Cultural Defaults in the Time of COVID: Lessons for the Future

Hazel R. Markus[1]
Jeanne L. Tsai
Yukiko Uchida
Angela Yang
Amrita Maitreyi

Stanford University
Kyoto University

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[1] Corresponding author: Hazel Rose Markus, Department of Psychology, Stanford University, hmarkus@stanford.edu

Abstract

During the COVID pandemic, the East Asian countries of Japan, Taiwan, and South Korea outperformed the United States in responding to and controlling the outbreak of an unknown and potentially deadly virus. While multiple factors contributed to this disparity, we propose that a comprehensive understanding of this difference requires attention to the *culturally-linked psychological defaults ("cultural defaults")* that pervade these contexts. Cultural defaults are "common sense," rational, taken-for-granted ways of thinking, feeling, and acting in particular contexts. The evidence for the defaults we identify have been documented in decades of cultural psychology research comparing European American with East Asian respondents. To emphasize the relevance and significance of this science for the public interest, we propose that these cultural defaults likely played an unmarked but powerful role in divergent national responses and outcomes during the unfolding pandemic. In the United States, the cultural defaults particularly relevant to the pandemic response include *optimism-uniqueness; single cause; high arousal; influence and control; personal choice and self-regulation; and promotion*. In Japan, Taiwan and South Korea, these defaults include *realism-similarity, multiple cause; low arousal; wait and adjust; social choice and social regulation; and prevention*. Here we synthesize the research supporting these defaults and illustrate how they were evident in the announcements and speeches of high-level government and organizational decision-makers as they addressed the existential questions posed by the pandemic, including "Will it happen to me/us?", "What is happening?" "What should I/we do?", and "How should I/we live now?" Our goal is both theoretical and practical: to specify some of the why and how of cultural influence and its potential impact and to outline the potential significance of cultural defaults for decision and policymakers. We provide guidelines for how they might take account of these (and the many other still-to-be identified cultural defaults of other contexts) as they design policies to address urgent, novel and complex threats including future pandemics, climate change, and emerging technologies.

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It's going to disappear. One day—it's like a miracle—it will disappear. (Former U.S. President Donald Trump, February 27, 2020, as cited by Piacenza, 2020)

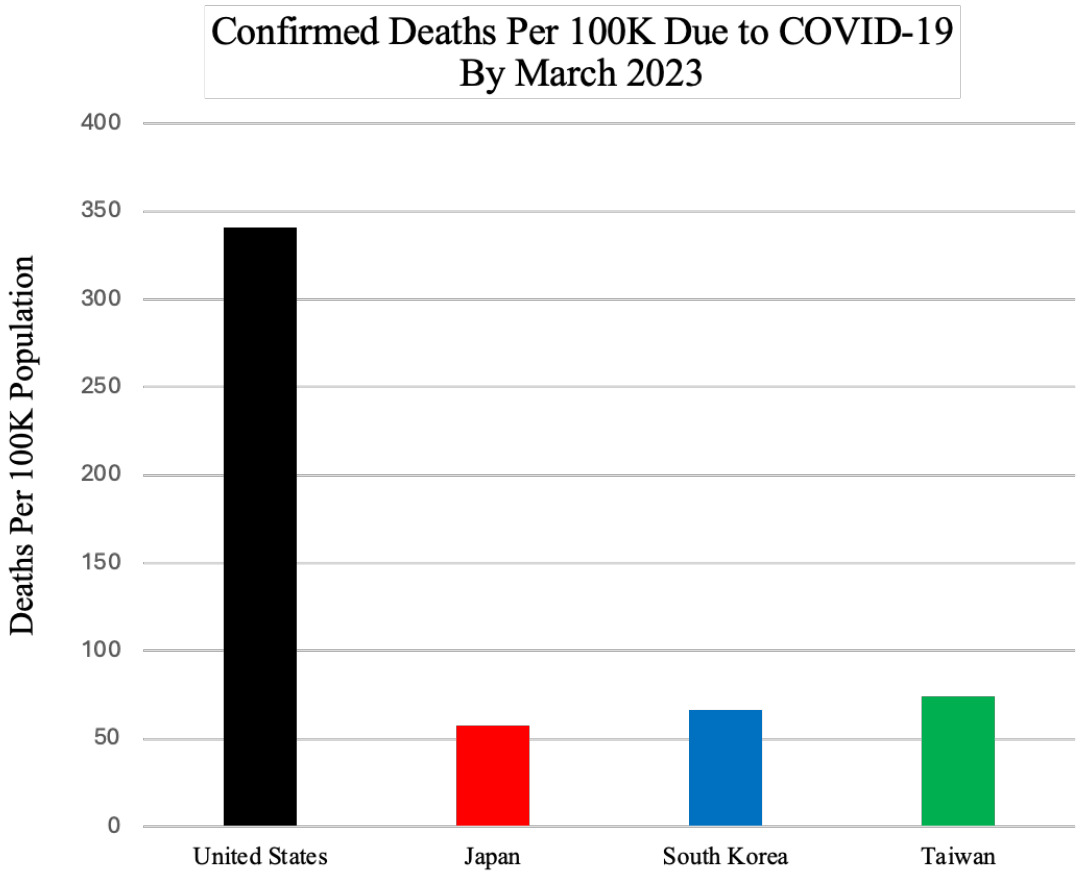
Citizens are asked to remain calm, maintain their normal daily lives, stay tuned for outbreak information provided by the government, and strengthen their personal hygiene routines. (President of Taiwan Tsai Ing-wen, January 22, 2020, as cited by Office of the President, Republic of China (Taiwan), 2020)

I do think we need to understand better how — in the current climate — people make decisions… To have now 60 million people still holding off of taking advantage of lifesaving vaccines is pretty unexpected. It does make me, at least, realize, "Boy, there are things about human behavior that I don't think we had invested enough into understanding." (Francis Collins, former director of National Institutes of Health, Science advisor to U.S. President Joe Biden, December 7, 2021, as cited by Simmons-Duffin, 2021)

No other event since WWII has had such profound effects on so many people across the globe. As the COVID pandemic unfolded, many aspects of human behavior were in high relief—our tendencies to justify and explain, to blame and shame, but most of all, our shared and individual needs to make sense. The pandemic was uncharted territory for people and organizations everywhere trying to maintain their usual activities, and a unique challenge for behavioral and psychological scientists and policymakers working to explain, motivate, predict, and influence behavior. What would happen as people were encouraged or scared into doing things they didn't normally do, didn't want to do, on account of something that was new, and they had good reason to fear?

Around the world, the unfolding events of the pandemic were similar in many respects. Once people and their leaders understood that COVID was a clear and present danger, governments and public health systems scrambled to respond. People were encouraged to wear a mask, minimize social contact, test, sanitize, and vaccinate. And yet the ostensibly "same" pandemic advice and activities seemed to carry different—maybe even opposite—meanings in different cultures, which likely led to different actions and outcomes. As an example, and our focus here, East Asian countries like Japan, Taiwan, and South Korea outperformed the United States in responding to and controlling the COVID pandemic. As Figure 1 shows, by March 2023, more than three years after the beginning of the pandemic, the number of COVID deaths per 100K population in the US was 5.9 times higher than that of Japan, 5.1 times higher than that of South Korea, and 4.6 times higher than those of Taiwan (Johns Hopkins Coronavirus Resource Center, 2023). That translates into 1.1 million deaths in the US, 73 thousand deaths in Japan, 17.7 thousand deaths in Taiwan, and 34.1 thousand deaths in South Korea.

Figure 1. Confirmed Deaths Due to COVID Per 100K by March 2023. From Johns Hopkins Coronavirus Resource Center (2023).



Could these different outcomes be related to different response styles during the pandemic? Indeed, there are notable aspects of how the governments in Taiwan, South Korea, and Japan responded. Early in January 2020, almost immediately after learning about the existence of a new virus in Wuhan, China, the Taiwanese and South Korean governments started screening travelers for symptoms at the national airports. The Taiwanese government launched a nation-wide campaign of mask wearing, quarantining, testing, contact tracing, and restricted large gatherings, while the South Korean government rapidly worked with the private sector to develop and distribute diagnostic tests and to implement an extensive testing and contact tracing program (Kim, 2020; Wang et al., 2020; Su & Han, 2020). Based on analyses by a government task force, Japan launched the "sanmitsu" regulation (三密; translated for English speakers as the "3Cs") in which Japanese were urged to avoid situations that included closed spaces with poor ventilation, crowded places with groups of people, and close-contact settings (The Government of Japan, 2020). Notably, none of these governments imposed a nation-wide lockdown or stay-at-home orders.

Now consider the United States: Although three major airports screened for travelers coming from Wuhan and other areas in January 2020, most did not, and a nation-wide campaign of mask wearing, quarantine, or testing was never launched. Mandates were implemented by

state and local governments that involved closing "non-essential" businesses and encouraging people to stay at home except for "essential" needs such as buying groceries and seeking medical care (Mervosh et al., 2020). While many Americans complied with these initial mandates, many did not, and many initial mask-wearers quickly grew weary of them. Most distinctively, the US government in collaboration with the pharmaceutical industry launched "Operation Warp Speed" to develop a vaccine and accomplished this in record time.

How do we explain these stunning differences in response and outcome? There are, of course, major differences between the U.S. and Japan, South Korea, and Taiwan.[2] Compared to these East Asian countries, the U.S. is bigger in size and has a different ecology, a more diverse and younger population, a more fragmented public health system, greater income and racial inequality, a higher prevalence of comorbidities, a growing distrust between people and government, and less experience with face masks or with highly transmissible diseases. Moreover, at the start of the pandemic, the U.S. was more politically divided than these East Asian countries, and it had a particularly polarizing national leader. All these factors were likely crucial and played some role at different points in the crisis (e.g, The Covid Crisis Group, 2023). Yet, we suggest here that none of these factors, alone or in combination, can tell the full story about life during COVID without appreciating the influence of culturally-linked psychological defaults ("**cultural defaults**") on how individuals and organizations understood, responded, and now remember the pandemic. As Francis Collins, quoted above, said when he stepped down as Director of the National Institute of Health, much more attention needs to be paid to understanding human behavior and decision making. Based on decades of research in cultural and cross-cultural psychology, we argue here that cultural defaults are central to this understanding of human behavior and decision making.

In the US American context, the constellation of cultural defaults particularly relevant to the pandemic includes: (1) abundant optimism and a sense of uniqueness; (2) a sharp focus on single factors–individuals or groups–as causal forces, (3) an inclination and valuation of higher arousal; (4) an orientation to influencing and taking control; (5) an insistence on personal choice and self-regulation; and (6) a focus on promotion and the future. In contrast, while acknowledging that each East Asian country has its own unique characteristics and cultural differences, in many East Asian contexts, the constellation of cultural defaults relevant to the pandemic includes: (1) realism and an awareness of similarity to others; (2) an holistic focus on multiple factors as causal forces; (3) an inclination and valuation of lower arousal; (4) an orientation toward waiting and adjusting; (5) a preference for social choice and social regulation; and (6) a focus on prevention and preserving the past and its relationship to the future. These two default constellations form the basis of common sense and what is rational in their respective contexts, and as we illustrate here, were likely foundational for meaning-making during the pandemic and its aftermath.

[2] An analysis of East Asian defaults might reasonably include mainland China. However, because data regarding COVID cases and deaths as well as press reports from mainland China were largely unavailable during the first two years of the pandemic, we do not include China in this analysis.

Background and Goals

Analyses by social and cultural psychologists as well as many other social scientists have already begun to reveal the influential role of various dimensions and facets of national culture in the course and outcomes of the pandemic (e.g., Bayeh et al., 2021; Chen & Biswas, 2023; Kitayama et al., 2022; Cheek et al., 2022; Gelfand et al., 2021; Van Bavel et al., 2020; Conway et al., 2022; Webster et al., 2021; Huang et al., 2022). For example, the death rates in individualist countries were generally higher than in collectivist countries in part because people in more individualist countries were less likely to follow social distancing rules (Feng, Zou & Savani, 2022), to wear masks (Lu et al., 2021; Helliwell et al., 2021), and to adhere overall to epidemic prevention measures (Maaravi et al., 2021). A recent synthesis of evidence relevant for policymaking collected during the pandemic found strong correlational evidence that nations where freedom is prioritized over security (Adams & Estrada-Villalta, 2017) had relatively greater difficulty coordinating people in the face of a pandemic (Ruggeri et al., 2023). In addition to the individualism-collectivism dimension, people in higher uncertainty avoidance cultures showed high vaccine hesitancy, partly as a function of concern over vaccine side-effects (Lu, 2023). Nations classified as "tighter" (e.g., Japan, South Korea, Taiwan, Singapore and Vietnam) on a scale that assesses the extent of strict social norms and punishments, were more likely to endorse and adhere to COVID-related norms, and had more success limiting the numbers of cases and deaths than did nations categorized as "looser" (e.g., USA, Spain, Italy, Brazil) (Gelfand et al., 2011; 2021; 2023; Liu et al., 2023). In addition to tighter norms, cultural contexts with fewer material resources, lower economic standing, less mobile social relationships (Berkessel et al., 2022; Salvador et al., 2020; Thomson et al., 2018) more familism (Schwartz et al, 2010), and greater participation in traditional rice farming practices (Talhelm, et al. 2022) were also associated with better control of COVID.

These studies importantly demonstrate the links between specific cultural dimensions and COVID-related behaviors, but they do not address *how* these national differences in individualism-collectivism and other cultural dimensions were experienced psychologically during the "same" threatening event. How did these dimensions and constructs (e.g., Hofstede, 1980, Markus & Kitayama, 1991; Triandis, 1989, 1995) translate into experience-near, culture-specific ways of thinking, feeling, and acting?[3] To answer this question, we define a constellation of cultural defaults that was particularly evident in the U.S. and a different

[3] These questions emerged during our conversations as the pandemic unfolded, beginning in person in January of 2020, when Yukiko was a Fellow at Stanford on a Center for Advanced Study in the Behavioral Sciences (CASBS), and continuing on Zoom after CASBS closed in April, 2020, and Yukiko returned to Japan. This dialogue continued for the next three and a half years, including the Fall of 2022, when Jeanne spent a quarter in Kyoto teaching in the Stanford Bing Overseas Study Program (right before Japan re-opened to tourists), and July 2023, when Hazel and Yukiko presented this work at the Asian Social Psychology Association in Hong Kong (Jeanne joined on Zoom). In our conversations, we tried to make sense of the pandemic by asking each other the questions that everyone was asking: *What was happening? Will it happen here? Why was it happening?* and *What should we do?* We were impressed by how different Yukiko's answers were from Jeanne and Hazel's, and very quickly, our questions turned comparative: *Why didn't Japanese seem as riled up over the pandemic compared to the U.S.? Why were Americans so focused on trying to find out whose fault it was compared to Japanese? Why was it so easy for Japanese and other East Asians to wear masks but so difficult for many U.S. Americans?* We were able to use our knowledge of decades of research in cultural and cross-cultural psychology to answer these questions, but we were struck by the fact that policy makers appeared to have little knowledge of this literature. This insight motivated us to write this paper, with the hope that policy and decision makers could leverage cultural defaults to better prepare for and respond to current and future crises.

constellation of defaults that was apparent across a number of East Asian contexts during the pandemic. In the process we unpack the individualist-independent orientations of the U.S and the collectivist-interdependent orientations of Japan, Taiwan and South Korea to examine how these significant cultural dimensions were realized in behavior in these contexts during the pandemic. Knowledge of these cultural defaults (and many others still to be identified) can guide decision and policymakers across domains as they formulate recommendations, design programs, and craft narratives for interventions in their own contexts and facilitate understanding of sometimes mystifying behavior in contexts outside their own.

The goal motivating this three-part paper is simultaneously theoretical and practical (Berkman & Wilson, 2021). In the first part, we introduce the concept of *cultural defaults* and distinguish them from other related concepts. We then explain how these cultural defaults reflected and reinforced independent models of agency in the U.S. and interdependent models of agency in East Asia. The cultural defaults, briefly defined in Table 1, are grounded in an abundant empirical literature in cultural psychology which examines European-American and East Asian psychological tendencies. In the second part, we synthesize this literature and demonstrate how these specific cultural defaults were evident in the public responses of high-level public officials and organizations in the U.S. and in the East Asian countries of Japan, Taiwan and South Korea during the pandemic. We draw from mainstream media observations, reports, quotes from high level public figures, as well as analyses by journalists, academics and other observers and commentators in the U.S. and parts of East Asia from the early days of the pandemic through December of 2023. We demonstrate why particular pandemic behaviors were rational and made sense in one cultural context but were much less so in another. Our argument is that these cultural defaults, especially when considered together, could have forecast many of the striking differences in pandemic responses and outcomes between the U.S. and the East Asian countries that are the focus here. In the third part, we discuss how decision and policy makers, as they become aware of the cultural defaults that comprise common sense in a given context, can take account of them (and others to be identified) when planning for the next pandemic and when addressing other demanding and urgent global crises such as climate change.

