

# PSYCHIATRY FOR BETTER WORLD: COVID-19 AND BLAME GAMES PEOPLE PLAY FROM PUBLIC AND GLOBAL MENTAL HEALTH PERSPECTIVE

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## SUMMARY

*Blame games tend to follow crisis, be they at local, national or international level related to political, financial or health issues. COVID-19 crisis from the very beginning has been followed by divisive and disruptive psychosocial and political blame games. Active or passive blaming is an inherent feature of human beings in order to shift responsibilities onto others, single out a culprit, find a scapegoat and pinpoint a target. Finger pointing, blame games and scapegoating are associated with creation of binaries that identify agency as good or bad, right or wrong, moral or immoral. The scapegoat is expectedly always bad, wrong and immoral, commonly black evil. The detrimental effects of the COVID-19 blame games are seen in a lack of cohesion and coherence in the anti-COVID-19 solving strategies. Fighting the COVID-19 crisis all countries and nations need to join efforts on defeating it and to shift from a destructive blaming and zero-sum type of thinking to a much more creative, systemic and humanistic type. Effective response to COVID-19 is related to sowing the seeds for humanistic self and empathic civilization, rather than blaming, scapegoating and xenophobia.*

**Key words:** COVID-19 - blame-games - theory of conspiracy - compassionate society - empathic civilization - public and global mental health

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## INTRODUCTION

*Men are only clever at shifting blame from their own shoulders to those of others.*

*Titus Livius (59 BC - 17AD)*

The COVID-19 pandemic, according to some opinions the modern Waterloo of western authorities at the political, the scientific, and the social level (Douma et al. 2020), is posing numerous and unprecedented challenges and threats worldwide, involving blame games, scapegoating and psychological or hybrid wars at local, national or international level (Jakovljevic et al. 2020). When confronted by difficult situations or problems they cannot solve, many people, consciously or unconsciously, tend to find someone to blame, stigmatize or demonize (see also Behm 2020). Blaming and scapegoating of one group by another has been used throughout history, and still today, as a way to incorrectly explain why certain short or long-term social, economic, political or health problems exist and harm the group doing the scapegoating. It also often occurs when resources are scarce. According to Lozano & Laurent (2019) we live in a culture where people are strongly motivated to avoid their own responsibility and appearing blameworthy and likewise they are too ready to point their fingers at anyone but themselves when things go wrong. Active or passive blaming seems to be an inherent feature of human beings in order to shift responsibilities onto others, single out a culprit, find a scapegoat and pinpoint a target. Finger pointing and scapegoating is predicated on the binary or "black and white" thinking and zero-sum thin-

king and information processing which identify agency in rigid manner as good or bad, right or wrong, moral or immoral. The scapegoat is, as it is to be expected, always bad, wrong and immoral, commonly villain or black evil. The sad and detrimental consequences of COVID-19 blame games are manifesting in a lack of cohesion and coherence in the anti-COVID-19 solving strategies and in the fact that "in the battle against coronavirus, humanity lacks leadership" (Harrari 2020). The gap between public trust in WHO, scientists, experts, professors on the one side, and politicians and various interest groups on the other, is seen internationally and associated with blame games, scapegoating and conspiracy theories (Flinders 2020). The blame game can be defined as the default method to shift responsibility to or to put guilt on or demonize somebody to have caused the problem. In modern politics as well as in one related to COVID-19 actors play blame games trying to deflect blame by blaming others when policies are contested, not matter whether it is a word about national or international levels, democratic or autocratic ("command and control") political systems (see Heinkelmann-Wild & Zangl 2019). American politicians and organizations have accused/blamed China for the crisis, while China has sought to pass the buck back to the United States in what, by early May, was an increasingly 'war of words'. Some even claim the virus was a creation of Chinese experts for military use as biological weapon. World Health Organization (WHO) is blamed from different sides for helping China hide crucial information. Donald Trump was widely interpreted as trying to scapegoat the

WHO by withdrawing American funding. In Europe Italy was accusing the EU of being too slow to help member states. Jewish communities around the globe report an increase in annual anti-Semitic incidents.

Blame games as psychological and social processes tend to follow crisis, be they at local, national or international level related to political, financial or health issues. COVID-19 crisis from the very beginning has been followed by divisive and disruptive psychosocial and political blame games. Why do many people, particularly politicians, influencers and leaders blame and scapegoat others when they find themselves faced with problems is an important issue from the perspective of psycho-cultures and public and global mental health. The aim of this article is in shedding some light on mental health's aspects of COVID-19 infodemic, conspiracism, and blame games.

