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Abstract

Nudge theory presumes that decision making is guided by intuitive biases and heavily influenced by the environment in which choices are made. Critics argue, however, that in place of the quick thinking envisaged by nudge theory, behaviour change reflects deeper and broader thought processes. One of these patterns of thinking – fatalism – has been identified across health and allied disciplines as key to explaining the reason why many people ignore authoritative advice. Insights drawn from a critical review of the fatalism literature explain why sometimes nudges fail. While a fatalist mindset seems to make some of us more susceptible to nudge, it prompts others to respond to nudge in surprising and dysfunctional ways.

Keywords: nudge; fatalism; policy; Douglas; health; reactance, behavioural public policy, behaviour change
**Introduction**

In focussing attention on the mechanics of behaviour change, nudge makes an important contribution to policy studies. Based on the presumption that decision-making is ‘intuitive and automatic’, Thaler and Sunstein (2008, p.6) explain how small changes in the ‘choice architecture’ presented by the environment can prompt people to make better decisions both for themselves but also for society at large. By offering light-touch and low-cost policy interventions, nudge is in tune with times characterised by austerity and a suspicion of big government.

Nudge is though controversial. Amongst other things, critics point to three problems. The first stems from the passivity of some people who resist nudges intended to prompt more ‘enlightened’ behaviour. The second issue – paradoxically perhaps – is one of excessive suggestibility. Critics claim that some nudges (so called default nudges) are ethically questionable to the extent that they might manoeuvre people into positions they would not rationally adopt. Finally, in certain circumstances, researchers point to a boomerang or reactance problem which sees some people respond to nudge in the opposite of the intended direction.

This paper suggests that progress in understanding the dysfunctions of passivity, suggestibility and reactance requires us to engage more closely with the biases guiding decision making. Thaler and Sunstein (2008) argue that intuitive decision making is guided by the way in which choices are framed; a tendency to optimism; a preference for the status quo; an aversion to loss and so forth. John and Stoker (2019, p.214) call for a re-examination of these ‘cognitive foundations’. In place of the low level psychological responses described by Thaler and Sunstein, they give numerous examples of the way in which nudges prompt higher level thought processes focused for example on: adherence to norms; reflection; developing aspirations; entering into commitments and so on (John and Stoker 2019). In such a way, nudges operate in a similar way to traditional policy interventions in appealing to both low and high-level thought processes (Lin *et al* 2017). The problem of course with the established mechanisms of behaviour change is that they do not always work.

Scholars working in health and allied disciplines draw on the notion of fatalism to explain the intractability of citizens who sometimes ignore their doctor’s advice. Through a critical survey of these literatures, this paper distinguishes between three types of fatalism of relevance to nudge. Seeing the world as largely beyond their control, passive fatalists cannot be relied upon to act rationally in pursuit of their self-interest. Protective fatalists, by contrast, develop a lay and often
bespoke understanding of the threats confronting them and the protective measures that can be realistically adopted. Pathological fatalists react to the imposition of constraint by gaming or even subverting the system and in extreme cases committing acts of self-destructive rebellion. A fatalist mindset – whether it be passive, protective or pathological – has profound implications for the responsiveness of citizens to behaviour change initiatives. Fatalists will either ignore, respond too readily, or else subvert nudges intended to deliver behaviour improvements.

The paper is organised into four sections. The first makes the case for a broader understanding of the biases guiding decision making and the part they may play in determining the efficacy of nudge strategies. Based on a critical survey of the fatalism literature, the second part distinguishes between three different types of fatalism associated with different responses to nudge. The third part of the paper surveys the way in which fatalism has been explained through values, structures and institutions. Building on differences in the type of fatalism and way in which they have been explained, the final and concluding section discusses a variety of ways in which nudgers, and policy makers more broadly, might respond to the challenge of fatalism.

