Marie Molde:
Good morning and thank you all for tuning in with us. My name is Marie Molde. I am a member of the team at Data Central. And this morning I'm very thrilled to be talking with Dr. Paul Rozin, who for those of you who joined us at Foodscape last fall, you'll remember Dr. Rozin, who is the world's expert on the psychology of food and why we make the food choices we do.

Marie Molde:
He spent his career studying the role of food in human life. So we felt like in this time of uncertainty throughout the world and certainly throughout the food industry, who better to bring in to help understand how the industry can best move forward together in this uncertain times and how we can best address consumer concerns and help the industry move forward. So Dr. Rozin, I'm so thrilled to welcome you and thank you for spending some time with us today.

Dr. Paul Rozin:
Well, hello everybody. You have my sympathy at this time in which your whole industry, especially eating out, is under stress. And I'm a person who loves to eat out. And I wanted to talk to you a little about this. And also, it so happens, I also work on how people think about infection. That's another side of my work and that's very related to this.

Dr. Paul Rozin:
So I wanted to start, if it's okay with you, with a few general comments about the situation we are in and how people are thinking as far as we know, Americans at least. So first of all, there is a real conflict people have, they really are facing a danger of illness, especially if they're older or if they interact with older people they love. And so there is a real risk and there is actually also the desire to live a reasonable life.

Dr. Paul Rozin:
We are facing a compromise between our normal way of living and what we think is a safer way of living. This is real, it's a panic versus precaution battle and it's very dynamic. Now, people particularly are sensitive to unpredictable risks, which is the Coronavirus, and a potentially serious risks. But on the other hand, we live with influenza. Influenza is a risk around all of us. Many thousands of people die every year from influenza and we live with it. People aren't running around trying to not get influenza.

Dr. Paul Rozin:
Now this may be somewhat more serious, probably is, but nonetheless, we all run around with the risk of death, every time you cross the street. So the interesting thing is, we all make compromises between living as safely as possible, which would mean locked in your house I suppose, and living a life that's worth living. Okay?

Marie Molde:
Yeah.

Dr. Paul Rozin:
Now there are germs all around us. You have in you, harmful germs, everyone does, and you just live with them. And what happens is, your body keeps them under control, keeps them from reproducing. If
you get weakened in some way, sometimes those germs start reproducing so that's why the older and vulnerable people are more sensitive here.

Dr. Paul Rozin:

Now we have two systems you could say, in ourselves, in humans, to deal with the world. Daniel Kahneman and the Nobel Prize winner, calls them, system one and system two. System one is sort of rapid, often innate, but not always, but a rapid evaluation system. It's the first thing that comes up. And one feature of that system is the idea of contagion, that if you touch something that's bad, it becomes part of you.

Dr. Paul Rozin:

So the way we have shown this is in our lab, is if you take a glass of juice, which is fresh juice, people drink it, they like it. Now, we drop a dead cockroach in it and we take it out, nobody will drink that juice. And if you ask people why? They say, "Well, cockroaches are disease vectors, they have all kinds of germs." So we repeated with the sterilized cockroach, different juice. Now there's no risk of infection. People still don't want it because their system one is saying, "If something bad touches something else, it goes in there and it stays there." Okay?

Dr. Paul Rozin:

So we have to deal with that sense that people have that if they touch anything just potentially disease ridden, it will pass into them. Now we can override that and say to ourselves, rationally, "Everything has germs on it and we live in a life and we touch things and we get through." But this system is there and it's active and we can override it.

Dr. Paul Rozin:

Now we can override it because we know something. Like we know that we're really not at risk. Maybe we've been vaccinated something or other, but we don't have all the information. So even our rational system doesn't know how long can this virus stay on a table and be active? How many viruses do we need in us to get sick? Because people tend to think, because of this contagion idea, you get one virus, you've got the disease, and that's not true, you need hundreds of them.

Dr. Paul Rozin:

So it's not like one little microorganism is going to make you sick. Your body can probably handle that. And we don't know, we can't see these things. So it's a very unsettling thing. And of course, when you go into a restaurant, for example, some of these things are enhanced because you're in a less familiar environment, you have less control. But we do go into restaurants all the time and the reason we do, even though there is some risk of getting ill at restaurants, is because we get used to some risks.