## **GAMES PEOPLE PLAY: WHY SOME PEOPLE LIKE TO BLAME OTHERS**

*Scapegoating is the practice of singling out any party for unmerited negative treatment or blame. Although, in many cases the scapegoat is an individual (whether a child, employee, or peer) there are plenty of examples of ethnic or religious groups, divisions of a business, government departments, industry sectors, and even whole countries.*

*Dr Graham Wilson (according to EE 2017)*

Human history is a complex story about variety of games people have been playing, full of conflicts, fights and wars as well as of successful cooperation, solidarity and empathy. When people play games, no matter political, social, love or war ones, they feel good when they win and bad when they lose. Some wise people use to say that life is a game associated with pleasure and purpose of living. Game theory is a theoretical framework for conceiving social situations among competing players and producing optimal decision-making of independent and competing actions in a strategic setting. The key to game theory is that one player's payoff is contingent on the strategy implemented by the other player. The game model identifies the players, identities, preferences, interactions and available strategies and how these strategies affect the outcome. Human interactions involve potentials of cooperation, solidarity and harmony as well as blame, conflict, war and disaster. Game theory applies to a wide range of behavioral relations and applications in psychology, evolutionary biology, politics, economics, business, computation and war, etc. Games in transactional analysis (TA) have not only a superficial social level of transactions but also deeper, psychological and existential levels and meanings. The key terms involve game script, players, freedom, barriers, strategy, payoff, purpose, information and dis/misinformation set and equilibrium. In TA script represents a story and usually an unconscious life or game scenario. Script is predicated on what we have learned, on beliefs we developed about who we are, what the world is

like, how we relate to the world and other people, how the world and other people (should) relate to us.

Social interactions, games and decision making are complex processes that require substantial cognitive capacity, awareness of the context of the interactions and decisions, inference of the others' mental states (mentalization, theory of mind), understanding motivation and position taking of others, and consideration of the potential consequences of decisions for all parties. When something bad or unexpected happens, humans almost always seek an explanation and someone's responsibility. From the public mental health perspective it is very important to differ between putting responsibility on somebody on one side of the coin and blaming and scapegoating on the other side. According to "attribution theory" most people account for their own behaviors in different way than they do the behavior of others. Many people tend to see problems as caused largely by external or situational factors related to the others, while they tend to attribute success to their own personal qualities (so-called pattern "taking credit and shirking blame"). By contrast, they tend to blame others for problems and shortcomings, particularly those designated as competitors or enemies. The key terms within the concept of blame games are the blame attributions, the blame object (a contested failure: behavior, act or policy for which blame is attributed), the blame sender (the blamer, the persecutor) and the blame target (the blamed, the victim, the scapegoat) and the blame shifting (blaming someone else for one's own failures). Blame games involve judge others (the scapegoat) associated with a range of hostile, negative first-order emotions (anger, hate and resentment) towards which the blamer (the persecutor) has a specific, accompanying second-order attitude that refers to a feeling of entitlement, a feeling that these hostile, negative first-order emotions are what the blamed (victimized) subject or group deserves (Pickard 2013). The blamer believes that the blamed has acted badly, or has bad motives or intentions, or he/she has a bad or evil character. The Karpman's "drama triangle" concept or the Emerald's (2009) "dreaded drama triangle" (roles of "Persecutor", "Victim", "Rescuer") can help in better understanding of individual and collective psychodynamics of blame games. It is a socio-psychological model that maps a type of destructive interactions that may occur between people in crisis states associated with responsibility, power and destructive and shifting roles people play. Life script, drama triangle and games can be useful in understanding interactions and conflicts between individuals, groups and nations/states such as blame games and scapegoating. In crisis like present one related to COVID-19 pandemics, due to their scripts and mental models many people tend to get polarized, become mired in extremes, engage in diverse games that generally involve winners and losers, victims, persecutors and rescuers. Games are series of duplex transactions which lead to a switch and a well-defined

predictable ‘payoff’ that justifies a not-OK or discounted life/communication position (see Berne 1966). The switch refers the moment when internalized script’s utility breaks down and player feels sad, confused or angry. Payoff is the usual, expected result of the game, wherein the players end up feeling a loser or winner. In this context the dreaded drama triangle indicate that COVID-19 blame games represent destructive “vicious circle” games. Unfortunately, in crisis states people commonly and unconsciously behave as a continuing danger to themselves and others

A victim as a scapegoat is an individual, group, nation, or entity who is targeted for blame for something they are not responsible for. The term scapegoating comes from the Hebraic tradition of the Day of Atonement referring to the custom of sending the goat, laden symbolically with the sins of the people of Israel, into the wilderness alone to die for them (see Ellison 2017). In social psychology and psychiatry scapegoating is a process by which a person or group is unfairly blamed for something that they didn’t do, while the real source of the problem is either never seen or purposely ignored. Scapegoating is more likely to occur when people are distressed, afraid, and experiencing oppression or damage. The process can be conducted as a one-on-one phenomenon (“he did it, not me”; “he put you at the greater COVID-19 risk, not me”), in a one-on-group manner (“I must go in self-isolation, because they went to enjoy skiing in Italy”), group-on-one form (“he was guilty because he did not go to self-isolation after coming back from skiing in Italy”), and “group-on-group” (“Jews were guilty for the problems of German people after World War I” resulting in the Holocaust; “Chinese people are guilty for COVID-19 pandemic”). In group psychodynamics, scapegoating occurs when a group finds a common enemy on whom to focus all of its negative energy and it can be blaming an outside group or blaming someone within the group (see also Ellison 2017). In our context the “group-on-group” scapegoating means that one group across lines of race, ethnicity, religion, or national origin, blames another for COVID-19 problems that we collectively experience which may be social, economic, political, or health in nature.