**Nudge and Motivation**

Nudges provide information which might prompt or remind us to do something that we would otherwise neglect (John 2013). Beneath their presentational form – which varies hugely from reminder letters to changes in the design of public spaces – nudges use the heuristics, rules of thumb or biases of quick thinking to prompt desirable changes in behaviour. Critics question whether the thought processes targeted by nudge are always so superficial. Brown (2012, p.308) argues that differences in broader ‘worldviews, ideologies and values’ may lead to marked variations in the way people respond to a nudge. John and Stoker (2019, p.210) go further and call for a reconsideration of the intellectual foundations outlined by Thaler and Sunstein to recognise ‘the reflective capacities of human beings’. It follows of course, that a bewildering variety of different thought processes may influence the way in which people respond to nudges. Three world views, however, seem particularly important.

It is our utility maximising self (so called *homo economicus*) that nudges us into avoiding token charges on plastic bags and bottles. While not significantly changing the cost and benefits of a transaction, token charges appeal to an intuitive desire to save money when given a choice (Rivers *et al* 2017). Although it is difficult to isolate the economic effect of the nudge from the normative reminder that disposable items are damaging to the environment, studies which report
a jump in plastic bag use after the removal of charges suggest that the economic incentive – albeit a token one – plays a significant part in the explanation of behaviour change (Jakovcevic et al. 2014).

Nudges to follow rules on speeding, littering and paying our taxes rely at least to some extent on the threat of prosecution for non-compliance and the tendency for *homo hierarchicus* to do what she is told. Amongst a suite of nudges designed to increase compliance with tax law, the UK’s Behavioural Insights Team (2012, p.19) recommend reminding citizens of the state’s hierarchical powers. They suggest, for example, highlighting successful prosecutions or following the example of the UK’s car vehicle licensing authority which ‘publicised the fact that it can crush untaxed cars’ (BIT 2012, p.19).

Finally, it is *homo reciprocans* which moves us by ‘honor, altruism, and like dispositions to contribute to public goods even without the inducement of material incentives’ (Kahan, 2003, p.71). While in its purest form, appeals to the logic of reciprocity might increase charitable giving (BIT 2013), social influence can also be used to reduce energy use, increase recycling or even reduce calorie intake. Alongside the token incentives of *economicus* and the threats of *hierarchicus*, nudges to reduce bag use and pay our taxes also appeal to a normative expectation that these are things we should do for the common good.

While these established accounts of motivation help us understand some of the behaviours prompted by nudge they do not address the problems of passivity, suggestibility and reactance. The passivity problem emerges when information disclosure fails to prompt a more rational approach to decision making. Loewenstein et al’s (2014, p.8) review concludes that the ineffectiveness of information disclosure procedures is a ‘pervasive theme’ in the literature. Many of us lack either the appetite or the cognitive capacity to access, understand and analyse the information needed for rational decisions. Golman et al (2017) go further, pointing to an ‘ostrich effect’ in which people deliberately avoid information which might challenge their preferences in some way.

The failure of decision makers to use the information made available to them is, ironically, key to the success of the default nudge strategy. Work in organ donation (Johnson and Goldstein 2003) and green energy (Momsen and Stoerk 2014) provides strong support to the suggestion that many of us are content to see our fortunes – albeit in quite specific domains – dictated by others.
Indeed the very success of defaults in these experiments raise the question of whether interventions which seem to rely more on suggestibility than considered preference are ethically justifiable (Momsen and Stoerk 2014). Should people be defaulted into paying more for their energy – or donating their organs in death – just because they lack the resources of time or energy to question the default? ‘Influencing behavior in such ways’ is as, Hausman and Welsh (2010, p.131) put it, ‘troubling’.

The reactance or boomerang phenomenon is observed where interventions have the opposite of the intended effect. Psychologists use the term to describe attempts to reject or overcome restraint, accompanied sometimes ‘by hostile or aggressive feelings toward the responsible agent’ (Wortman and Brehm 1975, p.286). Reactance means, as Fitzsimons and Lehmann (2004, p.92) put it: ‘that making unpopular recommendations, while normatively desirable, may be counterproductive’. The phenomenon has been recorded during interventions intended to reduce alcohol misuse (Perkins et al 2005); excessive calories (Downs et al 2009) and energy waste (Costa and Kahn 2013).

