) or health care gear to lessen their exposure to the infection, who couldn't bear to purchase the health care packs. At the same time, some worked on transportation, including providing train tickets and transport services to the migrant labourers or inter-state workers who needed to move back to their places of home due to different compulsions. Other than these, families across the nation too added to support the livelihood of the working populace, particularly domestic workers. They were paid their month to month pay ahead of time with the goal that they could keep their family running and keep up their purchasing power, particularly for fundamentals like foods and medicines.

During this pandemic, a new form of social solidarity has emerged; various organisations, individuals who normally were not engaged to relief work (e.g. different community-based clubs and youth groups), have extended their hands to help the vulnerable families. The sense of morality also plays an important role in maintaining solidarity amongst the people. Various networks of volunteers have committed and engaged themselves, one of the striking features is that, among these volunteers, many of them were from vulnerable groups, they have their own families to take care of, but they have come forward with their selfless behaviours and dedicated towards social benefits.

It is a well-known fact that risk of corruption increases during the crisis and this is also true for civil society organisations. The president of a Hyderabad based NGO was arrested for collecting donations from people on the pretext of assisting COVID-19 patients and subsequently diverting the funds to his

personal account (The New Indian Express, 2020, 30th July). The Government has passed numerous schemes, mentioned above, but one of the major constraints is 'corruption', the amount sanctioned doesn't reach the lower strata of the society, therefore, for instance, the oxygen cylinders and medicines that the Government brings for the use in the public health facilities, are diverged towards the black market, which ultimately did not facilitate the vulnerable group. Civil society organisations should maintain transparency in their work and work to ensure that funds that have been released (irrespective of Government, Donor agency, corporates) to tackle the Covid-19 pandemic should reach the end beneficiaries.

Conclusion

Thus we can conclude that even for their interest, people should act selflessly during this pandemic; otherwise, in the long run, they have to pay the cost of their selfish behaviour. This is a very crucial time for all of us. It is high time to support each other, creating social solidarity rather than benefiting ourselves on the social cost of others. In addition to fighting with Covid-19, society should also fight against selfish behaviour and social exclusions. All development partners like the Government, Civil Society Organisations, Corporates etc., should build up collective consensus on their actions to fight against the Covid-19 and social evil. Building up social solidarity will motivate people to take collective measures to reduce social cost and improve social welfare. The vaccine will create an antibody against the virus, and the social solidarity will protect our social values and moralities which are very important to fight against the current crisis.

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