## **COVID-19 AND BLAME GAMES FROM THE PUBLIC AND GLOBAL MENTAL HEALTH PERSPECTIVE**

*It would be irresponsible to suggest the source of this outbreak was an error in a Chinese military biological weapons programme... But without greatest Chinese transparency we cannot (be) entirely completely sure.*

*Tobias Ellwood (see Wikipedia 2020)*

The reactions of the politics and media to COVID-19 in addition to real huge dangers for health and life of

many millions people have opened many pathways to poorer public and global mental health. As more people have been infected with SARS-CoV-2, the more “whose fault” questions and use of blame in personal posts have been registered. Some authors reported that the public blamed not only individuals who put others at greater risk, but also governments, public agencies and international organizations (see Liao et al. 2020). The whole world has been entangled in the multilateral COVID-19 related blame games hampering national unity in many countries and optimal international cooperation and global solidarity. US-China relations have strongly deteriorated due to bad politicization associated with blame games. Harsh rhetoric, blaming, threats and punitive policies reflect badly on the public and global mental health. US historical role as a global world democracy leader has been undermined just in time when the world is in an urgent and dramatic need for humanistic leadership in collective confrontation with global crisis. China tries “to portray itself as a Good Samaritan” and “the world’s savior” (Verma 2020). The role and authority of the WHO have been put under question from many sides. The USA president Trump called the WHO “very China-centric” and has announced he is suspending funding to the WHO (The Guardian editorial 2020).

There is an urgent need to unpack and overcome the USA-China tug-of-war in order to foster global cooperation to tackle the COVID-19 global threat. When COVID-19 was declared to be a pandemic, soon China has been persecuted by various countries, particularly the USA, for the spread of COVID-19, for suppressing information and not taking measures which could have prevented the pandemic. Local officials in Wuhan silenced eight doctors, including ophthalmologist Li Wenliang, gave them “education”, “criticism” and police warning against passing along information about the corona virus (Verma 2020). The warning of the experts from 2007 that “the presence of a large reservoir of SARS-CoV-2-like viruses ... is a time bomb” and from March 2019 that it is “highly likely that future SARS- or MERS-like coronavirus outbreaks will originate from bats” were well ignored by Chinese authorities (Verma 2020). On the March 19, 2020 the USA president Donald Trump proclaimed “The world is paying a very big price for what they did ... It could have been stopped right where it came from, China”. According to some research “if China had acted three weeks earlier, infectious cases could have been reduced by 95 percent” (Verma 2020). In blaming spirit SARS-CoV-2 was called “Chinese virus”, “Wuhan virus”, “China virus”, “Kung-Flu” and “CCP virus” (Chinese Communist Party virus) which have political, xenophobic and racist connotations and motivations. The blame game could have been recognized by the articles similar to those in Washington Post (March 20, 2020: “Don’t blame China, blame the Chinese Communist party” (Al Afnan 2020). On the other side, Chinese politicians and media have launched a campaign to question the origin of SARS-

CoV-2 and tried to shift blame on the USA. Chinese Foreign Ministry spokesman Lijian Zhao wrote on Twitter “It might be (the) US army who brought the epidemic to Wuhan. Be transparent! Make public your data! US owe us an explanation!” (Davey 2020). In the People’s Daily (March 19, 2020) was published: “Don’t fall for it! Trump is using ‘Chinese virus’ label to cover up his mishandling of Coronavirus” (Al Afnan 2020). In some Chinese media the USA was labeled as the “Enemy of the world” (Verma 2020). In addition to blaming the USA for spreading COVID-19, China’s propaganda has undertaken many activities to disassociate China from the negative COVID-19 narrative and create positive image in the fight against COVID-19 as a Good Samaritan providing medical assistance and personal protective equipment to numerous countries. According to Verma (2020) China’s actions reflects their traditional virtue of repaying kindness with greater goodwill related to the quote from the Book of Songs: “You throw a peach to me, I give you a white jade for friendship”. The narrative of China winning the war against COVID-19 sends the Chinese people message that “China is the world savior” and an essential global superpower led by the Chinese Communist Party.