While these problems are amenable to a series of psychological (Fitzsimons and Lehmann 2004) and economic explanations (Golman et al 2017), this paper argues that a broader appreciation of the worldviews guiding decision makers promises further and important insights. Following Mary Douglas (1982), I argue that alongside the venerable accounts of human behaviour provided by economicus, hierarchicus and reciprocans, nudgers – indeed all of those with a broader interest in behaviour change – need to pay attention to a fourth base for decision making she dubbed fatalism.

Varieties of Fatalism

The fatalism literature is dominated by health researchers asking a question critical to the workings of nudge: why do patients not follow their doctor’s advice? More specifically, why do some people fail to heed prescriptions for a healthy lifestyle, screening for disease or indeed treatment itself? Outside medicine, scholars looking at education, natural disasters and various aspects of safety culture also bemoan the failure of people to behave rationally or simply to do what they are told. The intractability of citizens observed across these literatures is attributed to homo heteronomus: the tendency for some people to believe that their fortunes are in the strongest sense of the word predetermined or at least heavily constrained by forces beyond their control.
Powe and Finnie (2003, p.454), for example, point to the way in which ‘cancer fatalism’ forms ‘a barrier to participation in cancer screening, detection, and treatment’.

Fatalists – according to psychologists – exhibit a high external locus of control (Corcoran et al 2011). They believe their decisions are ‘the result of luck, chance, fate, as under the control of powerful others, or as unpredictable’ because of the complexity of surrounding forces (Rotter 1966, p.1). Bad luck is associated particularly with natural forces like earthquakes, disease or even the ups and downs of the economy. Powerful others can of course take different forms. Those who believe in the omnipotence of God, must be inclined to a fatalist mind set, as must those who find their agency circumscribed by oppressive or tyrannical regimes. While randomness is in large measure attributed to natural causes, and higher powers are oftentimes taken to be religious, complexity is almost exclusively the preserve of human made bureaucracy.

Irrespective of the contexts in which fatalism is found, researchers point to contrasting accounts of its effects. Building on Falicov’s distinction between ‘deficit’ and ‘resource oriented’ theories of fatalism, (cited in Guzman et al 2005) three varieties can be distinguished. The first, perhaps closest to lay understanding, suggests that fatalism is associated with a disempowered or passive agent. The second – a protective account – describes fatalists as resigned to randomness and constraint but rational in their attempts to guard against misfortune. The third – a pathological account – suggests that some fatalists respond to perceptions of constraint and randomness with acts of (sometimes self-destructive) delinquency. The different varieties of fatalism are likely to be associated with different responses to nudge.

**Passive Fatalism**

The passive account suggests, first and foremost, that fatalists doubt their agency and respond to the challenges facing them with passivity or denial. Earthquake fatalism, according to McClure et al (2007, pp.1956-1957), stems from a ‘learned helplessness’ which sees earthquakes as ‘uncontrollable and unpredictable’ events which make ‘human endeavours seem useless’. Mayer and Smith (2019, p. 512) describe climate fatalism as ‘the perception that climate change is unstoppable, inevitable or otherwise unchangeable by human action.’

Those working in the areas of public health have long recognised the importance of passive fatalism in the explanation of why some individuals fail to follow healthy lifestyle advice (Davison et al 1992a). The conventional wisdom suggests that non-compliance stems from a
perception of the causes of health (or illness) as lying ‘outside the control of the individual’ (Davison et al 1992a, p.676). In such a way fatalist resignation to the threat of HIV is described by Meyer-Weitz (2005, pp.76-77) as responsible for young South Africans thinking it ‘senseless to try and protect themselves from HIV/AIDS because of the high prevalence in their communities’. Similar tendencies are reported in the education literature where fatalism is associated with poor attitudes and truancy (Guzman et al 2005; Jamieson and Romer 2008).

Passive fatalism is often associated with ‘ignorance and irrationality’ (Straughan and Seow 1998 p.87) and a tendency to misperceive or misconceive of the opportunities or threats presented by the environment. By distorting the perception of probability and risk, passive fatalism disempowers, but it also erodes faith in the agency of others. Sims and Bauman’s (1972, p.1391) study of tornado preparedness describes ‘respondents from Alabama, who believe that God (or fate or luck) controls their lives’ have less confidence in their ability to effect change and ‘less trust in man’s communal knowledge and control systems’.