I. What Are Cultural Defaults?

We call culturally-shaped psychological tendencies *defaults* because they reflect common sense, rational, status quo and well-practiced ways of being—habits of thinking, feeling, acting— that appear to operate automatically. They are taken-for-granted, psychological "go-to's" that feel right and guide much of everyday individual and collective behavior. They take form as interpretive structures or powerful generalized schemas that orient attention, contour feelings, lend meaning and cognitive structure, generate expectations, motivate and regulate action, guide inferences, organize memory, and scaffold many features of everyday behavior. They are essential for meaning-making and for social coordination (For related research using the term "default" and other closely related ideas see Thaler & Sunstein, 2008; Shimizu, Lee & Uleman, 2017; Miller et al., 1991; Cheryan & Markus, 2020; Hamedani et al., 2023; Kim & Lawrie, 2019; Tsai, 2007; Markus & Kitayama, 1991; Thomas & Markus, 2023; Kashima et al., 2013; Johnson & Goldstein, 2003; Higgins, 2008).

They are *cultural* defaults because they are widely shared, content-infused, and more commonly observed in some cultural contexts than others. They are reflected and reinforced in

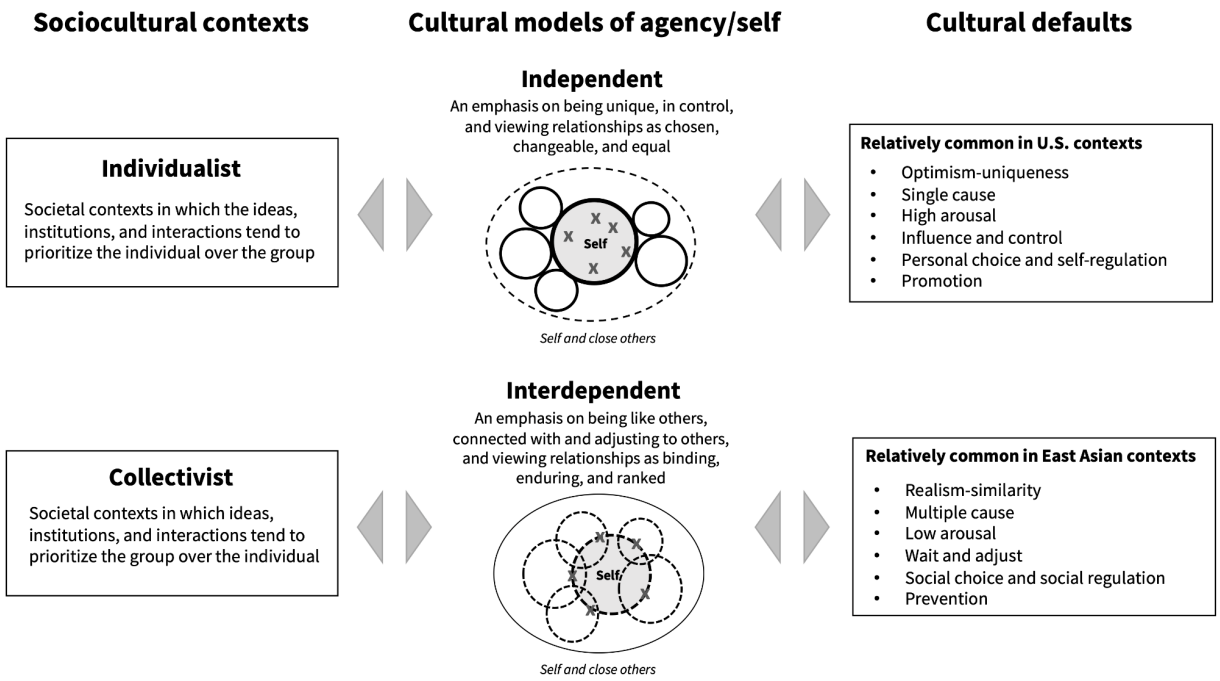
pervasive ideas and values, in formal institutional practices and policies, in everyday interactions, in artifacts, and in many (although not all) individual psyches, and are regarded as standard and normal. Individuals within a particular cultural context may vary in their awareness and expression of these defaults, but to some degree, most people respond to or contend with them in some way. Moreover, as people participate in their cultural contexts, their behavior as individuals and in concert shapes and reproduces these contexts, referred to as a process of "mutual constitution" (Shweder, 1990) or as "the culture cycle" (Markus & Kitayama, 2010; Markus & Conner, 2014; Hamedani & Markus, 2019). "Culture" or a "cultural context," as we use the terms here can be broadly defined as a socially meaningful system of shared ideas and practices that structure and organize individual, interpersonal and institutional behavior at multiple, reinforcing levels (For more detailed discussions see Chiu & Hong, 2013; Cohen, 2013; Heine, 2020; Morris et al., 2015; Adams & Markus, 2004; Gelfand & Kashima, 2016; Kroeber & Parsons, 1958; Fiske, et al., 1998; Leung et al., 2011).

Cultural defaults then are *not* inherent traits or fixed human tendencies. They do not arise because of human cognitive limitations and are not best characterized as shortcuts or biases (e.g., Kahneman, 2011; Kunda, 1990) to be mitigated. They are not deviations from a consensual standard of neutral, logical or rational behavior. Instead, they are historically-derived, psychological and behavioral tendencies that stem from participation in particular cultural contexts and that encode socially inherited distal values and moral commitments about how to be and how to live. Cultural defaults share many functions with beliefs, attitudes, mindsets, behavioral scripts, implicit theories, and norms. Yet as we characterize them here, they are generalized behavioral tendencies, in many cases tacit and embodied, and often without clear referents or specific guidelines for behavior. Individuals and organizations tend to be completely unaware of the psychological defaults common to their own cultural contexts, or those of others, until they run into different ones, or until an event like a pandemic universally disrupts everyday life and results in strikingly different outcomes across the globe. As a result, in contrast to the role of cognitive biases that are widely known by decision-makers in multiple domains (e.g., see *Harvard Business Review*, 2023 for a recent review) the behavioral significance of cultural defaults has not been examined in depth or applied to policy making.

In this comparison of pandemic-related behavior, we focus on cultural defaults associated with national level cultural contexts as the unit of analysis. Of course, these contexts intersect with other significant cultural contexts, including ethnicity, race, social class, gender, religion, political orientation, generation, and region of the country (many of which are associated with defaults of their own), to influence behavior.

While variation in the number of COVID-19 deaths indicates that some nations were indeed better equipped to respond to this particular crisis than others, we do not suggest that one set of cultural defaults is generally "better" or "worse" than another. Both default profiles outlined here carry historically-derived cultural wisdom and have been adaptive and useful across a wide range of situations in the past. In the process they have been valued and rewarded and become the basis of common sense. Yet the consequences of behaving in line with these defaults will depend on when and how they are applied and the nature of the problem or crisis to be addressed.

Figure 2. Conceptual model relating sociocultural context to cultural models of agency, and cultural defaults most relevant to the pandemic



Note: Sociocultural context includes the socially meaningful systems of shared ideas and histories (e.g., religious ideas, values, practices), laws and policies of associated institutions (e.g., governments, economic, legal, and educational systems, media), and the patterns of everyday interactions with people, groups, and products (e.g., family, workplace, social media) common in these contexts. Although depicted here as separate, many sociocultural contexts reveal a blend of individualist and collectivist ideas and independent and interdependent understandings of agency. **Cultural models of agency/self** are the different ways of acting in the world based on different understandings of how to be an agent or a self and how to relate to others that develop and are reinforced in different social contexts. The X's depicted in the models of agency refer to particularly salient components of self and agency. These are preferences, beliefs, and goals inside the person for independent agency, and relationships with close others, roles, and shared goals for interdependent agency. Overlapping circles indicate the inclusion of close others in one's self-construal. Dotted lines suggest more permeable boundaries, solid lines less permeable. **Cultural defaults** are culture-specific, taken-for-granted, well-practiced ways of thinking, feeling, and behaving that both reflect and promote independent and interdependent models of agency and the ideas and practices of individualist and collectivist contexts.

Where Do Cultural Defaults Come From?

The pandemic-relevant psychological defaults we identify here can be linked to the underlying cultural models of agency that pervade these contexts, as shown in Figure 1. Cultural models of agency are enduring and philosophically-rooted foundational meaning systems that provide the right, valued, moral, and/or normal answers to existential questions of "Who am I/ Who/are we?" and "What should I/What should we be doing?" and that lend structure and form to institutional, organizational and individual behavior (e.g., Bruner, 1990; D'Andrade & Strauss, 1992; Li, 2023, 2024; Kashima, 2019; Markus & Kitayama, 1991; Miller, 1999; Greenfield, 1997; Shweder & LeVine, 1984; Shweder 1990; Stigler et al., 1990*).* Agency refers

to acting in the world, and these understandings of *how* to "be agentic" (or how to be a person or self, and how to relate to others and the social context) vary with cultural context.[4]

The cultural defaults common in the U.S. are afforded by the prevalent ideas and practices of models of *independent* agency, whereas those common in East Asia are afforded by the prevalent ideas and practices of models of *interdependent* agency. Although the tasks of independence and interdependence are universal, cultural contexts vary in how they understand and accomplish these tasks, how they weigh their relative significance, and how they balance them with many other cultural affordances and requirements. Models of agency are cultural in that they derive from a confluence of different ecologies, histories, philosophies, religions, and are reflected in and reinforced at the macro level by the common narratives that people and nations tell about themselves; in the practices and policies of organizations and institutions; in many public symbols, artwork, music, books, movies and social media; in the structures of labor and social networks; in many patterns of everyday social interaction and daily practices; and also at a more micro level, in the psychological tendencies of individuals (e.g., Kroeber & Parsons, 1958; Shweder et al., 2007; Lewis, 1995; Greenfield & Cocking, 1994; Markus & Kitayama, 1994; Rogoff, et al., 1993; Wang, 2004; Lebra, 2004, Markus & Hamedani, 2019, Cohen & Kitayama, 2020; Li, 2012; Markus & Conner, 2014).[5]

Independent models of agency

In contexts that are individualistic and prioritize the individual over the group (e.g., Cohen & Kitayama, 2020; Hofstede, 1980, Markus & Kitayama, 1991; Hamamura et al., 2018; Vignoles et al., 2016; Krys et al., 2022; Henrich et al., 2010) like the U.S., a person is widely understood as a separate, *independent* and "free" agent or being who makes their own choices about how to behave. Thus, being agentic in the U.S. means expressing personal preferences, goals, and values; and exercising rights to control one's own behavior and outcomes. Behaving independently by asserting one's beliefs and acting on them is a signal of authenticity. It is the unspoken natural, valued, healthy and moral way to be in the U.S., and often takes precedence over concerns for the impact of one's actions on others. Other people matter, as do situations and groups, of course, but an ever-present ideal and current concern is that they should not interfere with or disempower the individual (Markus & Kitayama, 2003; Markus et al., 2006; Hamedani et al., 2013; Tsai & Clobert, 2019; Kitayama, et al., 2007; Kitayama & Uchida, 2005; Fiske et al., 1998; Triandis, 1989).

Independent models of agency in the U.S. have multiple and deeply intertwined roots, starting from the Protestant Ethic, or the idea that the individual could form a personal relationship with God without the church as an intermediary; social and political thinkers who

[4] The cultural defaults we characterize here as "U.S. American" are likely to be pervasive in the ideas and practices of mainstream American (i.e, European-American or White) contexts and in the behavior of people who have spent most of their lives in these contexts. There are of course many other American contexts (e.g, minoritized) in which some of these cultural defaults may be less evident because of exposure to other cultures (see Brannon et al., 2015; Markus 2017; Stephens et al., Markus & Conner, 2014).

[5] For characterizations of agency in other national contexts as well as other types of cultural contexts see: Hofstede, 1980; Vignoles et al., 2016; Krys et al.; 2022, San Martin et al., 2018; Salvador, et al., 2024, Markus, 2017; Thomas & Markus, 2023; Adams, 2005; Markus & Conner; 2014; Minkov, 2013; Mesquita, 2022; Kitayama, Salvador et al., 2022.

idealized individual freedom and self-reliance; the notion of the American Dream; and a capitalist economic system. Indeed, the Declaration of Independence is a public expression of the independent model of agency. This foundational text asserts that "all men are created equal, that they are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness." The new American government was created to secure these individual rights. After laying out the three branches of government in the Constitution, the nation's founders immediately ratified the Bill of Rights out of concern that the Constitution did not do enough to protect individuals from potential government overreach. Independent agency is maintained and fostered through governmental and legal systems that protect individual rights, and educational and family systems that promote autonomy, personal choice, and self-expression. For detailed analyses of the many interrelated historical, political, and social sources of U.S. American tendencies toward independence, see Bellah et al., 1985; Friedman, 1990; Markus & Kitayama, 1994; Sanchez-Burks, 2002; Shweder & Levine, 1984; Shweder et al., 2007; Triandis, 1989; Henrich, 2020; Weber, 2002; Kitayama et al., 2010; Marsella et al., 1985. A U.S. independent model of agency is manifest in behavior through specific and common-sense ways of thinking, feeling, and acting. Here we focus on the six defaults particularly relevant to the pandemic, listed in Table 1A. Together these defaults reflect and reinforce a way of being *as somewhat separate and distinct from others.*

Interdependent models of agency

In contexts that are more collectivistic and tend to prioritize the group over the individual like many parts of East Asia (e.g., Hofstede, 1980, Markus & Kitayama, 1991; Hamamura et al., 2018; Vignoles et al., 2016; Krys et al., 2022; Henrich et al., 2010), a person is widely understood as a connected, *interdependent* being whose actions, as well as thoughts and feelings, are very often constructed *in-relation-to* important others. Thus, being agentic in many East Asian societies means adjusting to these encompassing social relationships, networks and situations, and fulfilling one's roles, responsibilities and obligations. People tend to be concerned with the demands of the situation and with avoiding the disapproval of others including their families, friends, and coworkers. Independence matters, of course, but restraining the self to fit with and be part of the encompassing whole or social order is an unspoken but valued, natural, healthy and moral way to be, and as such, often takes precedence over personal freedom, personal choice, and personal control (e.g., For further descriptions and analyses of interdependent agency see Hsu, 1953; Lebra,1992; Markus & Kitayama, 1991; 2003; Fiske et al., 1998; Bond, 2010; Markus et al., 2006; Kitayama et al., 2007; Tsai et al. 2007; English, Wang, Zhang, & Talhelm, 2023; Markus, 2016; Thomas & Markus, 2023; Hamamura et al., 2018).

Interdependent models of agency in East Asia have intertwined roots in Confucianism, Taoism, and Buddhism, which in different ways view individuals as parts of larger, encompassing social wholes rather than as free agents. From the perspective of Buddhism, everything is socially dependent. Nishida Kitaro, widely considered Japan's most influential philosopher, noted, "Although I am myself, I do not determine myself alone." Nishida stressed, "The self cannot be determined without relations to the outside" (Nishida, 1932; Uchida & Rappleye, 2024). In Confucian thought, the individual must be trained to behave morally within one's place in the social system (e.g., as a child, as a parent), and one's virtue depends on meeting the demands of one's roles and responsibilities in that system. Being an interdependent participant in these social systems is essential for well-being (Wei-ming, 1993). In East Asia,

many educational and family systems focus individuals on orienting toward collective norms, obligations, and expectations (Buchtel et al, 2018; Tobin, et al., 1989; Tobin et al., 2009). Legal systems focus on individual rights, but also on preserving relations among disputing parties and enforcing norms that prescribe high levels of public cooperation (e.g., Hahn, 1983; Baradel, 2021) (for detailed analyses of the multiple sources of East Asian tendencies toward interdependence see Doi, 1973; Marsella et al., 1985; Lebra, 2004; Fiske et al.,1998; Nisbett, 2003; Triandis, 1995). East Asian ideas of interdependence are realized through specific patterns of thinking, feeling, and acting. Here we focus on six defaults that were particularly relevant during the pandemic, listed in Table 1B. These defaults reflect and reinforce a sense of agency, a way of being *as somewhat similar and in-relation-to-important-others.*

II. How Did Cultural Defaults Shape Meaning-Making in Response to COVID?

Table 1 links U.S. and East Asian (with an emphasis on Japanese) responses to the pandemic to different cultural defaults associated with independent and interdependent models of agency. These links are organized by six major common existential questions prompted by the pandemic, as it unfolded over time, including "Will it happen to me/us?" "Why is this happening?" "How should I/we feel about it?" "What should I/we do?" "How should I/we respond to government guidelines?" "How should I/we live now?" For each question, we describe the relevant default in the U.S. and East Asia that it invoked, and then some commonly observed colloquial responses that reflect the default. Not all of the defaults were salient at each time point in the pandemic. In the following sections, we discuss each cultural default listed in Table 1 and its supporting empirical evidence (for recent reviews see Gelfand et al., 2022; Gelfand & Kashima, 2016; Hamamura, et al., 2018; Heine, 2020; Henrich, 2020;Cohen & Kitayama, 2020; Kitayama, Camp, et al., 2022; Krys, et al., 2022; Nisbett, 2003; Thomas & Markus, 2023; Tsai & Clobert, 2019; Uskul et al., 2023; Vignoles et al., 2016).