In addition to dirty blame games, dramatic reporting about COVID-19 and apocalyptic messaging about millions of dead people, coming recession, uncertainty, physical isolation from friends and colleagues, fear of infection, suffering and dying, losing family members, income or job unemployment and poverty have been terrifying and hopelessness inducing and despair provoking (see also Patel 2020). The rise of distress, frustrations, fragility, irritability, aggressive behavior, and fearfulness as well as an increase of the different stress-related mental disorders such as anxiety and sleep disorders, depressive disorders, post-traumatic stress disorders is not surprising. When important psychological and mental health needs are frustrated people are more prone to produce misinterpretations and believe in conspiracy theories. Fake news, misinterpretations, political polarization and conspiracy theories commonly fuel blame games, hostility and scapegoating towards groups, nations, or governments seen as responsible for COVID-19. Polarization among people can be manifested as attitudinal polarization concerning partisans taking extreme opposing issue positions or affective polarization referring to partisans disliking, distrusting and even hating those from the opposite party/ies or mixed one (van Bavel et al. 2020). Polarizing among people undermines empathy and increases dehumanization, violence and punishment all those who are different, stigmatized and blamed. Associating corona virus outbreak with a certain demographic or geographic region is very detrimental because it damages trust and cooperation, and induce hate attacks and crimes (Lai 2020). Chinese people across the world have been pointed out for the

creation and spread of virus putting ordinary people at dire risk of various forms of attack and paranoid sinophobia (sentiment against China, its people, overseas Chinese, and Chinese culture) accusations. On the other side, anti-Western sentiments among Chinese communities have been registered all over the world. In India, Muslims were scapegoated for the spread of the virus (Lai 2020).

Blame games mentality is related to the lack of empathy, and lack of empathy is a hallmark of psychopathy associated with callous selfishness and disregard for the well-being of others, guiltlessness and lack of remorse, moral wrongdoing, social conflicts, arrogance and blaming others. Low empathy leads people to blame others and commit heinous acts. Some blame games are very maddening while others are reactions to maddening. The creation of a villain (scapegoat) necessarily implies that of a hero (rescuer), even if both are purely fictional (Burton 2013, 2020). Blame games are primarily characteristics of paranoid and nihilistic political psychocultures, but also in some smaller degree of narcissistic psychoculture (see Jakovljevic & Tomic 2016, Jakovljevic 2017, 2018). Psychocultures are based on the collective programming of the mind which distinguishes (collective) mentality and value system of the one group from another. In paranoid political psychoculture (“we are OK, they are not OK, the world is a dangerous place) life is perceived as a battle and the world as a battlefield; the history is made and written by winners; man is wolf to man (“homo homini lupus est”); suspicion is present everywhere, no one is to be trusted so that conspiracy theories are in their prime (Jakovljevic et al. 2019). In an environment of absolute distrust and suspicion, everyone strives to prove his/her rightness by blaming others before being blamed. The essence of this psychopathological political culture is the following belief: Better get them or they’ll get us first, someone always has to loose; better make sure that we do not end up as losers (Jakovljevic et al. 2020). Narcissistic people cannot tolerate the idea that they might be criticized or blamed, so they accuse someone else instead. They need to make others their targets of blame to feel superior, which they truly believe they are. This often takes the form of outing themselves up by putting others down, trying to be winners and make others to be losers and repeatedly demanding others to be submissive. Blaming others may be related to the ego defenses such as projection and displacement. In displacement uncomfortable emotions such as frustration, insecurity, shame, anger, envy, anger, are displaced or redirected onto another, usually more vulnerable individual or group such as immigrants, minorities, etc. Scapegoating enables the scapegoaters to discharge and distract from their negative feelings, which are replaced or overtaken by a crude but consoling sense of affirmation and self-righteous indignation. Using projection paranoid actors commonly and narcissistic actors less commonly impute to others unflattering characteristics

that they worry about possessing themselves. They claim that others hate them and try to undermine their interests and security and all this may be to make themselves feel more assured about their own qualities and policies. Scapegoating contributes to dividing world of “they/them versus we/us”, we are OK, good people, they are not OK, they are bad people, real villains. Exposure of ulterior motives behind blame games are commonly related to the truth that always beats lies in the end. At the end blame gamers usually eat the bitter fruit of their own making confirming the saying “shift the blame only to have it backfire”.