The effectiveness of information type nudges intended to prompt rational changes of behaviour seems likely to be adversely affected by the passive form of fatalism. The passivity which undermines information type strategies may, however, make default nudges more successful. As Sunstein (2017) explains, it takes at least some agency to reject a default, since passive fatalists are unlikely to exercise that agency, we can hypothesise that defaults will prove an effective driver of behaviour change. The likely increased effectiveness of defaults is good news for those who want to deliver behaviour change, but it is more troubling for those who maintain that nudge can be both libertarian and paternalistic (Hausman and Welch 2010).

**Protective Fatalism**

While the passive account of fatalism tends to treat perceptions of randomness, complexity and constraint as the product of flawed or unreliable reasoning, Franklin et al (2007 p.570) suggest that rather than inhibiting good health behaviours, fatalism may emerge precisely because of ‘poor health or chronic illness’. Surveying the chaotic lives of a sample of mothers with large families, Chamberlain (1976, p.8) argues that fatalism reflects ‘a highly rational adaptation of aspirations to achievement potential’. Pill and Stott (1987, pp105-106) come to similar conclusions, suggesting that the fatalism of working-class women is founded on ‘a realistic appraisal of the complex variables involved in the aetiology of illness’.
Acknowledging the facticity of randomness, constraint and complexity, allows for an agentic form of fatalism which can help people understand or cope with conditions that in many cases are genuinely beyond their control (Jones et al 2016). Recognising ‘the objective lack of control’ over certain conditions Keeley et al (2009, p.745) suggest that fatalism functions as a pragmatic acknowledgement of limited power which can help in avoiding self-blame, relieving stress and managing uncertainty. In such a way a fatalist perspective on fertility and pregnancy can, according to Jones et al (2016 p.551), represent a ‘logical and pragmatic response.’ Similarly, a fatalist stance of ‘watchful waiting’ makes sense when 85 percent of cases of the HPV resolve within a year (Drew and Schoenberg 2011). Even cancer fatalism can be functional for some patients, to the extent that it accurately reflects the threat of the disease, prepares for the failure of treatment or else provides a way of living with the condition (Sharf et al 2005).

Protective fatalism does not just help people by acknowledging the reality of external constraints. By clarifying, and then bracketing off the things that are beyond our control, protective fatalism can help people focus on the things they can influence and achieve. Petterson (1999, p.25) describes the fatalism of Black American youth as less overwhelmed by hopelessness, than it is attuned to respond ‘to limited opportunities in innovative ways’. An argument further supported by Jahan and Wahab (2015, p.60) who describe the two world views of fatalism and self-help as combining in such a way as to prompt poor communities into ‘continuous innovative practices to survive.’

Florez et al (2009, p.297) explain that the fatalism they found in their study of attitudes to breast cancer, was ‘not characterized by feelings of doom or resignation as depicted often in the fatalism literature, but rather by active participation in cancer screening’. As they explain, recognising the randomness of certain conditions carries with it the implication that we should all participate in screening. Similarly, Davison et al (1992b) make the point that only rarely in their data was talk of luck or randomness associated with ignorance or denial. More often ‘the recognition of pervasive uncertainty in the field of illness and death existed side by side with a common-sense approach to taking appropriate care’ (Davison et al 1992b, p.106). The ‘common sense approach’ described by Davison et al, is not however one that is scripted by expert opinion. Rather, the measures adopted by protective fatalists are informed, as Desmond (2015) explains, by a lay understanding of the causes and probabilities of threatening events. In health, these lay epidemiologies have on occasion been shown to provide an ‘accurate appraisal of real life
experiences’ (Lawlor et al, 2003, p.268) even if lay beliefs about the aetiology of disease are not so reliable (Balshem 1991; Straughan and Seow 1998).

The literature suggests that protective fatalists will respond positively to information which is perceived as relevant to their individual circumstances. Generic edicts for healthy living – or perhaps simple defaults – may be questioned and at times rejected by protective fatalists who have developed a situated account of the risks they face and the ameliorative measures that make sense for them.