Table 1. U.S. and East Asian Cultural Defaults and Their Responses to COVID

A. Defaults Common in U.S. Contexts	B. Defaults Common in East Asian Contexts
Will it happen to me/us?	
Optimism-uniqueness Viewing the self (and the nation): - as likely to have more positive and less negative future outcomes - as special and unique *"It's not a big deal; it won't happen here; we don't need to worry about it. If it happens, we will be fine."*	**Realism-similarity** Viewing the self (and the nation): - as likely to experience a balance of both positive and negative future outcomes - as similar to others *"This is serious; I might already have it, and I don't want to spread it. We need to prepare now"*
Why is this happening to me/us?	
Single cause - Attributing the crisis to one cause, usually individuals or one group *"The virus started in China. COVID-19 is their fault."*	**Multiple cause** - Attributing the crisis to multiple causes, including themselves *"There are many factors, including globalization, Japan's economic dependence on China and other countries."*
How should I/we feel about this crisis?	
Higher arousal - Encouraging higher arousal (e.g., anger, enthusiasm) to assert and motivate self and others *"This isn't fair; I can't do what I want to do; I am frustrated, angry, and scared. I just want it to be over."*	**Lower arousal** - Encouraging lower arousal (e.g., calmness, quiet) to attend to others and the situation *"We are scared and worried but will be calm and see what happens next."*
What should I/we do?	
Influence and control - Exerting influence - Acting quickly - Taking control over the situation through individual action *"Do something to kill the virus as soon as possible."*	**Wait and adjust** - Waiting and adjusting - Refraining from making quick decisions - Referencing others and developing consensus before taking action *"Let's wait and see so that we can make a good plan."*
How should I/we respond to government guidelines?	
Personal choice and self-regulation - "Freely" choosing to do what I want - Motivated by personal preferences - Resistance to regulation by others "*No one—especially the government--can tell me what to do; I'll do it if I want to do it, but I won't do it just because you told me to."*	**Social choice and social-regulation** - Choosing to do what others want - Motivated by concern for others and social norms - Responsive to regulation by others *"We will cooperate and follow the guidelines because others are doing it, they expect me to do it, and we will all benefit."*
How should I/we live now?	
Promotion - Reframing the crisis as an opportunity for future positive outcomes rather than a threat *"COVID is over. Now, how can we change and create new and improved ways of working, learning, and connecting?"*	**Prevention** - Focusing on mitigating the negative outcomes of the crisis and preventing future crises *"COVID is still here, and we must live with it. How can we maintain current traditions and practices without spreading COVID?"*

Each of the following sections discusses one of the common existential questions prompted by the pandemic. For each question, we compare the default response to this question that was common in U.S. contexts with the default response common in East Asian contexts, review the relevant empirical literature, and provide examples of this default drawn from the rhetoric of high-level officials during the pandemic.

"Will it happen to me/us?"

At the end of 2019 and beginning of 2020, different reactions to news of a virus in China that could be highly transmissible and fatal were evident almost immediately, reflecting an *optimism-uniqueness* default in the United States and a *realism-similarity* default in Japan, Taiwan, and South Korea. Whereas optimism-uniqueness promotes distinction from others (in line with an *independent* model of self), realism-similarity promotes connection with others (in line with an *interdependent* model of self).

Optimism-uniqueness default: "It won't happen here, and if it does, we will be fine."

> *Obviously, you need to take it seriously and do the kind of things the (Centers for Disease Control and Prevention) and the Department of Homeland Security is doing.* ***But this is not a major threat to the people of the United States and this is not something that the citizens of the United States right now should be worried about.*** *(Dr. Anthony Fauci, Director of the National Institute of Allergy and Infectious Diseases, January 21, 2020)*

> *We have contained this. I won't say [it's] airtight, but* ***it's pretty close to airtight. He added that, while the outbreak is a "human tragedy," it will likely not be an "economic tragedy****." (Larry Kudlow, former Director of the National Economic Council, February 25, 2020, as cited by Imbert, 2020).*

As reflected in the comments made by prominent U.S. leaders, including Fauci, Kudlow, and of course, Trump, Americans were optimistic that COVID-19 would never hit their shores, or if it did, it would have minimal impact on American life. As an artist from Iceland who was visiting New York at the time observed in an interview with Elizabeth Kolbert of the *New Yorker*, "I'm not a news guy…but I knew what was going on here in Iceland, and I knew what was going on in Europe. And I was struck by how New Yorkers were so confident. They didn't believe it was going to happen, or, if it was going to happen, somehow it was going to be O.K." (Kolbert, 2020). Masks were not readily available in the U.S. in part because Americans have had little history with mask-wearing, and in part because strategic government planning was focused more on rapid responses to events of bioterrorism or bombing, and less on preparing for an enduring threat like a pandemic (Khazan, 2020; Kim, 2022).

Former President Trump and other U.S. leaders fed this optimism by referring to the coronavirus as the Democrats' "new hoax" (Trump, 2020, as cited by Egan, 2020). Indeed, in March of 2020, at the same time the WHO and CDC were sounding the alarm (McLaughlin & Almasy, 2020; Smith-Schoenwalder, 2020; Uscinski et al., 2020; Uscinski & Enders, 2020), 29% of American survey respondents believed that the threat of COVID was deliberately exaggerated to damage Trump's re-election. Even after Trump acknowledged the existence of COVID, he

expressed optimism and confidence that the U.S. would overcome it quickly, even if other countries did not.

> *One day we'll be standing up here and say, 'Well, we won.' And we're going to say that, as sure as you're sitting there,* ***we're going to win. And I think we're going to win faster than people think, I hope****,"* adding*," If we do this right, our country -- and the world, frankly -- but* ***our country can be rolling again pretty quickly****. (Trump, March 17, 2020, as cited by Cathey, 2020)*[6]

Of course, Trump was an unusual U.S. President on many counts, yet the deeply rooted American default of optimism (Keller, 2015) allowed the message that Americans were not only going to be okay, but that they would emerge victorious to resonate quickly and widely (Thomas et al., in press). A year later, this optimism and sense of uniqueness prevailed. In 2021, people in the U.S. along with other North Atlantic regions were still less afraid of contracting COVID-19 than people from East Asia (Sachs, 2021, p. 96), even though, for every 100k people, about 162 US Americans had already lost their lives compared to about 7 in Japan, 3 in South Korea, and 0.04 in Taiwan (Dong, Du & Gardener, 2020; United States Census Bureau, 2024; National Statistics: Republic of China (Taiwan), 2024). In the summer of 2022, in the face of COVID surges, 34% of Americans believed that COVID was over (Brenan, 2022), despite its continued prevalence world-wide with, per every 100k people, about 301 deaths in the US, 24 in Japan, 46 in South Korea, and 6 in Taiwan (Dong, Du & Gardener, 2020; United States Census Bureau, 2024; National Statistics: Republic of China (Taiwan), 2024). This optimism may help explain why in some parts of the US, such as Missouri, Georgia, Arkansas, Alabama, Wyoming, and Indiana, only 50% of Americans were vaccinated (Gerson, 2022).

Realism-similarity default: "This is serious, and we need to prepare now."

> *Citizens are asked to* ***remain calm****, maintain their normal daily lives, stay tuned for outbreak information provided by the government, and* ***strengthen their personal hygiene routines*** *(Tsai, January 22, 2020, as cited by Office of the President, Republic of China (Taiwan), 2020)*
>
> *The coming 1-2 weeks will be a crucial period to determine whether the situation escalates or comes under control. Based on expert opinions, we've decided that we should take all possible measures to prevent domestic spread over the next two weeks…Preventing group infections is extremely important. To avoid large-scale infections, we request that national sports and cultural events with large audiences be canceled, postponed, or downsized. There have been instances of infections spreading in sports gyms and buffet-style dining. We ask businesses and individuals to avoid poorly*

[6] Donald Trump was, as Wallace-Wells (2023) describes, "the gravitational center of COVID policy in 2020." Whether or not he or his advisers were aware of it, his words and his actions capitalized on long-standing cultural defaults. As President with a microphone and social media, he was able to activate the defaults of optimism, uniqueness, high arousal, influence and control, personal choice and promotion because they were already woven into the sociocultural fabric of America and broadly reflected and reinforced in many cultural ideas, stories, practices, and policies. Trump was effective in mobilizing people, in part, because he presented and re-presented these ideas in simple everyday language. For an analysis of Trump's Jan 6th speech and how he used long-standing cultural forms, see Ntontis et al., 2023.

> *ventilated crowded places and those with high chances of contact with many unspecified people, and ask business operators to take sufficient measures against infections. There is still much unknown about this virus.* ***Battling an unseen and poorly understood enemy is no easy task. To be frank, the government alone cannot achieve victory in this fight.*** *For a final resolution, the understanding and cooperation of every individual, medical institutions, households, businesses, and local governments is indispensable." (Abe, Feb 29, 2020, as cited by Sugiyama, 2020)*

In East Asia, a very different default, one we call here the realism-similarity default, was prevalent in people's initial responses to the pandemic. From the perspective of this default, there was abundant reason to worry about the consequences of the virus and how easily it was spreading, as reflected in the above quotes. In Taiwan, on December 31, 2019, the day after a deputy director of Taiwan's CDC read an online post describing the occurrence of a disease in Wuhan that could be "the second coming of SARS," the government initiated regulations to curb the spread, including border controls, quarantines, production of medical supplies, hospital preparation, enforcement of social distancing, and travel warnings (Borak, 2020; Chien-Jen et al., 2020). As noted above, as early as the end of January 2020, President Tsai of Taiwan urged people to be calm but also to be alert for outbreak information and to "strengthen their personal hygiene routines." By early March of 2020, South Korean President Moon Jae-in ordered all government organizations to switch to a "24-hour emergency situation room system," and South Korea began aggressive testing for COVID. Almost immediately, there was a far higher use of masks throughout the Asia Pacific, in part because masking was a more common practice, but also because there was a clear recognition that masks were needed to prevent spread (Borak, 2020; Kim, 2020; Tu, 2020). Japan closed its borders, and issued an alert at the beginning of March 2020, communicating an emerging understanding that COVID could be easily transmitted to others, even if the carriers themselves were asymptomatic. Additionally, in Japan, an Advisory Board for COVID-19 Countermeasures was formed, and in May 2020, they released guidelines from the Ministry of Health, Labour and Welfare to reduce contact with others by 80% as part of a new lifestyle. In other words, in many parts of East Asia, instead of the initial U.S. view that things would be OK and not a problem for the economy, there was a clear recognition that COVID was a threat that would have a severe impact on most people and their daily lives.

> *In several countries, the death toll rises by hundreds daily, and with the increasing number of severe cases, they are experiencing situations akin to a complete collapse of the medical system.* ***This is not someone else's problem. Japan might face the same circumstances in a short time.*** *With that sense of urgency, I urge all citizens to remain highly vigilant….Due to various self-imposed restrictions on activities, there is an immensely adverse impact on the Japanese economy as a whole. Bus reservations for the next month have decreased by 90% compared to last year. The aviation industry is already facing revenue losses that practically wipe out the entire annual operating profit. In the accommodation and dining sectors, many businesses are seeing reductions in sales by 80% to 90%. In the music industry, with events being canceled, some reported not just zero revenues but even losses. While the future remains uncertain, I've heard heart-wrenching voices from small to medium-sized business owners expressing that this situation is a matter of life and death. However, I've also perceived a determination among them to grit their teeth and persevere through these trials. (Abe, March 28, 2020,*

as referenced by Sugiyama, 2020b)

From the time of Alexis de Tocqueville's 19th century observations about the United States' "lively faith in the perfectibility of man," people in the U.S. have been known to exhibit greater optimism about their lives and to prefer focusing on positive outcomes over negative ones, compared to people from other high-income countries (Alesina, Stantcheva, and Teso 2017; Sims et al. 2015; Tocqueville et al. 2002). The U.S.-East Asian differences in optimism and realism described above are supported by decades of empirical research (e.g., Heine & Lehman, 1995). Surveys repeatedly find that Americans are decidedly more optimistic about their lives than members of other cultures (e.g., Fischer & Chalmers, 2008; Lee & Seligman, 1997). In a meta-analysis of 22 nations, the more individualistic nations were, the higher they scored on a popular trait measure of optimism, the Life Orientation Test, and Japanese, Korean, and Hong Kong Chinese respondents scored lower than U.S. and Canadian respondents on this measure (Fischer & Chalmers, 2008). Compared to Japanese, U.S. Americans were more optimistic that positive events would happen to them and that negative events would not happen to them (Chang et al., 2001; Ji et al., 2004; Britton et al., 2019). Even among ethnic groups within the United States, European Americans (those whose ancestors came from parts of Western Europe) are more optimistic than their East Asian American peers (Lee & Mason, 2013). Conversely, Chinese are more pessimistic than European Americans (Lee & Seligman, 1997).

Intertwined with this American optimism are feelings of being somewhat unique and special compared to other individuals. As an example, when offered a gift of a pen from a set of pens, people in the U.S. are more likely than respondents from East Asia to choose the one pen that is unique, in the minority, or less common (Kim & Markus, 1999; Kim & Sherman, 2007). This tendency is particularly evident when they are reminded of their independence and autonomy (Ma et al., 2014). Not surprisingly, U.S. Americans, especially those with a college education, are more likely to feel unhappy when a good friend chooses to buy the same car as them because it makes them feel less special and different (Stephens et al., 2007). Many organizations and institutions promote the idea that America as a nation is unique and exceptional among nations and should promote its ideas and values around the world (de Tocqueville, 2000; Lipset, 1997).

This sense of uniqueness and optimism combine with the continuing legacy of the Protestant ethic and the value of work and constant effort to fuel the American Dream and the can-do spirit of independent agency: "If you work hard enough, good things will happen," "With grit, people can pull themselves up by their bootstraps." (Weber 1904/2002; Uhlmann & Sanchez-Burks, 2014). These default ideas likely stem in part from the largely immigrant history of the United States. To decide to leave one's homeland in search of a better life (especially if that better life exists across a vast ocean in undeveloped land), people need to believe that a better future is both available and attainable (Kitayama et. al., 2006; Tocqueville, 1838). They may also stem from the shorter history of the U.S. compared to East Asia.

In the same way that optimism is bundled with uniqueness for U.S. Americans, realism is tethered to being similar to others in many East Asian contexts (Heine et al., 1999). In Japan, a common response to the question, "What is a good life?" is "to live an ordinary life," where

ordinary means being like others, part of a larger social whole, and meeting others' expectations (Hitokoto & Uchida, 2015; Mathews, 1996; Uchida & Rappleye, 2024): the diametric opposite of being unique and standing out. East Asians are more likely than Americans to describe themselves as "a living creature" or as a "human being" or as "one of many" (Kanagawa, et al., 2001). Their tendencies to hold relatively balanced and more realistic views of themselves that underscore their similarity to others means they often score lower on American-made measures of self-esteem, self-judgments, and well-being (Boucher, 2010; Diener & Diener, 1995; Heine et al., 1999; Rappleye, et al., 2020). While people everywhere are inclined to see themselves as "good," good has different referents in different contexts. For European American respondents, it often means being different or better than others, whereas for East Asian respondents, it means being "average": as smart as, but not smarter than, their peers (Zell et al., 2020). Knowing one's place is key to an *interdependent* model of agency; as a result, East Asian ideas and practices often stress humility and the rewards of being in the middle and like others. Rather than touting the virtues of being the squeaky wheel, East Asian proverbs warn that the duck that squawks the loudest gets shot, or that the nail that stands out gets pounded down.

The American optimism-uniqueness default is beneficial in many situations and in the context of COVID may have been an initial bulwark against widespread depression and despair. Yet it may also have kept many Americans from fully perceiving and accepting the actual threat of COVID. As they held strong to the view that they were somehow special and unique, and that it couldn't happen to them, they were, as David Leonhardt (2020) wrote in the *New York Times*, "uniquely terrible in their response to the pandemic." One consequence of this default was limited implementation of procedures or practices that could have prevented the spread of the disease. This was particularly problematic because one of the most well-established and effective public health responses to preventing a pandemic is *early* detection and action. Although some U.S. public health officials tried to respond proactively, their primary obstacle was convincing the American public that there was a real threat in the first place, perhaps because of the American optimism and uniqueness default. Indeed, many officials received death threats once they enacted shelter- in-place mandates (Mello et al., 2020). And the fact that by January 2023, 31% of the U.S. population was still not fully vaccinated despite the wide availability of vaccines in the U.S. suggests that many Americans still did not believe that COVID was a significant enough threat to their health, despite the fact that over 1 million Americans had already lost their lives (Randall et al., 2022).

In contrast to the widespread denial of the infection in the U.S., from the beginning of the pandemic in East Asia, people had a wider variety of other-focused worries, reflecting a realism-similarity default. Many people, even those without observable symptoms, were concerned that they might have the virus and spread it to others, not only because they would get sick, but also because they did not want to be the cause of others' infections. The worry was that they would damage their own reputations as well as those of their families, and even their companies if they were a vector of virus transmission (Borak, 2020; Kim, 2020; Tu, 2020). Early detection and action worked in concert with the cultural default of a sense of realism and being vulnerable like others.

Why is this happening?"