Non-zero-sum thinking is strongly associated with public and global mental health promotion. The healthy alternative to vicious circles of the dreaded drama triangle is the non-zero sum win-win triangle (roles “Creator” instead “Victim”, “Challenger” instead of “Persecutor”, “Coach” instead “Rescuer” – see Emerald 2009), a virtue-based or virtuous circle which involves mutual respect, empathy, solidarity and cooperation (I’m OK, We are OK, You are OK, They are OK positions in communications – see Harris 1969). From the public and global mental health perspective it is very important to recognize non-zero-sum nature of the COVID-19 because “one else’s infection is a threat to oneself and every-one else” (van Bavel et al. 2020). According to the zero-sum thinking and games hoarding protective materials (sanitizer, mask, even vaccines) beyond what is necessary may be psychologically compelling short-term interest, but on the other side it can be self-defeating because others’ access to preventive measures is very important for fighting COVID-19 infections and longer-term collective interest (van Bavel et al. 2020). Heroisation, the investment of hope, empathy and trust in a context of risk and unease is also the creative alternative to blaming (see Atlani-Duault et al. 2020). The term hero comes from the Greek word heros what can be translated as “protector” or “defender”. History testifies to us that great and heroic deeds were made in the periods of great crisis, distress and sufferings due to empathy, altruism and solidarity. In time of crisis, many people stand out and step up to save lives and make the world a better place. Heroism, seen as self-sacrifice in the service of others, is the best of human nature and beacon of light in the human world. Heroes can be, for example, whistle-blowers like Dr Li Wenliang who put his career and life on the risk line in order to alert public and likewise selfless health and sanitation workers at COVID-19 first response systems who generate essential information and knowledge and save human lives in dire working conditions. Across the world heroes are also numerous volunteers who are helping some of the most vulnerable and so they show courage and resilience. Due to heroism, empathy and altruism COVID-19 pandemic is an opportunity for our collective hero’s journey to compassionate society and empathic civilization (Jakovljevic 2020).

## HUMANISTIC LEADERSHIP FOR EMPATHIC CIVILIZATION: PSYCHOCULTURE OF DIALOGUE AND COOPERATION INSTEAD OF THE BLAME GAMES

*“What a piece of work is a man!  
How noble in reason! How infinite in faculty!  
In form, in moving, how express and admirable!  
In action how like an angel!  
In apprehension how like a god! The beauty of the world!  
The paragon of animals!”*

*William Shakespeare: Hamlet*

*I believe empathy is the most essential quality of civilization.*

*Robert Ebert*

Global problems require global solutions and we urgently need a new global consensus about the rules and procedures by which the global community operates in the best interest of the humanity as a whole (see also Behm 2020). COVID-19 pandemic clearly shows that Europe as well as the Global World needs a common disease authority as well as a moral authority and therapeutic strategy. Times have definitely changed with rethinking everything and the new paradigms and concepts on great leaders and leading people have appeared with focusing on creating new mental models and frameworks finding the greatness in people and unity in empathy and diversity because interdependent people combine their own efforts and abilities with the efforts and capacities of others to achieve their greatest success. The COVID-19 pandemic has stopped hyper-globalization and shown how vulnerable and fragile it can be and it has incited the trend towards de-globalization. We agree with Tedros Adhanom Ghebreyesus, WHO Director-General, that “the antidote to this virus is national unity and global solidarity”. Indeed, the antidote to COVID-19 is the human spirit manifesting in empathy, altruism, national unity, global solidarity, and glocalization “think globally, act locally” as a new phase of globalization. Empathy is creative process that activates drive in human beings to see, feel, mentalize, and accept another’s perspective of the world and create joint vision of it through culture of dialogue and collective learning. Empathy acts as a bridge between people of good will forming collective mind and humanistic self and drives people to step out from selfishness and practice altruism. COVID-19 is in the same time a public health crisis and a possibility for downsizing the consumer economy and increasing environmental awareness through glocalization in network of societies in which people do live much more locally, but thinks much more globally and empathically (see Gofmann 2020). COVID-19 crisis is also an opportunity for better future if humankind realizes the importance of public and global mental health and recognizes and accepts a real possibility of a collective hero’s journey to compassionate society and empathic civilization (Jakovljevic 2020). Societies that have usually proved successful are

those that respect each other and cooperate with one another in a spirit of trust and mutual respect and do not enter the blame games and destructive collective emotions. Humankind is at the cross-roads: to travel down the route of blame games, global disunity, selfish societies, and narcissistic, paranoid and nihilistic psychocultures or to choose the path of humanistic self, global solidarity, humanistic psycho-culture, and empathic civilization (see Jakovljevic et al. 2019). COVID-19 pandemic stresses importance of leadership across families, work-places, local communities, nations and global world. The global leadership is now very needed for international cooperation, solidarity, empathy and coherence for overcoming the global world health crisis involving spirit of glocalization and the glocal management in a sense “think globally, act locally”. Research shows that people tend to prefer leaders who cultivate a sense that “we are all in this together with a common destiny” while building a strong sense of shared social and humanistic identity can help join and coordinate efforts to manage threats such as COVID-19 (see van Bavel et al. 2020). Many different professions, institutions and agencies will have to collaborate to formulate efficient solutions for multiple problems and create global joint vision of compassionate society and empathic civilization. Working in interdisciplinary and international teams requires competencies in empathic cross-cultural communication to efficiently cooperate with different communities in education for compassionate society and empathic civilization and building joint projects in different business, science, medicine and culture fields.