Pathological Fatalism

The agency unleashed by fatalism is not always protective. Researchers point to a third form of fatalism – emerging from the constraining and alienating experience of coercive control – that might be described as pathological. Youth delinquency, according to Brezina (2000, pp. 785-786), affirms ‘the adolescent's autonomy or independence in the face of adult constraints and impositions’. Haynie et al (2014) link fatalism to violent delinquency, victimization, unsafe sex and police arrest. They explain that ‘adolescents who view the future as uncertain or unpredictable’ can develop a ‘here and now’ attitude to risky behaviour (Haynie et al 2014, pp.176-177).

Nor is pathological fatalism the preserve of adolescent youth. Diaz and Ayala (1999, p.290) describe HIV fatalism as prompting amongst some, a kind of resistance ‘an act of freedom, a moment of liberation and personal revenge against unjust oppression’ in which people take huge risks with their health. Taylor (1979, p.172) describes how the loss of control associated with hospital admission inclines some ‘bad patients’ to a form of reactance expressed in petty acts of mutiny. Mutiny which can, as Taylor goes on to explain (1979, p.172), turn into the ‘self-sabotage’ of not taking prescribed medicine. In a similar way Balshem (1991, p.160) describes the way in which a working-class community in Philadelphia met the cancer prevention advice of health educators with ‘anger, frustration, and even disdain’.

While in some cases the symbolic assertion of free will is realised at the price of self-harm, some theorists point to the material benefits of breaking the rules (Brezina 2000). Mars (1982) describes the paradoxical way in which even those working in high status professions can still feel constrained by hierarchy and inclined to seek autonomy by breaking the rules or sabotaging the system. Hood (2000) too sees circumstances in which fatalist public managers focus on the
defence of their interests up to the point of accepting bribes. Akbar and Vujic (2014, p.208) go further, arguing that ‘fatalist cultures are prone to corruption due to a combination of motivation and opportunity’. As they explain, where people come to believe that ‘the system cannot be changed’ they start ‘to accept this as a way of life and go along with and perpetuate corrupt acts’ (Akbar and Vujic 2014, p.208).

While protective fatalists may rationally attempt to insulate themselves against the odds of an unpredictable environment, pathological fatalists may wilfully resist or actively undermine the impositions which constrain them. In extreme cases these acts of defiance may be advanced without regard to their deleterious consequences. In such a way the pathological form of fatalism might explain why some people wilfully ignore nudges which are perceived as manipulative, and in some cases, deliberately act in exactly the opposite way indicated by the nudge.

**Explanations**

With the potential to add to our understanding of passivity, suggestibility and reactance, the question of how fatalism might be explained is a matter of some importance. Three reasonably distinct explanations of fatalism are apparent in the literature. Value explanations point to the beliefs, attitudes or cultures of specific individuals and communities. Structural explanations refer to socio-economic factors – like age, education, poverty and so forth – which are associated with life experiences. Finally, institutional explanations focus on meso-level arrangements (from the constitutional to the organisational) which subject individuals to constraining or complex circumstances. In truth, of course, distinctions between these things are blurred by the way in which naturally occurring, or socially constructed circumstances will, over time, foster individual and community values.

**Values**

Value explanations suggest that a fatalist worldview exists in relatively stable form in the thinking of an individual or the culture of a community. In one of perhaps the most famous and controversial of the psychological studies, Greer (1991, p. 43) asserts that ‘the psychological stance which patients adopt when they develop cancer can, in some cases, influence the course of their disease.’ As he explains, patients who exhibit ‘denial’ or ‘fighting spirit’ have a better prognosis than those who showed ‘stoic acceptance’ or fatalism. While others question these findings (Petticrew *et al* 2002), the tendency to attribute fatalism to personality type persists (Kimberly and McCarthy 2001; Ugwu *et al* 2015).
Rather more work, however, locates fatalism in the culture of communities of location, ethnicity, religion or experience. In terms of the former, Sims and Baumann’s (1972, p.1391) study of tornado deaths suggests that residents of Alabama ‘are seen to be more heteronomous, feeling themselves to be moved by external forces – fate, luck, and, particularly, God.’ Ellison and Burdette (2012, p.11) also find belief in ‘biblical literalism’ and ‘fundamental sin’ to be inversely related to an individual’s sense of control. Baytiyeh and Naja (2016, p.163), by contrast, report that: ‘Fatalism is embedded in Middle Eastern societies’, Jun and Oh (2013) point to Asian and Hispanic Americans, while Heiniger, et al (2015) see more of it amongst the Chinese than Caucasians in their sample.