When people across the world began to die of COVID, they sought to understand the

causes of COVID and its spread. The question became whom to blame, revealing the *single cause* default in the U.S. and the *multiple cause* default in East Asia. Whereas the single cause default focuses on one cause of behavior, usually an individual or group (in line with the independent model of agency), the multiple cause default focuses on individual and situational factors as several causes of behavior (in line with the interdependent model of agency).

Single cause default: "The Chinese are to blame."

After U.S. Americans began to fall sick and die of COVID, another cultural default was prominent in public discourse –the tendency to identify a single cause. Headlines and quotes from politicians in the U.S. that referred to COVID-19 as "the Wuhan Flu" or "the China virus" said it all: China was to blame. In a speech at the U.N. General Assembly, former US President Trump criticized China for "unleash[ing] this plague unto the world" (Macias, 2020).

> *As we pursue this bright future, we must hold accountable the nation which unleashed this plague onto the world:* ***China****. (Trump, September 22, 2020)*

Once Americans knew whom to blame, their questions focused on why and how China was to blame. Why did Chinese people catch and spread this disease? Because "they like to consume exotic foods like bats." Why did the Chinese government not report the virus sooner? Because "the virus leaked from a biology lab and the Chinese hid this fact to save face," or because "the Chinese government is secretive" and wants to dominate the world. These stigmatizing labels were not only efficient, but they also capitalized on the pre-existing and at the time a rapidly escalating superpower distrust and suspicion of each other. For some, this single cause attribution inspired retributive action. As blame centered on China, Asian Americans became the target of prejudice and discrimination (e.g., Cheah et al., 2020; Lo et al., 2022; Teng et al., 2022; Darling-Hammond et al., 2020; Li & Nicholson, 2021), and the number of anti-Asian American hate crimes increased 77% from 2019-2020 (The United States Department of Justice, 2023). The number of anti-Asian hate incidents reported to the Stop AAPI Hate foundation amounted to over 1,400 within the first month of the pandemic, over 6,600 by the end of March 2021, a year after the pandemic reached the U.S., and over 11,400 by March 2022 (Jeung & Nham, 2020; Jeung et al., 2021; Yellow Horse et al., 2021; Yellow Horse & Chen, 2022). With a clear and single external cause, U.S. Americans had little need to implicate themselves or the U.S. government for their delayed response to COVID.

Multiple cause default: "Many factors are to blame."

In East Asian contexts, common public responses were different. While some individuals and organizations also recognized that the virus appeared to originate in China, they displayed a multiple cause default, attributing the origin and spread of the pandemic to a range of situations and systemic factors. For instance, in Japan, many people viewed the pandemic as another one of many inevitable natural disasters (*Tokyo Shimbun*, 2020), and if Japan were not so dependent on China, there would have been fewer Japanese people in China who were exposed to the virus. In the Japanese media, reports about causes of the pandemic avoided committing to any particular causal explanation, even warning readers to be cautious about relying only on U.S. reports given its pre-pandemic tensions with China, e.g., "one should know the multiple backgrounds of a particular theory in order not to be drawn into it" (Kubota, 2020).

> ***No one knows the "right" answer to counter the corona.*** *The world is repeating trial and error. We need to learn from overseas and adopt a rational response. We need to change the direction of measures to deal with severe cases of corona.* (Kami, 2020)

Furthermore, throughout the pandemic, many Japanese commentators referred to the *multiple reasons* why Japan was unable to get a handle on the pandemic. "For more than a year, Japan has been unable to take effective measures against coronavirus" because of various problems such as the inability to expand PCR testing, the lack of progress in developing medical systems, *and* the slowness of vaccine development (Hamada, 2021).

When social psychologists (in the West) first began to empirically examine how people answered why questions and explained the events of their lives, they repeatedly found that (Western) people seem to focus on the stable internal attributes of the person or group directly involved in the event (e.g., Q: Why did John behave that way? –A: Because he is incompetent, aggressive, etc.) (Martisons & Davidson, 2007). People's roles, relationships, and circumstances are often given scant attention. Researchers called this the fundamental *attribution error* (Ross, 1977; Ross & Nisbett, 1991; Gilbert & Malone, 1995). Applied to groups of people, this tendency was called the *ultimate attribution error* (Pettigrew, 1979). Q: Why did China behave this way? A: Because it is secretive and untrustworthy. Moreover, if the events are clearly negative, as in the case of pandemic, people in the U.S. are likely to focus first on others as the likely source of the problem, and only rarely implicate themselves as part of the problem (Jones & Nisbett, 1972). Mistakes were made, but not by us.

When people construct the events of their lives in contexts that foster an interdependent model of agency, however, they tend to perceive individuals as connected with other people and as parts of larger encompassing social groups and systems (e.g., Norenzayan & Nisbett, 2000; Norenzayan et al., 2002; Morris & Peng, 1994). As a result, attention is distributed more broadly and holistically (Nisbett & Miyamoto, 2005; Bond, 1988; Nisbett et al., 2001; Nisbett, 2003). It is often distributed and less confined to a single person or group of people and their internal or dispositional attributes. East Asian perceivers also blame individuals and groups for their actions, but they are also more likely to take into account a wider range of factors that include themselves as well the roles and situations in which they and others are embedded (Choi et al., 1999; Markus et al., 2006). If a person behaves aggressively, East Asian perceivers tend to consider the situation, the person's role in that situation, and the state of the person's relationships (Miller, 1984; Morris & Peng, 1994; Nisbett et al., 2001; Choi et al., 2003; Briley & Aaker, 2006; Chiu & Hong, 2007; Na & Kitayama, 2011, Menon et al., 1999; Markus et al., 2006).

For example, a series of studies (Choi et al., 2003) compared how much information Koreans and Americans think is relevant to understanding the causes of deviant behavior (e.g., a graduate student killing his adviser) as well as prosocial behavior (e.g., a person helping the victim of a car accident on the highway). Participants were given lists of potentially relevant information to consider. Koreans considered more potential causes than did Americans, including both "personal" factors (the graduate student's history of mental disorders, whether the helper was religious) as well as "situational" ones (whether the graduate student and professor had offices on different floors; whether there were trees around the accident scene) than did Americans in part because they were more holistic thinkers. Koreans ended up making more

situational attributions than Americans because they considered more information.

An important feature bolstering the single cause default in the U.S. is a Western preference for consistency and stability in people and things, a preference that reflects a commitment to principles of Western logic (Nisbett, 2015). In contrast, East Asian contexts often reflect an emphasis on the importance of dialectical reasoning: the universe is unpredictable and in constant flux (Peng & Nisbett, 1999). As reflected in the sign of the Tao which translates to "the way to be with nature and other humans," two black and white swirls join to make a circle, they complete each other but at the same time, they can contradict and change each other. Nothing is certain. In interdependent contexts infused with these understandings, people learn to assign meaning and understand behavior in terms of shifting, inter-related forces in which a change in one cause can lead to change in others (Ji et al., 2001). Any given cause, even a primary one, cannot produce an effect on its own but depends instead on cooperating or facilitating causes that are required before a given result can occur. This default mode of attributing causality to multiple factors is grounded in the premise that relationships, roles, and responsibilities guide behavior. The *multiple cause* default, like the *realism-similarity* default, highlights the significance of context, or the other people and the situations and systems of which people are always part. In contrast, the default of focusing on single and stable origins in the U.S. may have slowed the scientific search for understanding multiple causes for the spread of the virus. In East Asia the focus was less on locating the origin and the cause of the virus and instead on the consequences and on the many risk factors for viral transmission and how to prevent them. The broader focus on multiple causes, coupled with a tendency to be more realistic may have produced more specific and helpful recommendations earlier in the pandemic in Japan and other East Asian countries compared to the U.S. (e.g., The Government of Japan, 2020).

"How should I/we feel about this crisis?"

When the threat of COVID could no longer be denied, and people across the world were scared and anxious, Western and East Asian leaders turned to "war" mode. Chancellor Angela Merkel said, "Since German unification, no, since the Second World War, there has been no challenge to our nation that has demanded such a degree of common and united action (Merkel, March 18, 2020, as cited in Deutsche Welle, 2020)." In Japan, Prime Minister Abe warned that "the ongoing battle is critical and harsh…. we are causing trouble for the Japanese people, but we also humbly ask for cooperation from each and every person." But despite similarities in their use of war rhetoric, the specific ways in which U.S. vs. East Asian leaders used war metaphors also revealed the different cultural defaults related to encouraging higher arousal and upregulating one's emotions in the U.S. (consistent with an independent model of self), and encouraging lower arousal and calmness and down-regulating one's emotions in East Asian contexts (consistent with an interdependent model of self) (Hampton et al., 2021; Tsai et al., 2006; Tsai, 2007; Clobert et al., 2022). Everyone was scared and anxious, but cultural defaults differed in what people were encouraged to do with these feelings.

<u>Higher arousal default: "Let's express our anger (and optimism) so that we can mobilize"</u>

In the U.S., "the invisible enemy" and the promise of "victory" were used to arouse its citizens, to capture their attention and motivate them to do something, as reflected below.

> *To this day, nobody has seen anything like what they were able to do during World War II. And now it's our time. We must sacrifice together because we are all in this together and we'll come through together.* ***It's the invisible enemy. That's always the toughest enemy: the invisible enemy. But we're going to defeat the invisible enemy. I think we're going to do it even faster than we thought. And it will be a complete victory.*** *It'll be a total victory. (Trump, 2020, as cited in Bennett & Berenson, 2020).*

During normal times, people in Western contexts want to feel high arousal positive states (excitement and enthusiasm) more than people in East Asian contexts because these states are instrumental to independent agency and to individual action and influence (Tsai et al., 2006; Tsai et al., 2007; Tsai, et al., 2023). These positive high arousal states also fuel optimism. During times of crisis, however, a higher arousal default can also lead people in Western contexts to feel and express anger, hostility, disgust, and contempt. Because Americans value and expect to feel good and be free, being constrained by a mask or a lockdown was experienced as an obstacle to realizing their preferences and goals and generated intense anger as well as fear. They expressed this anger, frustration, and other high arousal negative states, which not only re-asserted their personal importance but also motivated them to act (Mesquita, 2022; Clobert et al., 2022). Indeed, during unhappy events, U.S. Americans tend to cope by expressing anger and aggression, whereas Japanese tend to cope by reappraising the event and thinking of ways they might improve next time (Uchida & Kitayama, 2009). Similarly, in a study of 2237 UK residents between 16–75 years of age, 56% said they had felt angry toward another person because of COVID, and 26% said they had confronted or reported someone for not complying with COVID policies (Smith et al., 2021). In the U.S., notices started appearing in health care and other service settings warning patients that poor treatment of staff would not be tolerated.

> *Tension is heightened today, and anger is definitely part of that, maybe even an artifact of that.* ***People are definitely exhibiting more anger.*** *Incidents of domestic violence seem to be increasing, which is the most concerning. Personally, I was on a run the other day and somebody yelled at me for wearing a mask, in Boston…so the next day, I think, "Maybe I won't wear my mask today." Then I approached a lady, I'm 20 feet away, and I smiled at her and she angrily yelled, "Don't smile at me. You're not wearing a mask. You're taking a chance with my life!" (David H. Rosmarin, August, 2020, as cited by Powell, 2020)*

> *In another instance, Mr. O'Brien said, a man who did not want to wear a mask verbally assailed another employee, interspersing personal insults with an impromptu soliloquy about liberty and tyranny until the employee began to cry. He kept shouting, 'The governor said we no longer have to wear masks,' Mr. O'Brien said.* ***The woman's response — that they were still required in places with a certain number of workers — only made him angrier.*** *(Lyall, 2022)*

The U.S. news media, replete with high arousal negative affect, both reflects and feeds this higher arousal default (Bellovary et al., 2021; Knutson et al., 2024). These states spread easily and capture attention (Brady et al., 2021; Crockett, 2017). For instance, in a comparison of

the affective content of social media among U.S. and Japan Twitter users (Hsu et al., 2021), U.S. Twitter users were more likely to be influenced by others' high arousal negative affect on Twitter than in Japan. This may explain why U.S. fake news and misinformation are more likely to contain high arousal negative affect than real news (Vosoughi, 2018). Coupled with the narrative of external blame described above, and the fact that conspiracy theories often express high levels of anger, fear and disgust (Zhang et al., 2021), it shouldn't be surprising that although rare, physically violent acts against Asians significantly increased during this time as described above (Federal Bureau of Investigation, 2022; Yellow Horse et al., 2021). The more people experience and value high arousal negative states, the more they view harmful responses to cultural outgroups as appropriate, especially when they feel uncomfortable with cultural outgroups' practices (Clobert et al., 2022). COVID made some U.S. Americans uncomfortable; they wanted to do something, and Asians were a convenient—and single—target.

Lower arousal default: "Let's stay calm so that we can respond appropriately."

In comparison, in Japan, while Prime Minister Abe talked about the war against COVID, the urgency of the crisis was quickly moderated by the cultural default of being calm and level-headed (i.e., de Almeida & Uchida, 2018). Compared to U.S. news media, Japanese news media are less emotional in tone, even during times of national crisis. In other words, the message of Japanese news media is to "not to panic," which is how Japanese were encouraged to respond to challenges including the 2011 Japanese earthquake-tsunami called 3/11 (Uchida et al., 2015).

> ***I wholeheartedly ask everyone to take level-headed actions*** *based on accurate information (Prime Minister Abe, April 7 2020)*
>
> *I firmly believe that one of the reasons [there are fewer COVID cases] is our well-established national health insurance system, and another is the strong sense of hygiene among our citizens and residents of Tokyo.* ***Consequently, the diverse knowledge of the residents regarding health, along with their calm and measured actions, supports us.*** *I think the current situation in Japan, and specifically in Tokyo, can be attributed to these combined factors (Yuriko Koike, Governor of Tokyo, March 23, 2020)*

This response to COVID-19 is consistent with responses to other natural disasters in Japan, as described by Pico Iyer:

> *After 9/11, many foreign observers were shocked that the terrorists' long-term strategy had reaped such dividends, leaving Americans traumatized for years; after 3/11—the "triple threat" of earthquake, tsunami, and nuclear meltdown that took more than eighteen thousand lives in Japan in March 2011—foreign observers were shocked at* ***how orderly and calm*** *the Japanese remained, as if loss, and not its absence, is the norm (Iyer, 2020, p. 169)*

Indeed, this calm can be misread by U.S. media as people not caring or not being affected by the crisis, but it is just the opposite. Low arousal states like calm, peace, and tranquility facilitate paying attention to other people and to one's environment which fosters social engagement (e.g., Schupp et al., 1997; Tsai et al., 2007; Kitayama et al., 2000; Uchida & Rappleye, 2024), perhaps especially when circumstances are uncertain and changing quickly. In

several studies, European Americans, Asian Americans and Hong Kong Chinese were more likely to prefer low arousal states when they wanted to fit in and adjust to the expectations of others (Tsai et al., 2007). In the context of COVID, Japanese leaders asked for calm so that they could realistically assess its demands in order to understand the best and most effective way to manage and cope with it.

Although many people across the world during the pandemic wanted to feel calm (Lomas et al., 2023), and European Americans specifically have increased their valuation of low arousal positive states over the years (Tsai et al., 2024), these states are not generally supported by the dominant philosophies and everyday activities in the U.S. to the degree they are in Japan. Instead of being the end state, calm in the U.S. appears to be an antidote to the anger as well as a means to achieving high energy happiness. In contrast, Buddhism emphasizes and encourages people to be calm (Tsai, Miao, et al., 2007), and Japanese have calm activities built into common daily practices such as taking a bath or *onsen* (Clobert et al., 2020), visiting and praying at Buddhist and Shinto temples, passing Buddhist shrines on the street corners, and explicit norms *to be considerate of others*: to be quiet and not talk too loud in public places like the subway and train, the bus stops, and street corners. Furthermore, Japanese arts including the tea ceremony (*sa-doh*), flower arrangement *(ikebana; ka-doh*), and calligraphy (*sho-doh*), as well in as the martial arts (j*u-doh, ken-doh*) and of course meditation also promote and cultivate calmness (Uchida & Rappleye, 2024).

This emphasis on low arousal states may be one reason why Japanese are better able to suppress their negative emotional responses than European Americans (Murata et al., 2013; Kraus & Kitayama, 2019), as well as why emotional suppression does not have the negative consequences for health and sleep among East Asians that it does for European Americans (Soto et al., 2011; Zhu et al., 2023). Differences in the emotional defaults of high and low arousal may have even played a role in people's willingness to wear masks. For U.S. Americans, expressing one's emotions— especially high arousal positive emotions like excitement—is central to expressing oneself, and one of the main ways U.S. Americans do this is with big toothy, Julia Roberts smiles. Perhaps not surprisingly then, European Americans judge people with toothy smiles as more friendly and trustworthy than East Asians do (Tsai et al., 2019).