From the perspective of public and global mental health our civilizational progress depends on our readiness to expand our empathy from the family and the tribe to humanity as a whole. According to an interesting model (see Walther et al. 2019) empathy can be conceptualized as a skill, a practice orientation, and a way of being. *The skill dimension* (affective sharing, self and other awareness, perspective taking, emotion regulation, mode switching) refers to socio-cognitive processes which modulate empathic communication, relationship building (“stepping into the shoes of another” and “seeing the world through someone else’s eyes”) and decision-making (cooperation and partnership). *The orientation dimension* (epistemological openness, micro to macro focus, reflective value awareness, commitment to values pluralism) refers to mental dispositions that influence how human beings engage in real life situations (communicate, identify, connect and cooperate with those who are different). *The being or existential dimension* involves life position, identity, dignity, worth of people and natural environment; holistic service to society and humanity). Empathy is creative process that activates drive in human beings to see, feel, mentalize, accept and internalize another’s perspective of the world and create joint vision of it through culture of dialogue and collective learning. Empathy acts as a bridge between people of good will forming collective mind and humanistic self and drives

people to step out from selfishness and practice altruism and so it replenishes and renews vital human capacities. So, public safety, health and welfare are strongly related to empathy. In addition to the great importance for healthy human relationships and mental health, empathy is also crucial for professional practice and teamwork, public welfare and peaceful development of human’s society and global world. Research has shown that empathy is not only an innate ability but also a learnable skill so it can be developed and strengthened through diverse institutional inputs and four major categories of education and empathy training: 1.modeling, 2.didactic, 3.role playing, and 4.experiential (see Numanee et al. 2020). All in all, empathy is a human hard-wired natural ability which needs to be continually cultivated and fostered. Some universities all over the world have designed courses to enable students to learn and practice empathy and compassion in their academic, social and family life. Empathy programs should be institutionalized and included in primary, secondary and tertiary education systems. Cultivating empathy among people is critical to strengthening individual, family, community, national and international bonds, resilience and anti-fragility, and can help to overcome crisis sooner and more successfully as well as to promote better human rights.

From the mental health perspective blame and game are two words which should be never joined together. In this crisis a right and challenging mental health question is how we are living, working and thinking about the future. Empathy, compassion and collaboration are key attributes to living a healthy and happy life. Mental health, mind-sets and situation appraisal and reappraisal about COVID-19 can alter its impact as well as COVID-19 may alter individual and collective mental health, appraisals and behavior. Mental health is a state of mental well-being in which people cope well with the many stresses of life, can realize their own potential, can function productively and fruitfully, and are able to contribute to their communities (see World Federation for Mental Health 2020). It is related to the manners how people experience and define themselves, life and world and what games they play, what is all related to the way how they think, feel, behave, interact, connect, learn, work and create. Employing human empathic ability to recognize, understand, and creatively and cooperatively respond to the emotions, experiences and world views of the others can reduce and eliminate blaming and scapegoating. When people stop playing blame games, they free themselves from the chains of negative thinking and emotions such as anger, hate and resentment which commonly lead to reality distortion, war and tragedy. Good public mental health is important for the good functioning of compassion society as well as good global mental health is related to the creating empathic civilization and humanistic self. Therefore, mental health promotion should be an essential part of national and global anti-COVID-19 programs. The global leadership is now very needed for international

cooperation, global solidarity, empathy and coherence if we want to go out of from the darkness of the COVID-19 blame games and enter the light of compassionate society and the dawn of empathic civilization. Wisely navigating the hero's journey through the COVID-19 pandemic gives us the challenging opportunity to be happier and healthier and more powerful and successful when we are united, empathic and coherent than when we play selfish, narcissistic and paranoid blame games (see Jakovljevic 2020). New ideas about public mental health politics as well as about politics in general with more humanistic, responsible, moral, wise and more educated leaders has appeared. From the public and global mental health perspective it is very important to have in mind that we are a species that has evolved to thrive on love, empathy and compassion associated with our spirituality, cooperation, interconnectedness, and interdependency (Jakovljevic 2017). Instead of blaming and scapegoating, it would be useful to have in mind that no one country or institution alone can resolve COVID-19 pandemic crisis because corona virus does not respect the national borders and spreads in the absence of any symptoms. Education for coherence, resilience and anti-fragility, love, empathy and cooperation while fighting the COVID-19 crisis may contribute to the building of compassionate society and empathic civilization (Jakovljevic 2020) and vice versa building of compassionate community and empathic civilization may help more successful overcoming COVID-19 crisis.

## CONCLUSIONS

The blame game and the war of narratives distract from the proper actions that are needed to be done to resolve COVID-19 crisis and prepare for future global challenges. The crucial message of this paper is that coherence, knowledge, empathy, solidarity and humanistic cooperation can convert blame games into positive "win-win triangle" games and so help in overcoming the COVID-19 crisis. COVID-19 blame games highlight what happens when politics fail to provide the socio-economic infrastructure needed for a healthy and happy community. Using misinformation infodemics and conspiracy theories unscrupulous politicians, selfish interest groups, and various state actors in many countries all over the world cynically exploits the human-deep rooted impulse to blame and scapegoat for selfish political purposes and interests in order to escape own responsibility and critics of their wrong decisions as well as to scapegoat the opponents and competitors in political and business games.