Dr. Paul Rozin:

So for example, Israel as a country, has a lot of terrorism, right? They have a pretty frequent threat of terrorism, but they're among the happiest people in the world and they go out and eat. So they get used to the idea that there's a little risk, just as you get used to the idea when you cross the street in New York City, a car might hit you, you just get used to it. Okay.

Marie Molde:
So Paul, I have a question about that.

Dr. Paul Rozin:
Sure, yeah.

Marie Molde:
On that topic about getting used to risk, do you think that right now, we're in the thick of the fears about the Coronavirus and in a couple of weeks we'll calm down and the industry will calm down and things like that? Or, is it too hard to say that right now?

Dr. Paul Rozin:
Well, you can't predict anything. But with this particular situation we're in now, is getting worse. The actual physical situation is getting worse. My partner who's on sabbatical, she's in Venice now and she's locked in Venice. She has a one bedroom apartment. Everything has been closed for two weeks.

Marie Molde:
Yeah.

Dr. Paul Rozin:
She is living perfectly well. She hardly ever sees anybody because there's no one on the street. But she goes to the grocery, all the restaurants are closed. She goes to the grocery every few days and that's it. She walks in the city because there's no one there. So she's fairly safe actually, in this very affected area. But the point is, she's getting used to that, but that's still getting worse, by the way. Venice is getting worse.

Marie Molde:
Yeah.

Dr. Paul Rozin:
So this is going to peak, but it isn't close to peaking yet. So I don't think in the near future people are going to feel less of a threat because the threat is growing. If the threat stayed steady, they'd get used to it probably, but it's growing right now. It's not going to grow too long. I don't know, weeks. Okay?

Dr. Paul Rozin:
So, what is it about eating out? So when you're eating out, you're in a strange environment, you don't have control of it, you don't have control of the people next to you, you don't have control of the serving staff. So strangers are a potential source of illness and of course, for some people, not most Americans, for people, let's say in India, what's going on in the kitchen is very important. We don't think of the kitchen when we go and eat in the restaurant.

Dr. Paul Rozin:
You don't say what's going on in the kitchen? What are the people doing? Are they washing their hands? Are they sticking their finger in the soup and then licking their finger to see if the soup tastes right? The answer is probably yes, but the point is, we don't think about that. So that's a part of the world we're
used to, we’re adapted to that the kitchen isn’t of the restaurant. What we see is the waiters going to other tables, putting the food on there, on the other people’s tables.

Dr. Paul Rozin:
So there’s a little bit of less control than you have at home. Okay? Now, the fancier the restaurant, the more you feel that things are under control, the tables are further apart, the waiters are much more careful about how they hold the food and so on. So, this is a public situation, which there is a higher risk of some sort of contagion. Of course, your own survey, which was very good that Datassential did. Indicates that the thing that people are most worried about in a restaurant is, actually not the food, it’s the table, it’s the serving staff, it’s the door handle on the restroom, on the bathroom.

Marie Molde:
Yeah.

Dr. Paul Rozin:
I mean, public bathrooms are not good places for germs. So most people, probably will try to avoid going to the bathroom in a restaurant, now more than they used to be. But the public display, your data says, that the public display of cleanliness, wiping tables, the way the waiters are dressed, those are the things that can make a difference. And that’s a big concern for people. Okay?

Marie Molde:
Right.

Dr. Paul Rozin:
And you just assume that they’ve done the right thing, that they’ve washed it properly. And I would say, the better the restaurant looks, the more likely people are going to think that. Okay?

Marie Molde:
Yeah. Now, Paul, do you think that people are thinking about things like surfaces in restaurants and packaging more than they were before Coronavirus? And do people think different about things like plates versus cups and silverware? Have you ever studied that kind of thing?

Dr. Paul Rozin:
I have not studied it in this country. I can tell you in India, where they’re much more sensitive to these things, they’re not sensitive so much to germs, they’re sensitive to food being touched by people who are a lower status than they are. It’s an old caste system.

Marie Molde:
Yeah.
Dr. Paul Rozin:
They think that reasonably enough, that smooth hard surfaces are easier to clean than softer surfaces. So a napkin or paper napkin, oh, sorry. A cloth napkin would be a harder thing to make safe than a plate because the plate you can stick it at a very high heat, it’s a smooth surface. That maybe true in general, we don't know that, but I would think that the hard stuff, the dishes and the silverware are relatively safe from people’s perspective.

Marie Molde:
Yeah.