In contrast, in Japanese contexts, expressing one's emotions is less important than reading other's emotions, which Japanese primarily do through the eyes (Gengaku et al., 2016, Yuki et al., 2007). Notably, Hello Kitty, a popular Japanese, red-bowed cartoon cat whose image adorns hundreds of products across the globe, has eyes but *no mouth*. Hello Kitty doesn't need a mouth because she doesn't need to broadcast her own emotions; reading others' feelings matters more. Cast in this light, the heightened American resistance to wearing masks makes sense. Masks cover the very part of the face that Americans use to express their authentic selves and to distinguish friend from foe ("Why do I have to cover my smile?" or "Why should I cover up who I am?"), but in Japan, they cover the part of the face that can offend or be too expressive and too arousing (Saito et al., 2022). As a result, masks de-individuate, which runs contrary to the cultural default of uniqueness in the U.S. but is consistent with the cultural default of similarity in many parts of East Asia, which may partly explain why daily mask wearing was easily adopted and difficult to let go of in Japan (Nakayachi et al., 2020).

The U.S. default of high arousal is related to U.S. Americans' desire to act and take control of the situation, and the East Asian default of low arousal is related to their desire to wait and adjust to the situation (Tsai et al., 2007; Morling et al., 2002), the next set of defaults that guided responses to COVID.

What should I/we do about it?

As reports of the pandemic grew, the overarching question across the globe was what to do about it. And here again common responses in the U.S. and East Asia to the threatening context of the virus revealed diverging cultural defaults, one focused on rapid influence and control (in line with an independent model of self) and another on careful waiting and adjusting (in line with an interdependent model of self).

Influence and control default: "Do something, and do it fast!"

The U.S. American response to the pandemic revealed perhaps its most easily identifiable behavioral default—an emphasis on doing and taking action quickly. Although the American optimism default was associated with some initial downplaying of the seriousness of the virus, the influence and control default was powerfully and immediately on display in the launching of Operation Warp Speed. This was a partnership between the federal government and private companies to accelerate the development and manufacturing of vaccines (Lewis, 2021). The name referenced a *Star Trek* term for faster-than-light travel and was designed to evoke a sense of rapid immediate action and control over a threatening situation. It epitomized taking action quickly, exerting influence, and gaining control over the situation. As apparent from Trump's description of Operation Warp Speed on May 15, 2020, the previously described defaults of optimism, single causes, and high arousal are intertwined with the emphasis on influence, control, and doing.

> *Another essential pillar of our strategy to keep America open is the development of effective treatments and vaccines as quickly as possible.* ***Want to see if we can do that very quickly.*** *We're looking to — when I say "quickly," we're looking to get it by the end of the year, if we can. Maybe before. We're doing tremendously well.*
>
> *Today I want to update you on the next stage of this momentous medical initiative. It's called Operation Warp Speed.* ***That means big and it means fast. A massive scientific, industrial, and logistical endeavor unlike anything our country has seen since the Manhattan Project.*** *You really could say that nobody has seen anything like we're doing, whether it's ventilators or testing.* ***Nobody has seen anything like we're doing now, within our country, since the Second World War. Incredible.*** *(Trump, May 15, 2020)*

And it worked: in very short order, three companies produced remarkably effective vaccines which at the time gave rise to collective feelings of mastery and control over the pandemic (Corey & Miner, 2022; Guarino et al., 2020; Ho, 2021; Murray, 2020).

This penchant for doing something—anything—has a strong historical precedent in the U.S. As succinctly state in a quote attributed to Theodore Roosevelt:

> *In any moment of decision, the best thing you can do is the right thing, the next best thing is the wrong thing, and the worst thing you can do is nothing.*

Because doing something is a signal of strength in the U.S., leaders are expected to take charge and do something overt and observable; leaders who don't do this are deemed weak and ineffective. Former President Obama, for example, was frequently criticized for not being an effective leader because he was too calm, too thoughtful, and not passionate or active enough (Brooks, 2011; Dowd, 2011; Klein, 2008), resulting in Maureen Dowd (2011) calling him the "Withholder-in-Chief."

The influence default also shows up in the variously attributed saying "when the going gets tough, the tough get going." Popular American books on habit formation and motivation extol the virtues of taking action and doing something that will immediately influence the situation. As a recent example, in the best-selling book *Atomic Habits,* James Clear (2022) draws a distinction between actions that deliver outcomes vs. those that don't, with the former being more desirable. Despite the widespread appropriation of the British phrase "keep calm and carry on," and the popularity of some American cultural products that stress the value of meditating (e.g., the app *Calm*) and of taking a pause, reflecting, and thinking again (e.g., Grant, 2021), Nike's tagline "just do it" and expressions such as "go for it" still dominate American discourse.

The influence and control default requires figuring out what you want– your goal or desired outcome– believing you can achieve it, and then devising a plan to change people, circumstances and/or behavior so ultimately you can get what you want (Heckhausen & Schulz, 1995; Rothbaum et al., 1982; Oettingen & Gollwitzer, 2015). This fosters and reinforces the idea that effective actions emanate primarily from individual goals, consistent with an independent model of agency. Indeed, Bandura proposes that "beliefs of personal efficacy constitute the key feature of human agency (1997, p.3)." In the West, a vast theoretical and empirical literature in psychology and education demonstrates that influence and control and proxies for these concepts such as feelings of self-efficacy, and mastery are tightly linked with high levels of motivation, achievement, performance, and well-being in multiple domains (Bandura, 1986; Bandura et al., 2003; Carver & Scheier, 1982; Dweck & Leggett, 1988; Oettingen & Gollwitzer, 2015; Ryan & Deci, 2006; Rotter, 1966).

<u>Wait and adjust default: "Let's wait and see."</u>

In East Asian contexts, once people were required to wear masks, quarantine, test, and contract trace, they were encouraged to wait and see rather than influence and control. Waiting and adjusting to the circumstances is, of course, doing something, but that something is not as overt or observable at least to the Western eye. This default involves paying attention to the context, assessing the situation, and being aware of, and adjusting to others' needs and demands (Morling et al., 2002; Uchida, 2014). In contrast to influence and control, it involves refraining from making quick decisions, restraining one's personal needs and goals, and taking time to develop a shared view. As an example, although many in Japan recognized the signals of the pandemic in early 2020, the government did not release the state of emergency declaration until April 2020, in part because the three Cs described in the introduction were effective in curbing the spread of the virus, but also because before acting, the government wanted to monitor the response of citizens, the media, and the market. This strategy was one of "adjustment," not only

to the changing nature of the pandemic but also to the Japanese people's sentiments about the pandemic. The practice of devoting significant time to gather and reconcile their constituents' opinions before making a decision or taking action (Numagami et al., 2007) was exemplified by this quote from the minister in charge of Japan's COVID response.

> ***We are taking a cautious approach and considering all factors*** *before deciding on the implementation of stronger measures. We must strike a balance between preventing the spread of the virus and maintaining economic activities. (Yasutoshi Nishimura, Japanese minister in charge of the COVID response, September 2020).*

Undergirding the wait and adjust default is an interdependent model of agency in which being agentic means adjusting to encompassing social relationships and situations and attending to roles and obligations. This requires taking into account the preferences and goals of others as well as the constraints of a situation and accommodating them in various ways. The Japanese government explained their considerable delay in vaccination as "necessary to build confidence in the vaccine" (Yamaguchi, 2021). From the perspective of an independent agency, waiting and adjusting may appear to be "doing nothing," but from the perspective of an interdependent agency, waiting and adjusting requires significant attention and energy (For a nuanced conceptual analysis of an adjusting form of "doing" see Weisz et al., 1984; Kojima, 1984).

This form of agency is supported through a confluence of ideas and practices in East Asia. For example, a weave of formative philosophical propositions, including several noted earlier, promote an appreciation that the first thought or action may not be the best or the only one, and that acting without attending to the situation may make things worse. In part this understanding is due to a widespread recognition that "the good and the bad are braided together," and that "reality is a process of change and subject to uncontrollable external forces, so that what is currently true may shortly be false" (see Miyamoto et al., 2017; Nisbett, 2015; Peng, 1997; Spencer-Rodgers, et al., 2009). In East Asia, the widely recounted saga of Mr. Tsai and his horses distills the wisdom of wait and see.:

> *Once upon a time there was a Chinese farmer who had a horse, but the horse ran away. And all the neighbors came around that evening and said, "That's too bad" and he said "Maybe."*
>
> *The next day the horse came back and brought seven wild horses with it. And all the neighbors came around and said, "That's great, isn't it?" and the farmer said "Maybe."*
>
> *The next day his son was attempting to tame one of these horses and was riding it and the horses threw him and he broke his leg. And all the neighbors came around in the evening and said, "That's too bad, isn't it?" and the farmer said "Maybe."*
>
> *The next day the conscription officers came around looking for people for the army. And they rejected the farmer's son because he had a broken leg.*
>
> *And the neighbors came around that evening and said, "Isn't that wonderful?" And he said "Maybe."*

In the above parable, Mr. Tsai understands that what may initially seem bad in one situation, may be good in another situation, and that the situation may change; thus, it is important to let the situation stabilize before acting. The value of waiting before reacting or acting and trying to get a sense of the larger situation is promoted by many practices in schools and workplaces. For example, silently observing and paying attention to what others may be thinking instead of what they are saying before doing anything is called "reading the air" in Japan or "reading the room" in Korea and has been labeled a "sixth sense" (Hong, 2019), and is widely regarded as a necessary first step for appropriate action (Yamada, 2002). While this notion exists in the U.S. as well, it is not normalized and built into everyday decision-making in the same way.

For example, in many Japanese and Korean organizations, a wait and see default is encouraged and reinforced by the practices of *nemawashi* common (Martinsons & Davison, 2007). The term derives from a gardening technique in which during the transplanting of trees, each part of the root system is attended to and the new soil is prepared before moving them. During business negotiations, *nemawashi* lays the groundwork and explains the situations and circumstances to the parties involved before they make a decision. These pre-decision discussions, often held one-on-one, are thought to prepare decision-makers for new ideas and procedures, to stem resistance, and to develop a consensus. In the U.S., "getting buy-in," "making sure people are on the same page," or building consensus also occurs, yet in East Asia, it is often a more expected, sequential, and systematic process that recognizes the value and challenge of developing a shared view before taking action. In the U.S. literature on business and negotiation, many case studies teach Americans about the importance of *nemawashi* en route to a successful deal in Japan and Korean and provide suggestions for how to implement these ideas in U.S. contexts (Sagi, 2015; Azran, 2023).

While studies that provide empirical backing for the influence and control default in the U.S. are a mainstay of the psychological literature, there are only a few empirical studies that focus on the wait and adjust default. In one notable example, U.S. and Japanese participants were queried about times when they influenced or instead adjusted to their situations (Morling et al., 2002). In the U.S., people frequently experienced and remembered influencing behaviors (e.g., persuading other people to change their behavior), and these experiences and memories were strongly related to feelings of efficacy. In contrast, in Japan, adjusting behaviors were more frequently experienced and remembered, and were strongly related to feelings of interpersonal closeness (even for high-ranking individuals, see Gobel & Miyamoto, 2023). Similarly, Tsai and colleagues (2007) found that European Americans valued influence more and adjustment less than Hong Kong Chinese. Moreover, these cultural differences were linked to affective defaults: in both the U.S. and Hong Kong, when people aim to adjust to others, they value low-arousal positive states more, and when they want to influence others, they value high arousal positive states more. Thus, cultural differences in the valuation of low and high arousal were related at least partly to cultural differences in the valuation of influence and adjustment. More recently, Cachia et al. (2024) demonstrated that European Americans value influence more than Japanese, and that these are even related to their conceptions of romantic relationships.

For decades, researchers have noted that theories of human behavior are often built on a foundation of unexamined universalist assumptions (Triandis, 1997; Markus & Kitayama, 1991; Klassen, 2004; Rothbaum et al., 1982; Weisz et al., 1984). This tendency is especially evident

with respect to the influence and control vs. the wait and adjust defaults. The field is replete with U.S.-made measures of influence, control (e.g, Schwarzer & Born; 1998); Huang, 2016; Yip, 2021) and self-efficacy, with East Asians consistently scoring lower on these measures compared to their U.S. American counterparts (e.g., Salili et al., 2001; Gielnik, Bledlow & Stark, 2020). Even though stronger performing students, employees, and entrepreneurs tend to post higher self-efficacy scores than weaker ones across cultural contexts, the degree to which self-efficacy scores predict performance varies across cultures. For example, self-efficacy scores are often a strong predictor of academic performance in independent contexts but a much weaker one in interdependent contexts (e.g., Cho & Lee, 2015; Klassen, 2004; Li, et al., 2021;). Other forms of agency characterized as interdependent, social, or collective e.g., Kizilcec & Cohen, 2017; Li et al, 2021; Thomas & Markus, 2023), in which people align themselves with others or with the demands of the situation, are rarely investigated, and instead are often assumed to be secondary or lesser forms of agency (Heckhausen & Schultz, 1995). Yet adjusting to prevailing circumstances in the context of COVID-19 was the primary and effective form of agency in many East Asian countries.

How should I/we respond to government guidelines?

While the vast majority of Japanese, Taiwanese, and South Korean citizens complied with government recommendations by wearing masks, sheltering in place, and contact-tracing, the response in the U.S. was decidedly more variable (e.g., Kemmelmeier & Jami, 2021; Yamamoto et al., 2021; Mitropoulos, 2022), as might be expected in an individualist context with generally looser norms (Gelfand, 2018). Although most U.S. Americans initially adhered to government guidelines, eventually about half actively resisted them (Fridman et al., 2020; Park et al., 2020), and this lack of compliance was clearly associated with greater spread of the virus in different regions of the U.S. For example, COVID-related deaths were 38% greater in red states than blue ones (Mitropoulos, 2022), where compliance with recommendations was significantly lower. The heterogeneity of U.S. response to pandemic policies and the relative homogeneity of responses in East Asian contexts highlights two other cultural defaults related to independent and interdependent agency, a *personal choice and self-regulation default* prevalent in the U.S. and a *social choice and regulation default* prevalent in many parts of East Asia.

Personal choice and self-regulation default: "I will do it if I want to do it"

In March 2020, as the severity of the pandemic became undeniable in the U.S., California's governor, Gavin Newsom issued the following executive order:

> *To protect public health, I as State Public Health Officer and Director of the California Department of Public Health order all individuals living in the State of California to stay home or at their place of residence except as needed to maintain continuity of operations of the federal critical infrastructure sectors. (Executive Order N-33-20, 2020)*

Similar orders were made in different states across the U.S. For many in the U.S., these orders, mandates, and lockdowns were shocking and unfamiliar because outside of the military and the legal system, U.S. citizens have had little experience with being "ordered" to take action by their state or federal governments. As a result, Americans responded in a variety of ways. Some Americans saw the health advantages to staying home, practiced social distancing, and worked

remotely if they could. Some health care workers or people deemed "essential workers" could not stay home and continued to work in person. Many others, however, were irritated or upset with the mandates and guidelines that clashed with a deeply experienced and culturally inscribed default of personal choice and self-regulation. From this perspective, people can be asked to do something, but it's their choice whether or not to do it. As Trump declared with reference to wearing a mask:

> *You can do it. You don't have to do it. I am choosing not to do it. It may be good.* ***It is only a recommendation, voluntary.*** *(Trump, 2020, as cited by Mills, 2020)*

Indeed, during the first six months of the pandemic, only about 40% of Americans wore masks. This number grew to about 60% in more liberal enclaves. But there were plenty of places where there was minimal if any compliance with mask wearing and other pandemic recommendations (University of Maryland, 2020). In the U.S. images of fights between flight attendants who had to enforce mask mandates and the passengers who refused to comply became a regular staple of daily news.

> *The FAA implemented a "zero tolerance" policy at the beginning of this year with hefty fines that was aimed at curbing unruly passengers after an uptick in incidents, but that hasn't stopped travelers from swearing at airline workers, disrupting flights and even knocking two teeth out of one flight attendant's mouth.*
>
> *"It's out of control," said Paul Hartshorn, spokesman for the Association of Professional Flight Attendants, which represents American Airlines' more than 20,000 cabin crew members. "It's really coming to the point where we have to defend ourselves." (Mendez, 2021, July 6)*

Why such anger and resistance to recommendations intended to protect U.S. Americans' health? In virtually all American contexts, people should be "free" to choose for themselves, driven by their own values and preferences in pursuit of their personal goals and plans. This is a central feature of independent agency. People should not only have the freedom to pursue their personal goals but in doing so, exert control and actively resist interruption or influence by others. Indeed, expectations of freedom from a tyrannical government, and resistance, revolution, and the importance of civil disobedience are foundational to U.S. culture. The notion that individuals have rights and should not be constrained by other people—especially the government—is readily and regularly invoked by individuals and group leaders in response to almost any kind of U.S. legislation or policy that requires adherence or places limits on individual activities (e.g., gun control laws currently, seatbelts in the 1960s and 1970s). Americans rate the absence of government interference in their choices as an extremely important sign of freedom (Smith et al., 2018). Resistance to regulation is especially salient in a political era when narratives of "institutional overreach" are highly elaborated and pervasive, and when misinformation and conspiracy theories are rampant.