Fighting the COVID-19 crisis all countries and nations need to join efforts on defeating it. We need to shift from a destructive blaming type of thinking to a much more creative and humanistic type. Effective response to COVID-19 is related to sowing the seeds for humanistic self and empathic civilization, rather than blaming, scapegoating and xenophobia.

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Miro Jakovljevic: concept and design of article, literature searches, writing manuscript, approval of final version.

Ivan Jakovljevic, Sarah Bjedov & Filip Mustac: comments on the concept of article, literature searches, writing some parts of manuscript, approval of the final version.

## References

1. Al Afnan MA: COVID-19-The foreign virus: Media bias, ideology and dominance in Chinese and American newspaper articles. *International Journal of Applied Linguistics & English Literature* 2020; 9:56-60  
[www.ijalel.aiac.org.au](http://www.ijalel.aiac.org.au)
2. Atlani-Duault L, Ward JK, Roy M, Morin C & Wilson A: Tracking online heroisation and blame in epidemics. *Lancet Public Health* 2020 Mar; 5:e137-e138.  
[doi:10.1016/s2468-2667\(20\)30033-5](https://doi.org/10.1016/s2468-2667(20)30033-5)
3. Behm A: Demonising China during Covid-19. *The Australia Institute*, April 20, 2020 <https://www.tai.org.au>
4. Berne E: *Games People Play*. Balantine Books, New York, 1966
5. Burton N: The psychology of scapegoating – Is the time ripe for a new wave of scapegoating? *Psychology Today* Dec 21, 2013, revised on May 5, 2020.  
<https://www.psychologytoday.com>
6. Crossman A: Definition of scapegoat, scapegoating, and scapegoat theory. *ThoughtCo*, Feb 11, 2020.  
[thoughtco.com/scapegoat-definition-3026572](https://www.thoughtco.com/scapegoat-definition-3026572)
7. Davey G: The China-US blame game: claims-making about the origin of a new virus. *Social Anthropology/Antropologie Sociale* 2020; 0:1-2. [doi:10.1111/1469-8676.12900](https://doi.org/10.1111/1469-8676.12900)
8. Douma M, Imprialos KP, Patoulis D, Katsimardou A & Stavropoulos K: COVID-19: The Waterloo of governments, healthcare systems, and large health organizations. *European Journal of Internal Medicine* 2020; 77:153-155.  
<https://doi.org/10.1016/j.ejim.2020.05.043>
9. Ee S: Scapegoating – What it is and how to understand it. *The Psychology Practice*, November 15, 2017. [hprctice.com.cdn.ampproject.org](http://hprctice.com.cdn.ampproject.org)
10. Ellison LL: "Scapegoating". In Carlson J Dermer SB (eds): *The SAGE Encyclopedia of Marriage, Family, and Couples Counseling* vol. 4:1449-1452. Marshall University, Marshall Digital Scholar 2017. [mds.marshall.edu](https://www.mds.marshall.edu)
11. Emerald D: Upgrading our personal operating system introducing the power of TED (The Empowerment Dynamic) [www.thepowerofTED.com](http://www.thepowerofTED.com) 2009
12. Flinders M: Gotcha! Coronavirus, crises and the politics of blame games. *Political Insight* 2020; 22-25.  
<https://journals.sagepub.com>
13. Gofmann E: In the wake of COVID-19, is glocalization our sustainable future? *Sustainability: Science, Practice and Policy* 2020; 48-52.  
<https://doi.org/10.1080/15487733.2020.1765678>