Although the tendency for relatively privileged researchers to diagnose fatalism in the thinking of the dispossessed is problematic, Powe (1996, p.18) argues strongly that the cultural values of some communities ‘operate independently of variables such as poverty and education’ and that those values can be tracked back to historical experiences. In such a way Powe and Johnson (1995, p.120) claim that the ‘barbarism’ of the slave trade ‘stamped the African-American psyche with a tragic sense of despair and gloom that cannot be simply dismissed’. In a similar vein, Goodwin and Allen (2000, p.1167) find Russia to be ‘the most fatalistic nation’ of their sample of former soviet countries, a finding they attribute to ‘the dramatic historical events that have marked this region for many centuries as well as the more immediate repression of individual agency during the Communist era’.

A number of scholars point to the way in which fatalist sentiment is fostered at the group or community level through tacit or lay knowledge. Haynie et al, (2014, p.177) use social learning theories to explain how fatalist beliefs ‘are learned through interactions with other people, especially those with whom they are closely tied’. Fatalism in friendship groups according to Haynie et al (2014, p.189) ‘has a strong positive effect’ on the risk taking and delinquency behaviours of adolescents which ‘cannot be explained away by individual, family, or school characteristics’. In a similar vein, Pill and Stott (1987, pp105-106) point to the way in which individual judgements ‘rooted in actual experience’ are ‘constantly reinforced through interaction with others holding the same views’. Balshem (1991) and Davison et al (1992a) emphasise the importance that informal case histories play in the lay knowledge of the causes of disease. Those resistant to healthy lifestyle advice point to ‘defiant ancestors’ (Balshem 1991, p.162) who survive
‘into a healthy old age, despite extremely heavy smoking and drinking’ in contrast to ‘some svelte joggers’ who ‘fall down dead’ (Davison et al 1992a p.682-3).

**Structures**

While acknowledging that fatalism often presents as a stable value in the psychology of an individual or the culture of a community, a significant strain of work attributes its emergence to a series of structural factors which create inequalities of ‘power, wealth, privilege and health’ (Perfetti 2018, p.61). Buriel and Rivera (1980) point to the way in which once commonplace cultural explanations of Mexican fatalism have largely been displaced by an analysis of underlying socio-economic variables. In this vein Ross et al (1983, pp. 390-392) find that ‘much of the effect of Mexican cultural identity is mediated by social class’ and that the ‘recurrent life failures structured into lower social class positions teach individuals to believe that they will fail in the face of effort, and that powerful others and poorly understood forces control their lives’.

Freeman (1989, pp.273-286) explains how, while on the one hand, the poor ‘tend to develop a fatalism born of powerlessness’, their ‘culture, tradition, belief system and lifestyle’ are merely prisms ‘through which the effects of poverty are reflected’. An analysis acknowledged by Powe and Finnie’s (2003) who, despite their attachment to cultural explanations, find cancer fatalism is most evident amongst women, the elderly, ethnic minorities, the poor and those with lower levels of education. Looking more broadly at public health, Davison et al (1992a, p.679) attribute fatalist attitudes to personal differences (of both nature and nurture), the physical environment (in terms of natural dangers) and the social environment – embracing ‘relative wealth and access to resources, risks and dangers associated with occupation’.