The self-regulation and personal choice default also scaffolds the belief that people are responsible for and in control of their own actions and their own lives. Such full-scale autonomous regulation of one's behavior is sanctioned and understood as the basis of optimal behavior, and this extends to one's *health*. Three-quarters of Americans agree that people are in

control of and responsible for their own health" and "people's health is in their own hands" (Hook & Markus, 2020). References to free choice and personal responsibility are prominent in health care policies and practices and are a good example of how self-regulation and free choice defaults are built into critical American institutions (U.S. Department of Health and Human Services, 1991). As an example of leveraging this default to promote compliance during the pandemic, Mayor London Breed of San Francisco urged the people of San Francisco to wear masks so they would be "free" to travel. Notably, however, during the pandemic some of the most effective messaging in the U.S. (i.e., messages that spread and stuck) built on independent agency and deeply entrenched defaults of personal choice and self-regulation to rally people *against* masks (e.g, "my body, my choice") and *against* vaccination ("Let me call my own shots" and "No forced vaccines"). These messages directly countered the advice of most scientists and public health officials and yet were effective, revealing that one route to behavioral change is to anchor a behavioral recommendation in the foundational model of agency and its associated cultural defaults (see "Lessons for the Future").

As with influence and control, the importance and force of personal choice and self-regulation of behavior for performance, motivation, emotion, and psychological health is supported by a strong conceptual and empirical literature. These include studies of self-determination (e.g., Ryan & Deci, 2017), self-regulation (e.g., Higgins, 1997; Vohs & Baumeister, 2016; Waterschoot, 2022), and goal implementation (Gollwitzer, 2014). Similarly, beyond its role in verifying one's independence and in individuating the self from others, "free" choice is seen as integral to identity, life satisfaction and well-being in the U.S. (Diener & Diener, 1995; Patall et al., 2008; Schultz & Pomerantz, 1976). When Americans have the opportunity to choose, they are healthier, happier and more motivated (e.g., Madan et al., 2020, Savani et al., 2010). In one classic experiment on the cultural significance of personal choice, European American and Asian American children were asked to solve as many word-unscrambling puzzles as possible but under different conditions. Children from European American families, already accustomed to personal choice and self-regulation, solved the most puzzles when they had the opportunity to choose the puzzles themselves vs. when others chose the puzzles for them. In sharp contrast, children with East Asian backgrounds and more familiar with social choice and regulation excelled on the puzzles their mothers chose for them, even more than the puzzles they chose for themselves. From the perspective of interdependent agency, the advice or even the thought of a close and important other can often be motivating. From the perspective of independent agency, however, the advice or even the thought of an important other can be experienced as stifling and controlling (Iyengar & Lepper, 1999; see also Fu & Markus, 2014; Markus & Conner, 2014; Kitayama et al., 2004; Hoshino-Browne et al., 2005; Tripathi & Cervone, 2008).

Moreover, one of the most influential and assumed-to-be-universal theories in much of psychology, persuasion, and advertising is reactance theory: when people receive messages that threaten their autonomy or that are too assertive and controlling, they become angry and try to reclaim a sense of freedom or independence, and often by adopting a position opposite to the one in a given message or persuasive appeal (Brehm & Brehm, 1981; Worchel, 2004). There is some evidence that people in independent contexts compared to those in interdependent contexts are more likely to experience reactance (Jonas et al., 2009; Savani et al., 2008; Xu, 2019), and a particular penchant for reactance may be one reason that the resistance to the pandemic

recommendations was so intense in the U.S., although the links between culture and reactance need more empirical validation.

In addition to determining and regulating one's actions and choosing for oneself, another facet of independent agency is the significance of privacy. My property, my beliefs, my actions, and my whereabouts are *my* business: they belong to me. Others have no claim or right to them. And this penchant for privacy extends to health information. Federal law in the U.S. sets explicit standards for the protection of identifiable health and medical information, and limits who can use or share it, the amount they can share and under what circumstances, with the goal of protecting individual privacy (U.S. Department of Health and Human Services, 2022). A focus on privacy and personal choice also extends to the institutional level. In the US, personal health care and public health are considered separate systems (Bourdeaux et al., 2023). Most public health is not controlled by the federal government but instead by a pluralistic assortment of more than 3000 state and local public health offices, which often have incompatible data systems that do not (and often cannot) communicate with each other, and that are furthermore not required to (Panel on Understanding Cross-National Health Differences Among High-Income Countries, 2023). This decentralization is likely due to the fact that monitoring others (and therefore invading people's privacy), especially without their knowledge, is widely considered immoral and is often illegal in the U.S., even if used to protect public health. Given this sentiment, it is not surprising that Americans were not only slow to contact-trace but were also slow to set up systems to monitor tourists coming to the U.S. In contrast, in Taiwan, South Korea, and Japan, tourists were immediately required to quarantine and also required to check in regularly with local authorities to show they were staying inside and complying with government guidelines.

Social choice and social-regulation default: "I will do it because others are."

In April 2020, Prime Minister Abe and the Japanese government issued an "emergency declaration" alert:

> ***We ask*** *that you try to do your work at home. Even in cases where it is absolutely necessary to go to work,* ***I would like to ask*** *all businesses to take measures such as reducing the number of workers by at least 70% by organizing work rotations, staggered work hours, and maintaining sufficient distance from other people. For restaurants,* ***we also ask*** *that they take measures such as thorough ventilation and keeping a good distance between customers.*

Instead of resistance, large-scale public buy-in and cooperation with pandemic precautions and restrictions were evident throughout Japan and other parts of East Asia. This response reflects the cultural default of social choice and social regulation. While individuals also had to decide if and how to respond to government guidelines, their choices were less about what they wanted to do individually and more about adjusting to the situation, doing what they were asked and expected to do, and contributing to a shared goal. Schools and workplaces changed their rules and regulations. Many shops, bars, and restaurants closed because they did not want to be blamed for spreading the disease. Some businesses stated directly that the risk to their reputation was more significant than the commercial and financial consequences of closing.

A high level of compliance with government recommendations was also common in

South Korea. As described by Jerome Kim, director-general of the International Vaccine Institute in Seoul, people were not without choice in their response, but they largely *chose* to cooperate.

> *I think there are a number of choices that people here have made in order to have freedom (Kim as quoted in Gallo, 2021).*

This statement underscores the fact while autonomy and choice are increasingly important across cultural contexts (e.g., Li et al., 2022), what it means to choose, what goal it serves, the consequence of promoting or denying choice, and even the meaning of freedom will depend on the cultural context. For instance, criticism toward the Japanese government was not that it was overreaching but just the opposite, that it was "too weak" and unclear about its recommendations (Ito, 2022; Mainichi Shimbun, 2020).

In Japan, people were monitoring each other to make sure that they were minimizing travel, wearing masks, and maintaining social distance (Frontline Press, 2020). This "mutual sentry" system worked because during the pandemic one of the biggest concerns of many people was the fear of causing trouble for others and of being regarded negatively by others if they became infected and spread the virus to others. Thus, while people in Japan regulate their own behavior, they also pay careful attention to the behavior of others, especially that of ingroup members. And for the most part, without the defaults of self-regulation and free choice common in the U.S., such interpersonal scrutiny is not construed as the intrusive policing of one's movements by friends and neighbors, or undue influence or interference by others. Instead, during the pandemic social regulation, "mutual sentry" served the dual function of keeping one another safe and free from infection and keeping one's reputation as a responsible and cooperative agent intact (Nakayachi et al., 2020; Lu et al, 2022). Often glossed as "peer pressure," such concepts of social regulation instead reflect a process that is mutual and reciprocal. For example, in explaining their lower death rate, South Korean officials claimed that they were ultimately able to rely on what they called a system of "voluntary mutual aid based on community consciousness" (Kim & Howitt, 2020).

Furthermore, in Japan, the slang term "*jishuku-keisatsu (self-restraint police)*" was commonly invoked by people as they shamed and blamed neighbors and businesses who did not appear to be following government recommendations of self-quarantine or sheltering-in-place. While there were no tickets or fines for not following regulations, local police identified "rule violators" (e.g., people who opened stores, attended parties, or traveled outside one's prefectures) and then shamed them by attaching signs to their windows or calling them out on social media (Searcey & Epstein, 2020). Before the Tokyo Olympics in 2021, for example, the Japanese health ministry published the names of people who broke quarantine rules after returning from other countries (Ueno & Bengali, 2021). In another example, a group of Japanese university students who had just returned from Europe attended a party. After the party, many people became infected with COVID, and the police severely criticized the students' university for its "low social regulation." In interdependent contexts, this public call-out is worse punishment than a ticket or fine.

These practices of social regulation and social choice were quite effective. Even though Japan started its vaccination program more than two months later than the U.S., its vaccination rate of people receiving at least one dose of the vaccine was already higher than that of the U.S.

almost seven months later (retrieved on 6/10/24 from Mathieu, 2020). Initially, many Japanese were uncertain about the vaccine and were concerned about side effects (Lu, 2023) and therefore assumed a wait and see attitude toward the vaccine (Okubo, et al. 2021). Yet, as the vaccination rate began to approach 50%, those who had been waiting and wondering began to fear that they might stand out and become the minority in Japan, which significantly increased the vaccination rate (Tsuchida et al., 2022). A similar phenomenon occurred in South Korea.

Importantly, Japanese practices of social choice and social regulation are part of and derive from an overall system that coordinates behavior (Uchida et al., 2019). Until recently, the mutual and social regulation of behavior and the logic and benefits of making social choices that fit with those of the larger group have been far less examined in the psychological literature. Instead of being construed as voluntary choices to be caring, kind, cooperative, and watchful of others, these behaviors have instead been viewed as conformity, or as a less developed and weaker form of agency, reflecting a lack of courage or commitment (Markus, 2016; Kim & Markus, 1999; Thomas & Markus, 2023). However, in many parts of East Asia, situations, patterns of social interactions, and systems afford and require behavior that promotes good or positive outcomes for most people (Kitayama et al., 1997, 2018; Morling et al., 2002, 2015). This is a major difference between defaults of self-regulation and those of social regulation. In other words, in many contexts of East Asia, moral conscience, cooperation, collaboration and prosociality are understood not as voluntary individual behavioral expressions but instead as outcomes of sociocultural systems that foster shared understandings and social consensus. It is not that people are not more willing to individually sacrifice for others; instead, they adjust their own behavioral tendencies to systems set-up to foster a sense of being-in-relation to others and that prioritize the common good. As South Korean Prime Minister Chung Sye-kyun, said:

> *We learned that data really matters and having comprehensive programs really matter," she said. "**And it really matters to have a sense of community and interdependence and responsibility** to beat any pandemic, both today's and, unfortunately, tomorrow's (Oct 14, 2022, as cited by de Groot, 2022)*

The choice not to follow others and to do one's own thing can be experienced as good and right when grounded in a default of personal choice and self-regulation. Similarly, the choice to do what others are doing can be experienced as good and right when grounded in a default of social choice and regulation. The habits of social regulation and being-in-relation-to-others in many parts of East Asia are mostly automatic and taken for granted such that personal choice is less practiced and can be burdensome or risky. In Japan, people expect the government to provide guidelines, and many national and private companies like rail and airline reinforce these recommendations for behavior in public. When the government finally declared that it was no longer necessary to wear masks and that it "will be left to the discretion of individuals," most people continued to wear their masks, reporting, for example, that "self-judgment" will be difficult, or that it "takes courage to remove yourself" (*Tokyo Shimbun*, 2023). Together the defaults of personal choice and self-regulation and of social choice and social regulation, respectively, may explain some of the stark differences in the U.S. and parts of East Asia in their responses to government guidelines to curb the spread of COVID.

How do we re-open, and how should we live now?

Two years into the pandemic, after the development of vaccines and significant declines in cases, another common question arose: how do we re-open, and how should we live now? The answer was loud and clear for U.S. Americans, who had had enough: it was time not only to resume life but to create an even better one than they had pre-pandemic. Indeed, by the summer of 2022, much of the Western world seemed back to normal. Travel between the U.S. and Europe returned with minimal regulations for testing or mask wearing, even on planes, and within the U.S., people were traveling as much as they had before the pandemic (Bureau of Transportation Statistics, 2023). In stark contrast, many parts of East Asia were still banning tourists and limiting international travel for its citizens, and still requiring testing, masking, quarantining, social distancing, and contact tracing. These different responses at this stage of the pandemic reflect two defaults, the *promotion* default in the U.S., and the *prevention* default in parts of East Asia.

Promotion default: "COVID is over; let's get back to living our best lives!"

On September 19, 2022, President Biden declared:

> *The pandemic is over," he said. "We still have a problem with COVID. We're still doing a lot of work on it.* ***But the pandemic is over. If you notice, no one's wearing masks. Everybody seems to be in pretty good shape****, and so I think it's changing, and I think [the Detroit auto show resuming after three years] is a perfect example of it.* (60 Minutes)

President Biden, following the lead of many Americans, declared the pandemic over. Americans were largely back in action, working to "promote" themselves by maximizing positive outcomes, focusing on gains, and striving toward their "best" ideal lives. Indeed, in the U.S. and Canada, 71% of respondents said that it was a good time to get a job, and 63% of respondents described themselves as thriving, compared to 27% and 34% of respondents from East Asia (Gallup, 2022), an optimism doubtlessly fueled, in part, by the low unemployment and rising wages of this period.

In the psychological literature, a promotion focus describes people who view outcomes in terms of potential gains (vs. losses), and who are motivated to see gains (vs. avoid losses) (Cesario et al., 2004; Higgins, 2008; Higgins et al., 2008; Molden et al., 2008). For example, recent studies in the growing literature on culture and corporate governance and financial decision-making show the operation of the promotion default at the institutional level and link it with overconfidence, the self-serving bias, and incentives for risk-taking in individualist contexts (Frijns et al., 2022; Hens et al., 2020; Kurman & Hui, 2011; Lalwani et al., 2009; Zhang & Mittal, 2007). Salvador et al. (2022) observed that Americans viewed successes as more impactful on their self-esteem than failures, whereas Taiwanese viewed failures as more impactful on their self-esteem than successes.

Biden's declaration that COVID was over was in stark contrast with warnings by public health officials about the potential rise of other COVID variants. Dr. Anthony Fauci, Biden's top medical adviser and the director of the National Institute of Allergy and Infectious Diseases, cautioned that the U.S. was far from where it needed to be to fully eradicate COVID, especially

given the likely emergence of variants in the near future. Notably some U.S. health officials warned that even after three years of dealing with COVID, the U.S. remains unprepared for the next pandemic.

> *How we respond and how we're prepared for the evolution of these variants is going to depend on us and that gets to the other conflicting aspect of this — is the lack of a uniform acceptance of the interventions that are available to us in this country (Fauci as reported in Archie, 2022).*

> *A lot of things have to come together to make the response work. It has to come together into one coherent, united, synchronized response. And I think that's what we're missing, which is really frustrating because we're a really wealthy country with large amounts of expertise. But things have clearly been damaged from the COVID pandemic, and we may be seeing the results of that play out (Zeynep Tufekci, 5/1/24, writing about bird flu).*

But these warnings largely fell on deaf ears because in the U.S., people were in promotion mode. Many U.S. Americans ditched their pandemic measures altogether and were busy making up for the opportunities that they missed during the pandemic. In addition to the optimism-uniqueness default, the promotion default was bolstered by the default tendency to take control and influence what came next.

Indeed, for many U.S. Americans, even those who experienced economic hardship, the pandemic made them rethink their lives (Ducharme, 2020). For some, sheltering in place during the pandemic led them to realize that they weren't leading their "best lives." Staying at home initiated a search for better relationship partners, better jobs, better places to live, therapy, new hobbies, and better ways to live (Thomas et al., in press). Beginning in March of 2021, nearly one year after the first shelter-in-place order, many Americans began to leave their jobs voluntarily in what is known as the "Great Resignation," a trend that reached a record high in late 2021 (Gittleman, 2022). Many cited low pay, lack of advancement opportunities, and feeling disrespected at work as reasons for quitting their jobs (Parker & Horowitz, 2022). Embracing a "today is the first day of the rest of your life" mentality, some Americans began engaging in "quiet quitting," a phenomenon that went viral on social media which describes people who did not leave their jobs, but instead "psychologically detached" and stopped "going above and beyond" (Harter, 2022), "no longer subscribing to the hustle culture mentality that work has to be your life." (Rosalksy & Selyukh, 2022). Many Americans came out of the first year of the pandemic and began trying to fashion new, better lives and optimistically believing they could do so. For instance, in the U.S., the work from home (WFH) or anywhere (WFA) movements gained substantial momentum during the pandemic given the ease of Zoom (Choudhury, 2020; Barrero, Davis, & Bloom, 2023). Many company leaders tried to convert a crisis into an opportunity by promoting the value of working at home for 2-4 days a week. Currently, businesses occupy office space at 62% of pre-pandemic levels, and stores and restaurants that depended on the spending of these workers during the day are shuttered (Peck, 2024). Revealing the pervasive influence of the independent model of agency, workers at all levels including managers claim that working from home allows them to be independent and in control of their lives. Findings from the Global Life-Work Survey (2023) contend that people working from home are happier and healthier. The consequences of this WFH movement, however, are evolving. On the one hand, consistent with salutary reports of worker well-being, some

employers and organizations claim that WFH is efficient, and saves time and money (Berliner, 2020). On the other hand, the number of U.S. employees who are "actively engaged" in their work has been falling since 2020 (Barrero et al., 2023; Harter, 2023; Rattner, 2023).

Prevention default: "COVID isn't over; let's prepare for future crises."