14. Harrari YN: *In the battle against coronavirus, humanity lacks leadership*. *Time*, March 15, 2020. <https://time.com>
15. Harris T: *I'm OK, You're OK*. Galahad Books, 1969
16. Heinkelmann-Wild T & Zangl B: *Multilevel blame games: Blame-shifting in the European Union*. Wiley Online Library, 2019. <https://onlinelibrary.wiley.com>  
<https://doi.org/10.1111/gove.12459>
17. Jakovljevic M & Tomic Z: *Global and public mental health promotion for empathic civilisation: The role of political psychocultures*. *Psychiatr Danub* 2016; 28:323-333.  
<https://doi.org/10.24869/psyd.2016.323>
18. Jakovljevic M: *Resilience, psychiatry and religion from public and global mental health perspective - Dialogue and Cooperation in the Search for Humanistic Self, Compassionate Society and Empathic Civilization*. *Psychiatr Danub* 2017; 29:238-244.  
<https://doi.org/10.24869/psyd.2017.238>
19. Jakovljevic M: *Empathy, sense of coherence and resilience: Bridging personal, public and global mental health and conceptual synthesis*. *Psychiatr Danub* 2018; 30:380-384. <https://doi.org/10.24869/psyd.2018.380>
20. Jakovljevic M, Kurjak A, Jerkovic A, Hasanovic A & Nikic M: *Spirituality, religiosity and nationalism from the perspective of public and global mental health*. *Psychiatr Danub* 2019; 31:382-391.  
<https://doi.org/10.24869/psyd.2019.382>
21. Jakovljevic M: *COVID-19 crisis as a collective hero's journey to better public and global mental health*. *Psychiatr Danub* 2020; 32:3-5.  
<https://doi.org/10.24869/psyd.2020.3>
22. Jakovljevic M, Jakovljevic I, Bjedov S & Jaksic N: *COVID-19 pandemia and public and global mental health from the perspective of global health security*. *Psychiatr Danub* 2020; 32:6-14.  
<https://doi.org/10.24869/psyd.2020.6>
23. Lai G: *Scapegoating Hong Kong's minorities over Covid-19 is dangerous – here's how to avoid it*. *Kong Kong Free Press*, June 4, 2020
24. Liao Q, Yuan J, Dong M, Yang L, Fielding R & Lam WTL: *Public engagement and government responsiveness in the communication about COVID-19 during the early epidemic stage in China: Infodemiology study on social media data*. *Journal of Medical Internet Research* 2020; 22:e18796 doi:10.2196/18796
25. Lozano EB & Laurent SM: *The effect of admitting fault versus shifting blame on expectations for others to do the same*. *PLoS One* 2019; 14:e0213276.  
<https://doi.org/10.1371/journal.pone.0213276>
26. Molter V & Webster G: *Coronavirus conspiracy claims: What's behind a Chinese Diplomat's COVID-19 misdirection*. *Stanford – Freeman Spogli Institute for International Studies* March 31, 2020
27. Numanee IZ, Zafar N, Karim A Ismail SAMM: *Developing empathy among first-year university undergraduates through English language course: A phenomenological study*. *Heliyon* 2020; 6:e04021.  
doi:10.1016/j.heliyon.2020.e04021  
<https://www.ncbi.nlm.nih.gov>
28. Patel V: *Global mental health in the time of COVID-19*. *Harvard Health Blog*, June 16, 2020
29. Pickard H: *Irrational blame*. *Analysis* 2013; 73:10.1093/analys/ant075 doi:10.1093/analys/ant075
30. Robson SE, Repetto L, Gountouna VE & Nicodemus KK: *A review of neuroeconomic gameplay in psychiatric disorders*. *Molecular Psychiatry* 2020; 25:67-81.  
doi:10.1038/s41380-019-0405-5
31. -Rogers K: *Why did the world shut down for COVID-19 but not Ebola, SARS or Swine flu? FiveThirtyEight*, April 14, 2020. [fivethirtyeight.com](https://fivethirtyeight.com)
32. *The Guardian editorial: The Guardian view on the WHO and corona virus: Trump's blame game*. *The Guardian* April 15, 2020. [theguardian.com](https://theguardian.com)
33. Van Bavel JJ, Baicker K, Boggio PS, Capraro V, Cichocka A, Cikara M, Crockett MJ, Cum AJ, Douglas KM, Druckman JN, Drury J, Dube O, Ellmers N, Finkel EJ, Fowler JH, Gelfand K, Han S, Haslam SA, Jetten J, Kitayama S, Mobbs D, Napper LE, Packer DJ, Pennycook G, Peters E, Petty RE, Rand DG, Reicher SD, Schall S, Shariff A, Skitka LJ, Smith SS, Sunstein CR, Tabri N, Tucker JA, van der Linden S, van Lange P, Weeden KA, Wohl MJA, Zaki J, Zion SR & Willer R: *Using social and behavioral science to support COVID-19 pandemic response*. *Nature Human Behaviour* 2020; 4:460-471.  
<https://doi.org/10-1038/s41562-020-0884-z>
34. Varma R: *China's diplomacy and changing the COVID-19 narrative*. *International Journal* 2020; 0:1-11.  
doi:10.1177/0020702020930054  
[sagepub.com/journals-permissions](https://sagepub.com/journals-permissions)
35. Walther J, Brewer MA, Sochacka NW & Miller SE: *Empathy and engineering formation*. *J Eng Educ* 2020; 109:11-33.  
doi:10.1002/je.20301 [wileyonlinelibrary.com/journal/je](https://onlinelibrary.wiley.com/journal/je)
36. *Wikipedia: Misinformation related to the COVID-19 pandemic*. <https://en.m.wikipedia.org>
37. *World Mental Health Federation: Policy Brief: COVID-19 and the Need for Action on Mental Health*. [wfmh.global](https://wfmh.global) May 13, 2020

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