Away from cancer and health, Ellison and Burdette (2012) point to: race, age, education, employment and income as predictors of theological fatalism. Jamieson and Romer’s study of US youth (2008) finds fatalism associated with a raft of structural variables including gender, ethnicity, language and education. Grendstad and Sundback’s (2003, p.300) survey of Nordic countries suggests that education and income are ‘significant and negative correlates’ of fatalism. Similarly, Petterson’s analysis (1999, p.25) of joblessness among Black American youth suggests ‘no support for strong cultural arguments’ about the origins of fatalism. Rather, he explains that fatalism is explained by ‘disadvantaged family background and ensuing difficulties in schools and the labor market’ (Petterson 1999, p.25). ‘The greater fatalism of more disadvantaged individuals represents, with some accuracy’, according to Petterson (1999, p26), ‘their actual life chances.’
While occupation is often included in the lists of variables associated with fatalism, few studies elaborate on causation. Occupation may just be a proxy measure for education, income and status, factors clearly associated with restricted opportunities and fatalist beliefs. Alternatively, some occupations – like fishing, construction, mining and farming – carry inherent risks which may be directly responsible for fatalist attitudes. In such a way Sileo et al (2016, p.541) report that the dangers facing fishermen working on Lake Victoria in Uganda prompts them to ‘live for the moment’ since ‘death on the lake is viewed as a more imminent threat than death from AIDS.’

Institutions

Alongside individual or community values and a variety of structural variables, the fatalism literature points to a series of meso-level institutional arrangements which might foster an external locus of control. Douglas (1982) theorises these conditions as emerging when institutions impose high social regulation without social integration. Where individuals perceive themselves as tightly bound by regulations over which they have no control – as in ‘authoritarian political systems’ for example – they will start to see the world in fatalist terms (Thompson et al 1990). Sharing this thinking, Corcoran et al (2011, p.580) predict that in places where power is ‘concentrated in the hands of the few’, individuals will be inclined to higher levels of fatalism and lower levels of instrumentality.

Constraining and isolating institutions are not the preserve of authoritarian regimes. Sutton and Vigneswaran’s (2011, p.633) study of deportation and detention in South Africa points to the way in which quite specific institutional arrangements foster fatalist sentiment amongst asylum seekers ‘completely disoriented’ by the ‘inner-logic of the “system” which decides their fortune’. Many of the detainees observed by Sutton and Vigneswaran (2011, p.636) ‘demonstrated fatalistic passivity in the face of the confusing bureaucratic maze of procedures that confronted them.’ But while this complexity induced passivity amongst some, others tried ‘to manipulate the deportation–detention process to their advantage’ (Sutton and Vigneswaran 2011, p.637).

Alongside the risks considered earlier, the fatalism associated with some occupations may be attributed to institutional isolation. Public servants, in particular, have repeatedly been described as occupying institutionally isolated positions which lead to ‘policy alienation’ (Tummers et al 2009) and ‘impossible jobs’ (Hargove and Glidewell 1990). Matheson (2018, p.652) finds the ‘apathy, cynicism, and hopelessness that typify the fatalist outlook’ among a third of his sample
of Australian public servants. The fatalism of ‘the living dead’ as he dubs it, is explained by junior position and blocked mobility which ‘demotivates staff and generates a sense of lacking control over one’s life’ (Matheson 2018, p.652). Similarly, Jackson and Wong (2017, p.1399) find fatalism among the officials charged with implementing e-government initiatives in Malaysia who saw themselves as ‘constrained by the top’ but ‘excluded from group decision-making and rule-setting.’

Perhaps the most famous account of the alienating effect of institutions is found in Lipsky’s analysis of dysfunctional public service bureaucracies. Lipsky describes front line public servants – teachers, social workers, police officers – as inhabiting ‘a corrupted world of service’ wrought by a clash of impossible demands and finite resources. In circumstances where the job ‘is impossible to do in ideal terms’, Lipsky (1980, p.82) describes public servants as surviving by adopting a series of coping mechanisms some of which, according to Loyens (2017), can be characterised in terms of fatalist acquiescence. Drawing on a study of the coping strategies of the Belgian police, Loyens (2017, pp.144-145) finds detectives reflecting on failed prosecutions and recidivism with quips like ‘you cannot win them all’ and ‘we will see him again in due time.’

Conclusions
The literature reviewed in this paper suggests that fatalism may shed some light on nudge’s problems of passivity, suggestibility and reactance. The literature also suggests a range of different responses to the challenge of fatalism.