In comparison with the U.S., many East Asian contexts continued to focus on safety, security, the prevention of harm, the avoidance of risk, what we call the *prevention default* (Aaker & Lee, 2001; Elliot et al., 2001; Hamamura et al., 2009; Hofstede & Minkov, 2010; Kim & Lawrie, 2019; Riemer et al., 2014; Shavitt et al., 2019, Higgins, 1997; Adams et al., 2019). A prevention default is associated with viewing outcomes in terms of losses and being motivated to avoid losses (vs. seek gains) (Kurman & Hui, 2011). Not surprisingly, then, in East Asia, COVID was not over by the summer of 2022, and governments were intentionally slow in re-opening their countries. As Biden was preparing to declare COVID "over," Prime Minister of Japan Kishida stated:

> *We keep analyzing the progress very carefully and will make decisions regarding the transition to a new phase with Corona. (NHK, 2022)*

Similarly, Shih-Chung Chen, Minister of Health and Welfare in Taiwan, said:

> *This new Taiwan Model seeks to allow people to lead normal lives while active epidemic prevention measures remain in place and the country is steadily opening up. (Chen, 2022)*

On Oct 11, 2022, however, due to intense public concern about Japan's declining economy, its government officially opened its borders to international tourists, only weeks before getting rid of requirements that travelers to Japan have a negative PCR test prior to travel and that travelers register with health agencies for contact tracing. That same week, Taiwan also opened, and removed requirements for testing, quarantining, and contact tracing.

In Japan, despite opening and declaring COVID to be like influenza, by May 2023, life was still not where it was pre-pandemic, likely because of a pervasive prevention default. In the U.S., few people wore masks. In Japan, 70 percent of people continued to wear masks, especially indoors. Even though the government said it is not necessary, people were still expected to use hand sanitizer or have their temperature checked before entering stores, bakeries, offices, etc. Restaurants were still undergoing thorough cleaning in between guests. Signs continued to ask people to maintain a safe social distance; restaurants had just begun to remove the shields they had placed between customers. Although the government announced that wearing masks in schools would not be mandatory, and that children could voluntarily remove their masks to attend graduation ceremonies, many junior high and high school students still wore their masks. In the words of one: "It's difficult for me to take off my mask when everyone else might not. I worry about the eyes of those around me" (Takaku, 2023; ANNnewsCH, 2023). This maintenance of COVID practices not only reflects the prevention default but also the Japanese default of realism. People in Japanese contexts understand that variants exist, and that the next pandemic may be around the corner. Similar caution exists in South Korea, where people were

encouraged to attend sports events, but were not allowed to yell or shout during the events. This focus on seeking a middle way–balancing a return to sports but with some preventive measures—was fueled both by the realism-similarity default as well as by the venerable wisdom of Mr. Tsai to wait and adjust.

In East Asia, individuals and organizations often focus on preserving tradition and seek patterns in the past as a guide to the future (Ji et al., 2009; Gao, 2016). This may be one reason why, unlike in the U.S., many organizations in Japan struggled to adopt remote work. In cultural contexts where situations organize behavior and where their structures embed the practices for particular roles and ways of being, the prevention default is strong. The office—not the home—is the place for work. In Japan, many official documents require a stamp (hanko) applied in person for a transaction to be completed, and more importantly, in the words of one office worker, "it is normal and natural for everyone to come to work" (Dooley & Inoue, 2020). A similar view was prevalent with respect to education and schooling– school is the place for education, and was associated with positive outcomes. In 2022, the Programme for International Student Assessment report (OECD 2022a, 2022b) identified Japan, Korea, and Taiwan as resilient education systems in terms of mathematics performance, equity, and well-being. These countries managed to maintain or improve these aspects between 2018 and 2022, showing no deterioration during the pandemic. In contrast, most students in the U.S. were far behind. This resilience in education during the COVID pandemic, especially in countries like Japan, Korea, and Taiwan, could be attributed to many factors including more equitable schools, but the fact that schools were closed for shorter periods of time compared to other countries in the U.S. and Europe was likely one important factor. An emphasis on returning to work and school may, in part, reflect the fact that people rely on and value mutual monitoring and the social regulation and coordination of behavior, which are much less likely when people do not see each other regularly (Domae et al., 2023). These understandings support a prevention default and a tendency to favor what has worked in the past, as well as a tendency to worry that "innovation" might translate into a loss of tradition and stability (Ge et al., 2022).

Some public health experts attribute the more coordinated pandemic response in Japan, Taiwan and South Korea to the structure of the respective healthcare systems and the existence of pandemic policies before COVID (Ryoko et al., 2020, Gallo, 2021). It is possible that the influence of these factors was independent of cultural defaults in shaping national responses to the pandemic. On the other hand, these factors could well be the institutional manifestations of various cultural defaults. As an example, the fact that the South Korean government learned from an earlier MERS outbreak and created a specific plan for future pandemics to avoid the spread of the virus that was highly effective during COVID is likely in some part a function of the prevention default. As indicated in the above quote by Zeynep Tufekci*,* many public health officials believe that the U.S. has not learned from its mistakes and is not well prepared for the next pandemic. This institutional lag may well be in some part a function of a cultural orientation toward promotion rather than prevention.

Limitations and Cultural defaults in other contexts

Our aim has been to unpack the individualist-independent orientations of the U.S and the collectivist-interdependent orientations of Japan, Taiwan and South Korea into two

constellations of cultural defaults to help explain why they performed so differently in their response to the pandemic. Drawing on an extensive literature in cultural psychology and the public statements of high-level officials, we have examined how these significant sociocultural dimensions may have been experienced psychologically and realized in culture-specific ways of thinking, feeling and acting during the "same" threatening event. We have not shown that these defaults were causally related to particular behavioral outcomes, nor have we compared the predictive power of these defaults with other significant factors shaping pandemic responses. Our focus here is on identifying these defaults as expressions of general tendencies of individualism-independence and collectivism-interdependence and demonstrating how they were manifest in specific pandemic-relevant behavioral tendencies, and how they may be implicated in many other factors associated with the pandemic.

Our analysis has been of culture at the country level, a reasonable choice given our concern with country-level disparities in deaths. As noted earlier, we have only given scant attention to the confounding complexities of within country or regional variation in living conditions, social class, race, gender etc., and how these other cultural contexts likely influence the impact of cultural defaults discussed here. For instance, country-level collectivism as expected was *negatively* related to COVID deaths within the U.S., (Vandello & Cohen 1999; Rajkumar, 2021; Salvador, et al., 2020a), yet it was positively related to COVID deaths indexed in other ways at the population level (Webster et al., 2021; Ma & Chen, 2023; Salvador et al., 2020b). This latter association was related to diversity in the U.S. population and likely largely due to associated inequities in health care and education (Webster et al., 2021). Similarly, in Japan, regional variation in ecological conditions, living conditions and levels of formal education would also suggest likely important variation in the influence of cultural defaults (Kitayama et al., 2006; Miyamoto et al., 2018).

Throughout the paper, we have compared responses in the U.S. with those of Japan, Taiwan, and Korea, three different nations that we refer to as "East Asian." When compared to the U.S., these nations were more effective in their responses to the pandemic than the U.S. Yet, there are obviously differences among these East Asian countries that we have not discussed here. For instance, although US contexts value high arousal positive states more than Japan, Taiwan, and South Korea, among these East Asian contexts, South Koreans value high arousal positive states the most (Tsai et al., 2024). These findings are consistent with other research suggesting that among these three East Asian countries, South Korea is the most Westernized and places the most value on the expression of individual opinions and emotions (Beckman-Brito (2003), Aubrey (2009), and Lee & Matsumoto (2011). More comparisons are needed within these contexts to examine how differences may play themselves out in crisis response.

In addition, although much of the cultural psychology literature has included Chinese samples within the East Asian category, we did not discuss Chinese responses to COVID because relatively little information about China was available during most of the pandemic. The Chinese government's "zero COVID" policies were the most restrictive of East Asia, (VOA News, 2022) and perhaps more reflective of authoritarian policies than particular cultural defaults reflecting current behavioral tendencies of collectivism-interdependence. Yet some reports suggest that people grew weary of these policies, especially when they interfered with cultural practices of filial piety, such as visiting older relatives, forcing the Chinese government

to relax its restrictions after two and half years (Davidson, 2023).

Finally, we have not attempted here to characterize the cultural defaults of other nations and regions that likely shaped their somewhat distinctive COVID responses and outcomes (e.g., Kitayama et al., 2022; Krys, et al., 2022; Uskul et al., 2023; Osei-Tutu et al., 2021; Chen & Biswas, 2023). For instance, although Latinx contexts are also characterized as collectivistic-interdependent in orientation, emerging research suggests that psychological tendencies of high arousal positivity and less negativity are more common in these contexts than in East Asian contexts (e.g., Krys et al., 2022; Ruby et al., 2012; Salvador et al., 2024; Senft et al., 2021). Here interdependence may be realized through cultural defaults that encourage the expression of positive feelings rather than through moderation or restraint of these feelings common in East Asia (Kitayama et al., 2022). Indeed, in one study, measuring brain activity, Latinx and European Americans were both more effective than Chinese in their abilities to amplify their emotional responses (Hampton et al., 2021). In some Mediterranean contexts, a collectivist-interdependent orientation is accompanied by cultural defaults that encourage self-assertiveness rather than restraint or expression of positive feelings (e.g., San Martin et al., 2018; Greenberg, 2010; Uskul et al., 2023). Similarly, an individualist-independent orientation can be realized differently in WEIRD contexts beyond those of North America (Triandis & Gelfand, 1998; Torelli & Shavitt, 2010); for instance, whereas U.S. Americans are quite vertical and competitive in their individualism, Dutch are more horizontal and egalitarian in their individualism, which may be associated with lower arousal (e.g., Boiger et al., 2013; Vignoles et al., 2018). These cultural defaults of other contexts might also be productively analyzed for their role in shaping common sense responses to COVID and future crises.

III. Lessons for the Future: Cultural Defaults and Crisis Decision-Making

> *I want to remind America: The question is not if there will be another public health threat, but when (Rochelle Walensky, former director the Center for Disease Control and Prevention, 2023)*

Even before Walensky's dire predictions, headlines in the *The New York Times*, *The Washington Post* and *Time* magazine warned that the U.S. was not prepared for the next pandemic (*New York Times,* August 17, 2022; *Washington Post*, August 27, 2022; *Time*, March 17, 2023). This is still true in 2024. As Walensky left her post at the CDC, she admitted that "we are responsible for some pretty dramatic, pretty public mistakes, from testing to data to communications," and urged that the CDC now needs a "culture change" to stave off the ravages of the next pandemic (LaFraniere & Weiland, 2022; Walensky & Monroe, 2023).

Other researchers and practitioners in the social sciences, politics, and law have also weighed in on how current conditions and systems must be improved in order for the U.S. to be prepared for the next health crisis. Their recommendations include: addressing the existing and gaping social inequalities that were exacerbated by the pandemic; integrating fragmented health care systems; increasing trust between people and their institutions; improving science communication and knowledge translation; reducing sharp political divides; and subverting coordinated disinformation campaigns (see, e.g., Yoshikawa & Kawachi, 2021; Omer et al., 2021; Aragon et al., 2021, Reicher, 2023; Ruggeri et al., 2023; van Thiel & Cheung, 2023).

We contend, however, that none of these recommendations can be successfully implemented without a greater understanding of the specific cultural defaults that undergird these current conditions. As just one example: addressing severe and growing inequality in the U.S. will require confronting the fact that the U.S., unlike other individualist nations, is still more of an "I" culture than a "we" culture, especially in the ideological foundation and current policies of its government and formal institutions (Markus & Conner, 2014; Markus, 2017). Given the centrality of independent agency, a widespread concern for the circumstances of others and for meaningfully reducing inequality and mitigating poverty has been and will likely continue to be a particularly heavy lift in the U.S.

The list of crises that will require large-scale behavioral coordination and that would benefit from an understanding of cultural defaults is long and growing. It includes the many challenges associated with climate change, income inequality, mental illness, the replacement of human labor with machine labor, the proliferation of AI and social media, emerging technologies, migration and immigration, widespread suspicion and distrust within and between nations, and inter-group conflict and violence. Multiple teams of researchers have proposed specific "lessons" for how to best guide public behavior during a crisis (e.g., see Omer et al., 2024; Kappes et al., 2023; van Thiel & Cheung, 2023, Ruggeri. et al., 2023). An awareness of cultural defaults is easily folded into many of these lessons. For example, if quality crisis decision-making involves consideration of the "known knowns," the "known unknowns," the unknown knowns," and the "unknown unknowns" (see Aragon et al., 2021), cultural defaults would fall under the "known knowns."

To facilitate consideration of cultural defaults when responding to any one of the looming crises described above, in Table 2, we draw six initial "lessons" from our comparative analysis of the U.S. and parts of East Asia. Each lesson includes sample questions that should be integrated with other aspects of crisis-related decision-making to guide consideration of cultural defaults. We briefly discuss each lesson below.

Table 2. Using Cultural Defaults to Prepare for and Respond to the Next Crisis: Sample Guiding Questions

For U.S. Contexts	*For East Asian Contexts*
1. Recognize the role of cultural defaults in initial responses to a crisis	
What reasons or evidence justify optimism, a sense of uniqueness or high arousal? Is this response primarily a way to foster a sense of control? What reasons or evidence counter these defaults?	What reasons or evidence justify realism and similarity or low arousal? Are we waiting too long? What reasons or evidence counter these defaults?
2. Consider alternate cultural defaults to expand the scope of possibility	
Could we remain calm and wait and see before we act?	Could we decide more quickly to control the problem?
3. Frame recommended actions in terms of existing cultural defaults	
Does the recommendation allow for self-regulation and personal choice?	e.g., Does the recommendation allow for social regulation and social choice?
4. Ensure that recommended behaviors are enacted at multiple levels of culture	
In all contexts: Is a recommended behavioral recommendation reinforced by narratives, practices and policies at the interpersonal and institutional levels of culture; or are the levels misaligned?	
5. Prepare for resistance to recommended behaviors that counter cultural defaults	
In all contexts: Will common cultural defaults prevent some people from following recommended actions and generate backlash? What are ways to mitigate this resistance?	
6. Prepare for revisionist thinking that reflects and promotes cultural defaults	
When remembering and reflecting on the past crisis, are we understating the threat?	When remembering and reflecting on the past crisis, are we overstating the threat?

Lesson 1: Recognize the role of cultural defaults in common sense responses.

The first lesson is the importance of taking time to recognize the role of cultural defaults in one's past and future actions. Cultural defaults are powerful precisely because they are experienced as the necessary, moral, rational, and 'common sense' ways to behave, but this is exactly why they are often difficult to recognize. As a result, people may be unaware of the full range of possible responses and behaviors that arise from different cultural defaults.

For example, with respect to the next pandemic, we predict that in the U.S., a substantial proportion of people in general and leaders of organizations in the U.S. will demonstrate at least some of the US American cultural defaults described here. They will be optimistic that the crisis

will not occur (or if it does, that Americans will emerge relatively unscathed); if and when a crisis does occur, they will quickly search for single causes and someone (or some people) to blame; they will express high emotional arousal; they will push to take immediate action to influence the situation; they will resist being told what to do, even, and perhaps especially, if authorities mandate it; and they will see the crisis as an opportunity for growth and innovation. In contrast, a substantial proportion of people and leaders in organizations in parts of East Asia will demonstrate at least some of the defaults describe here they will be more realistic, assuming that the crisis will affect themselves and others; will notice the multiple causes that may explain it; will focus on being calm; will wait and see what others do before responding; will adjust their behavior to comply with institutional recommendations while monitoring each other's actions; and will work to ensure that they can preserve traditions and prevent the next crisis. Indeed, one of best predictions that social scientists made early in the pandemic was that cultural differences in the emphasis on freedom vs. security (a difference that applies to U.S. vs. East Asian comparisons) would predict how difficult it would be to coordinate responses to the pandemic (Van Bavel et al., 2020); and they were right (Ruggeri et al., 2023). Given the default of social regulation and social choice, restricting personal rights and freedom for the purpose of collective security and prevention of harm to others makes more immediate and obvious sense in many East Asian contexts than it does in the U.S., where the default of self-regulation and personal choice is prevalent (Faden & Shebaya, 2010).

Lesson 2: Consider alternate cultural defaults to expand what's possible.

One of the main reasons to recognize certain responses and behaviors as cultural defaults is to expand people's views of the range of responses and behaviors that are possible. The common-sense cultural defaults of one's own national context will not be easily swapped out for the defaults of other cultural contexts. And yet, a second lesson in planning for future crisis response is that decision-makers might profitably consider how the virtues of one's own set of defaults might be broadened, balanced, or nuanced by deliberately and systematically considering the benefits and the logic of other cultural defaults (e.g., Cheryan & Markus, 2020), particularly in multicultural contexts (Hong et al., 2000; Chen, 2015). Indeed, scientists' predictions about COVID outcomes were more accurate when they were part of teams that were more interdisciplinary and presumably represented a broader range of perspectives (The Forecasting Collaborative, 2023).

For instance, American optimism might be beneficially leavened with some specific "realism" from the Japanese playbook that things don't always go as expected. As U.S. decision-makers call for greater coordination among health systems in preparation for the next pandemic, a detailed comparison between the structure and organization of U.S. and some East Asian nations' health systems might provide insight into potential obstacles to this coordination (Cheung & van Thiel, 2023).