Horses for Courses
The first might be viewed as a ‘horses for courses’ strategy which, building on a robust diagnosis of fatalist thinking, would develop bespoke interventions designed specifically for the type of fatalism exhibited by a target group. Seeing the world as largely beyond their control, passive fatalists cannot be relied upon to act rationally in pursuit of their self-interest. Behaviour change is therefore unlikely to be prompted by generic information campaigns intended to reinforce rational decision making. More troubling perhaps, the suggestibility of passive fatalists makes them unlikely to resist defaults that are patently not in their interest. Acknowledging the passive fatalism of these groups suggests first a need for transparent policy interventions (Lin et al 2017)
and a high ethical bar for default strategies. When people are incapable of rationally defining or defending their self-interest, there is an onus on governments to ensure that defaults do not operate at their expense.

Protective fatalists take a more discerning approach to the interpretation of information. While still seeing the world in terms of randomness, powerlessness and complexity, protective fatalists use the little agency they have to understand and defend their interests. Information is subject to filtering and lay analysis attuned to the specific characteristics of individual circumstances. While appropriately targeted information may influence protective fatalists, simple messages intended to deliver population level outcomes are unlikely to work. Protective fatalists need bespoke information crafted to fit the situated analysis of risk and mitigation emerging in particular communities (Davison et al 1992b; Desmond 2015).

Pathological fatalists react to the imposition of constraint by gaming or even subverting the system and in extreme cases committing acts of self-destructive rebellion. The tendency for some people to respond to constrained or unpredictable circumstances with various forms of reactance suggests that nudges may have the reverse of the intended effect. When people see their world in terms of randomness and chance, nudges designed to make a game of that randomness may prove more effective than traditional approaches. So called ‘gamification’ strategies have been tested in health (Galarraga et al 2018) and transport policy (Rey et al 2016).

**Combat the Causes**

Rather than trying to work with the grain of a fatalist mindset, an alternative approach would seek to combat the causes of fatalism itself. Educational institutions, according to Baytiyeh and Naja (2016, p.163) could encourage ‘reasoning and questioning to prevent the adoption’ of fatalistic beliefs. Guzmán, et al (2005) suggest that students may benefit from counselling and ethnic minority role models. Jamieson and Romer (2008) call for interventions to provide coping and problem-solving skills. Greer et al (1991) prescribe cognitive behavioural therapy for those who lack the fighting spirit to defeat cancer.

An alternative approach would target public institutions, whether they be relatively simple organisations or more elaborate policy regimes, which tie people in knots of bewildering complexity. Reforms to remove red tape and amplify the voice of employees and other stakeholders may reduce the alienating effect of these institutions and lessen the tendency for
people to draw fatalistic conclusions. In this vein, Stoker and John (2019, p.217) call for policy interventions which ‘mix insights from experts and public officials with those of citizens and other actors’ with a view to breaking the technocratic hold on nudge.

Finally, although more challenging still, governments could try to relieve the structural problems associated with poverty, education, ethnicity and age which serve to marginalise and disempower some communities (Balshem 1991; Freeman 1989). To the extent that these problems – or the social stigma associated with them – can be ameliorated, it may prove possible to lessen the recourse to fatalism repeatedly diagnosed amongst the dispossessed. The problem of course with this agenda is that it sounds more like the old-fashioned policy interventions of the twentieth century that nudge was designed to replace. The more information we provide, the harder we push or the more actively we persuade, the less the intervention can justifiably be described as a nudge.

**Making Space for Fatalism**

All of these approaches presume that fatalism is in some sense a problem which needs to be combatted, contained or managed in some way. Contemporary research increasingly recognises, however, that a fatalist outlook can be rooted in a rational appraisal of the constrained circumstances facing an individual or community. When fatalism is rational and when the circumstances that foster it cannot reasonably be addressed – and given the prevalence of fatalism amongst the poor and marginalised, this judgement should not be arrived at lightly – there is a case for respecting fatalist thinking and deciding not to nudge.

We need to find space for fatalism not least because only by accepting some things (probably quite a lot of things) as immutable, is it possible to work out what is achievable. Instrumental action requires bounds of some form; non-negotiable regularities which provide a framework for choice. Different people and communities will – depending upon their structural positions and life experiences – inevitably see those regularities in different terms. That is to say, we may have good reasons to be fatalistic about different things. Nudgers, more than anyone, should know that we cannot hope to turn everyone into ‘Econs’ (Thaler and Sunstein 2008).

**References**


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