There is already reason to believe that this lesson will be useful in the unfolding crisis of climate change. While a vast majority of Americans report an awareness of the fact that climate change exists, only about 50-60% of Americans see it as a strong threat to themselves or their family members. In contrast, in many other countries of South America, Africa, and Europe—including countries where people are less aware of climate change than Americans—over 80% view it as a serious threat (Lee et al., 2015; Ballew et al., 2019). Some attention to the logic of

the realism-similarity default common in East Asia might encourage the development of U.S.-made sustainability narratives conveying the sentiment that the future of Americans on this planet is similar to others and their fate is a shared fate Time spent specifically envisioning future failures and how to prevent them, side by side with future success and how to promote them, is a productive use of functional counterfactual thinking–what might have been and what might be (e.g., Roese & Epstude, 2017). This strategy has the potential to help people develop a more comprehensive and holistic plan, while still satisfying the American influence and control default to do something. Further, a recognition that novel and complex events rarely have single causes (or single consequences) could fuel more systemic thinking. In the case of the pandemic, it could have led to plans for easy testing and uniform data collection. In any future crisis (perhaps a restriction on the use of electricity or water in the case of climate change), an intentional effort to keep Americans calm in the face of general anxiety through the use of detailed and consistent behavioral guidance could put some brakes on the predictable reactance, frustration, and anger that readily accompanies the American common sense that one's rights may have been abridged or one's freedom of choice taken away. Another example is the developing crisis surrounding emerging technologies in the U.S. (Reich et al., 2021). Rather than worry about being unduly influenced and controlled by artificial agents, a narrative that is common in current US discourse about emerging technologies, US Americans might broaden their view by adopting an idea more common in East Asian contexts, one that imagines a more interdependent and relational orientation with artificial agents (Ge et al., 2024).

The East Asian default profile we have tracked here was linked with significantly fewer deaths than the American default profile. Yet as noted earlier, in the next crisis, this particular set of defaults may not always be linked with better outcomes; in other words, the East Asian defaults identified could also be broadened and balanced. To take a page from the U.S. American motivational playbook, Japanese realism, for example, might benefit from an injection of optimism and from some greater emphasis on influence, control and promotion. For instance, with some more emphasis on creativity and innovation, Japan might more quickly take on new ventures. In the face of crises like COVID, this approach might lead to the discovery of solutions comparable to vaccine development, and such an approach might have afforded an earlier opening of Japanese borders to mitigate the economic depression that occurred during the pandemic. Similarly, in addressing environmental issues, a more concrete and innovative approach to technological development that might reduce waste and emissions could be fostered.

Lesson 3: Frame behavioral recommendations in terms of cultural defaults

Once particular defaults have been tagged as playing a probable role in decision making during a crisis, a third lesson highlights the wisdom of considering how to frame recommendations for behavior (social distancing, mask-wearing, vaccines) in terms of culturally resonant defaults. In their theory of culture change, Hamedani and colleagues (2023) suggest that "culture change can be easier when it leverages existing core values and harder when it challenges deep-seated defaults and biases" (pg. 1). Multiple research programs have established the importance of matching a message with a recipients' general motivational orientation (e.g, Lee & Aaker, 2004; Uskul et al., 2009; Stephens et al., 2012; Uskul et al., 2008). Health messages tied to independence are often more effective in the U.S. (particularly in well-

resourced and college-educated contexts), whereas messages highlighting interdependence are often more effective in East Asian contexts (Ma & Nan, 2019; Kim et al., 2017). In addition, promotion and gain-approaching frames are more effective for Westerners, whereas prevention and loss-avoiding frames are more effective for East Asians (Uskul et al., 2009), and in the U.S. messages framed with high arousal are more effective than messages framed with low arousal (Sims & Tsai, 2015).

In proposals for changing the culture of the CDC and preparing for the next pandemic, Walensky (2023) and many others in public health roles are encountering the challenges of countering the defaults associated with independence. An infectious disease violates the assumption that people are separate and unique and that their health is largely under their own control. Instead of independence, COVID highlighted the reality and importance of interdependence (Klein, 2023; Tomori et al., 2022). When it comes to health, a person is not unique or separate from others on the bus, at work or in the grocery store, and one's health is not just one's personal responsibility (Louis et al., 2023; Hook & Markus, 2020). Similarly, what the people of one U.S. state do in the face of the pandemic matters for the fate of people in other states. Currently, for example, states in the U.S. are not compelled to report their health data to the CDC; it is their choice. And in the early months of pandemic, many states did not report their constituents' "private" data, which resulted in an underestimation of the severity and spread of the pandemic in the U.S. Thus, changing the culture at the CDC means encouraging connection and collaboration among autonomous state public health systems, establishing uniform standards for data collection, and requiring that all states report data on the health status of their populations (Walensky, 2023), actions that require interdependence. However, messages of interdependence in an independent context are often demotivating (e.g., Hamedani et al., 2013, 2023), just as messages in independence in an interdependent context can be (Kilzcec & Cohen, 2017; Thomas & Markus, 2023).

Lesson three carries the idea that fostering a sense of interdependence at both the individual and the organization level in independent contexts like the U.S. will require creative messaging and storytelling (Walsh et al., 2023). One large study conducted in the U.S. early in the pandemic (Pink et al., 2023) tested the effectiveness of 56 persuasive short messages encouraging prevention behaviors. Many of the most convincing messages leveraged some aspect of independence along with interdependence (Kitayama et al., 2022; Schwartz & Cheek, 2017). These messages included statements that empowered U.S. Americans by suggesting they had influence and control over their health while adhering to health guidelines: "Stay home and protect yourself," "Take action now," "We can do our part," and "You can help people prevent the spread of COVID." One particularly effective intervention during the pandemic included the message: "a vaccine has been reserved for you" (Milkman et al., 2021). This frame invoked individuality and uniqueness but also some aspects of interdependence like "others are considering you" and "you belong." Efforts toward behavioral change to protect the environment will also benefit from considering how to leverage the powerful cultural defaults of a given context to produce desired behavioral change. In the U.S., messages such as "You can make a difference" "Choose renewable energy" "Take control and protect your planet" might be particularly effective. In Japan, reminding people to recycle and reuse as well as to reduce use of plastics and paper in packaging as a way to respect others and improve their lives might be more effective. In addition, blending traditional Japanese values of 'mottainai' (the ethos of treasuring

resources and preventing waste) with a modern environmental awareness might better promote behavior change (Matsuzaki, 2020).

Lesson 4: Address cultural defaults at individual, interpersonal, and institutional levels of culture

Lesson four underscores the fact that cultural defaults are not only reflected in peoples' attitudes and mindsets. Default understandings reflect long-standing values and moral commitments that have been built into the norms, institutional policies, practices and artifacts of their respective cultural contexts over considerable periods of time. The "culture cycle" is a useful conceptual tool for thinking about how people shape and are shaped by their cultures. This framework depicts four nested and equally important aspects of culture—Ideas, Institutions, Interactions, and Individuals (the four "I's")—in an ongoing, dynamic, interactive system (Markus & Conner, 2014; Markus & Kitayama, 2010; Hamedani et al., 2023). In any cultural context, many behavioral patterns can be identified, but a *cultural default* is likely to be reflected at all four levels. Thus, interventions to change behavior are more likely to be more effective if they occur at all four levels.

For example, during the first few months of the pandemic, many public figures and elected officials in the U.S. launched campaigns to invoke a sense of connectedness and unity. New York governor Andrew Cuomo, in daily reports to the mainstream press, reminded New Yorkers that "*We* are in this together" and "*We* are one" (Guterres, 2020; Sobande, 2020). Signs, billboards, videos and social media posts reinforced and distributed this sentiment in many parts of the U.S., tapping into the belief that people need each other and are stronger together, a belief shared by many families, communities, and cities in the U.S. (Brannon et al., 2015; Markus, 2017; Markus & Conner, 2014; Stephens et al., 2012), and across the world during the pandemic (Pick et al., 2022). In some states, these messages were quite effective and wearing a mask became a civic duty (Kemmelmeier & Jami, 2021). Yet these calls for interdependence in the U.S. were relatively short-lived and most notably, were not widely and uniformly reinforced in many schools, workplaces, and businesses, or in the policies, practices and norms of most institutions. It is one thing to say, "we are in this together," but if the structures that afford togetherness and coordination of intent and expertise do not exist, these appeals are unlikely to take hold for any extended period of time (Hamedani et al., 2023). For similar reasons, attempts to prioritize individual achievement and self-regulation in many East Asian contexts often fail to gain long-term traction (Ogihara, 2017; Uchida et al., 2024). Encouraging an orientation toward influence and control with messages of 'You can do it' and 'The power of each individual,' are likely to have little impact on behavior in a system rooted in social regulation and practices that foster extensive consultation and consensus prior to a decision.

As researchers in multiple fields increasingly focus on creating, testing and distributing new mindsets, narratives, stories, messages, practices, norms and policies in the hope and promise of behavioral change (e.g., Schaller & Murthakrishna, 2021; Walton & Crum, 2021; Paluck, 2009; Paluck et al., 2021; Chater & Loewenstein, 2022; Walsh et al., 2023), it is clear that successful interventions—those that stick and change behavior in desired directions—will require support, positive representation and structural affordances throughout all four levels of the culture cycle. As noted above, culture change at the CDC will require nothing less. The same is the case for the many sustainability efforts associated with climate change. To the extent that a move from gas to

electric vehicles, for example, can be modeled and incentivized in schools, workplaces or churches, reflected in the memes and social media posts of high status and influential people, particularly from younger age groups, and made easy through structural and institutional changes such as accessible charging stations, and tax breaks, the more likely it will occur. In East Asia, sustainability efforts that focus on the need for less and different types of packaging will have to address the long-standing importance of wrapping and packaging in conferring respect in practices of gift-giving (e.g., Joe, 2022; Matsuzaki, 2020), and this will also likely require simultaneous multi-level interventions.

Lesson 5: Expect resistance to recommended behaviors that counter cultural defaults

If nothing else, the pandemic response in the U.S. teaches that it is essential to plan and prepare for resistance to novel practices or policy recommendations designed to change people's usual ways of doing things, even when recommended actions could save lives (Hamedani, et al., 2023). For example, in the U.S., where free choice is a sacred value and a moral ideal, ordering, requiring, and even asking people to do something for the good of others, or even for oneself, is likely to be received unfavorably by some large proportion of the population, if not immediately, over time. Therefore, in cases where decision and policy makers have no other option but to recommend behavior that counters a cultural default, they might mitigate some resistance with concrete timelines and specific guidelines, indicating how long they will pursue a given approach, and consistently communicating the logic of their plan. Overcoming backlash will also be easier when there are trusted messengers who provide the rationale, the instructions, and the timeline for counter-default behavior (Hamedani et al., 2023), but policy makers need to be prepared to comfort, provide evidence, reward, and consistently reassure their constituents that recommendations that run contrary to cultural defaults may actually be helpful.

Even in contexts not as foundationally rooted in resistance as the U.S., resistance to recommendations that run counter to a default is still a possibility. For instance, in Japan, by Spring of 2023, the government encouraged individuals to decide on their own whether to wear a mask. Yet many Japanese found it difficult to make that choice. Where the default is social regulation and social choice, "free" decision-making without social constraints is complex. People can be reluctant to make personal decisions about actions that are visible to others and that have social consequences, especially after being told to engage in opposite actions over an extended period of time. As a result, many Japanese continued to wear masks, sanitize surfaces, and engage in other practices that had minimal impact on the spread of COVID for many months after they were no longer officially encouraged to.

Lesson 6. Prepare for revisionist thinking that reflects cultural defaults

Cultural defaults were at work throughout the pandemic—they lent meaning, generated expectations, motivated and regulated action. Lesson six refers to another function, perhaps one even more consequential. During the pandemic and especially in its aftermath, cultural defaults organized memory. As the specific details grow fuzzy (e.g., How many people died? How long were we locked down? We got rid of it, didn't we?). What will Americans individually and collectively remember about Covid? Here a comparison with the 1918 worldwide Spanish flu which took the lives of 50-100 million people worldwide, 675,000 of them Americans, is

particularly informative. According to many historians, it has been largely forgotten (e.g., Crosby, 2003; Bristow, 2012). The differences between the two pandemics in terms of science and technology are vast. Yet the similarities are also striking. As recently outlined in a compelling analysis by Bristow (2020), the parallels for the American experience include: inconsistent guidance at the presidential level—then President Woodrow Wilson never spoke publicly about the pandemic and did not model preventative measures; uncoordinated decisions were made at the local level by health officials; there was massive resistance to these measures, including an anti-mask movement; and racial minorities suffered the most. Bristow offers that the most startling feature of the 1918 pandemic was "how quickly it disappeared from American consciousness" and concludes that in the intervening century Americans have made almost no significant institutional changes designed to protect the most vulnerable. She chalks up "public amnesia" and a lack of recognition of the parallels between the 1918 pandemic and the COVID pandemic as a failure to "come to terms with American exceptionalism."

Epidemiologist Katelyn Jetelina observes a similar developing amnesia about the Covid pandemic and claims that Americans are entering a new phase of the pandemic she called "revisionism."

> *I think there's an attempt to revise 2020 really under the comfort of 2023 vaccines and treatment and immunity. And I think there's a couple of reasons for that. One, there's bad actors. There's also a really a lack of nuanced talk around trade offs, but also it is just a normal human response….so I think we're in a really tough spot. The past three and a half years were really tough for the United States, particularly because we thought we were prepared, and we were not. And it really tested our morals, our values, our psychology, and our culture in the States as well (Jetelina, August 29, 2023, as cited by Klein, 2023).*

Jetelina is right. Revisionism is a universal human experience, a normal consequence of remembering that unfolds according to what is salient and important in experience. And just what people remember and forget will depend on their COVID experiences which will be organized in some important part by their culture-specific defaults. Given their orientation to optimism and a sense of uniqueness, as well as to influence and control, many Americans will likely remember the innovation of a highly effective vaccine in a short period of time but may be more likely to forget that the U.S. was a leader in excess deaths (Galvani, et al, 2022). Given the constant media coverage of the angry clashes and protests by many Americans about masks and vaccines, many are likely to remember the partisanship as the only story of the pandemic. The lack of communication among independent health care systems that made it difficult to chart the course of the disease will fade from memory if it was attended to or encoded at all.

A different set of memories may pervade in East Asia. For example, in Japan, the economy struggled during the pandemic, social interactions decreased, and there was frustration with the government's decision-making. Realism and prevention defaults might result in people overlooking Japan's success in controlling the COVID virus compared to the U.S. and other countries, and instead focusing on their country's struggles and challenges when reflecting on how Japan responded to the pandemic. Revisionism may make it more difficult for decision makers to consider the possibility that they could have acted in a different way. One strategy

aimed at guarding against revisionism would be to provide detailed summaries of events as observed by people participating in one's context paired with summaries from those *outside* whose defaults would likely differ from one's own. Another would be to take lesson 2 to heart and consider alternate defaults when reviewing the events of the pandemic, and to systematically simulate the use of other cultural defaults to help consider what they might have done.

Concluding Thoughts

In 2020, people everywhere faced a novel coronavirus that gave rise to big and frightening existential questions without obvious answers. The rare and universal reach of COVID brought national differences into high relief, with the East Asian countries of Japan, Taiwan, and South Korea clearly outperforming the United States in responding to and controlling the resulting pandemic. While a long and growing list of factors certainly contributed to this disparity, we have proposed here that understanding this striking difference requires attention to culture, and particularly, to the *cultural defaults*– common sense, taken-for-granted ways of thinking, feeling, and acting—that pervade these contexts and that shaped meaning-making during the pandemic.

Throughout our analysis, we were struck not only by how much research that has been conducted over the last thirty years that helps explain cultural variation in pandemic response, but also by the many questions that remain unanswered and that require future research. What are the cultural defaults of the contexts of Europe, Middle East or Latin America (for recent research related to this question see Kitayama, Salvador, et al., 2022; Krys et al., 2022)? Did these other cultural defaults shape responses to COVID? Are the defaults we have identified here more or less common in samples that vary by political orientation, race, ethnicity, age, gender, religion, generation, etc.? Have these cultural defaults changed over time? What emerging ideas, practices and products afford these defaults and which counter or undermine them? What defaults will be evident when the U.S. and East Asia are compared not against each other but against other regions or nations? What are innovative ways to measure the presence and influence of these defaults in various aspects of behavior; for example, can large language models track the presence of these defaults and others in speeches by government officials, public health announcements and social media exchanges as a crisis unfolds? And many more.

Despite these unanswered questions, the COVID pandemic showed how cultural defaults in the U.S. and parts of East Asia could be used to help us better prepare for future crises. In closing, we join Rochelle Walensky and other officials who urge people not to forget the important lessons that COVID can teach us. High on the list is the critical role that cultural defaults can play in shaping human behavior, even (or especially) when facing a universally threatening global pandemic like COVID. The need to understand not only that culture matters but also *how* and *why* it matters to everyday lived experience is in the immediate public interest and more pressing now than ever.

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