Dr. Paul Rozin:
And of course, a paper napkin in some sense, is safer than a cloth napkin because a cloth napkin is used and a paper napkin is new. A wiped tabletop would not be a big issue in India, but I think it's an issue here. People mentioned it in your survey. Wiping the table, somebody comes and wipes the tabletop with an alcohol cloth before you sit down. That’s probably making people feel better.

Marie Molde:
Yeah.

Dr. Paul Rozin:
The other issue that you raised in our discussions before this was, are other countries different? And I can tell you only one thing for sure. I know about France because I've worked in France. I'm interested in the fact that the French have a better relation to food than we do. They worry less about food. They enjoy it more.

Dr. Paul Rozin:
But another thing about the French is they don't use antibiotics much. The amount of prescribed antibiotics in France is much lower than it is here. They tend to, if they get some kind of infection, they tend to wait it out and get better. So that may affect the way they go into a restaurant. I don't know. One sociologist said that the Americans are afraid of two things, this was 30 years ago, communists and microbes. Okay? You wouldn't have said that for some other people in the world.

Marie Molde:
Yeah.

Dr. Paul Rozin:
So there is always a minimal risk. The world is full of harmful microbes and we get used to everything, including death. We are, death is inevitable. We run around with the possibility of having a heart attack or something, all the time, and we don't really think about it. We're not obsessed with it, but at this particular time, with so much attention with all of television about this, it's very hard to not escape the idea that we are threatened and that our home is the safest place. Now from the point of view of a restaurant, there's a good side to this, which is you can ship the food home.

Marie Molde:
Yeah.
Dr. Paul Rozin:
Every restaurant can, except it's going to be hard for Chinese restaurants. Ironically, China is the start of this. That's the hardest restaurant to ship food home from because they stir fry and their food, by the time it gets to your house, it won't be crisp, but most food is pretty stable.

Marie Molde:
Yeah.

Dr. Paul Rozin:
Most Italian foods, you can get it home. So I think that there is a move, isn't there? You know this from your own data, to go more to delivery at home or picking it up at the restaurant.

Marie Molde:
Yeah.

Dr. Paul Rozin:
When you're picking it up the restaurant, you have some control because you eat it at home.

Marie Molde:
Yeah.

Dr. Paul Rozin:
I personally think, and this is a prediction, but I don't know, that this is going to be a semi-permanent change. That is to say, there's going to be more eating at home. I mean, maybe the same restaurant business, but more of it's going to be delivered home than eaten in restaurants. People are going to see restaurants as a little more threatening, even though they're more pleasant and they're also going to see that's it's easy to get the food home.

Dr. Paul Rozin:
I mean, GrubHub and Caviar, those things should go immensely and they can get faster at bringing the food to your house. So I would think that there may be a longer term change and it might be in the interest of restaurants, it won't be in the interest of their serving staff. They'd be cutting their service staff, they take less space because most of the restaurant is devoted to seating people, but they could deliver excellent food to a lot of people. I think the rush on food stores is going to slow down because you know you can only own, how many rolls of toilet paper do you have in the house, 40?

Marie Molde:
Now Paul, what's the psychology behind that, with this panic buying toilet paper? Why do you think?

Dr. Paul Rozin:
I want to say that, it's surprising. I work on disgust and of course, toilet paper deals with disgust. But this of course, this particular virus does not produce diarrhea.

Marie Molde:
Yeah.

Dr. Paul Rozin:
So there's no reason to think you need more toilet paper if you have Coronavirus or not. So it's obviously irrational. I mean, people aren't buying napkins. I mean, I was in the store recently and it was just about toilet paper and soup. They were out of the soup.

Marie Molde:
Yeah.

Dr. Paul Rozin:
I have no idea why they're out of soup. I mean, canned goods are good things, if you think you're going to be stuck for 30 days, but not only soup. But there was plenty of canned tomatoes and canned tuna fish.

Marie Molde:
Yeah. Now Paul, why do you think the psychology of restaurants is kind of foremost in consumer's minds as far as, they tell us that our survey showed that 54% of consumers say they're going to decrease eating out at sit down restaurants.

Dr. Paul Rozin:
Right.

Marie Molde:
Most people say they're going to cook at home instead. But you know, when you're at the grocery store, people are touching produce and smelling it, and it's almost more human contact, arguably, in a grocery store than in a restaurant. Do you think people think about that?

Dr. Paul Rozin:
Well, that's an interesting question. The lines are very long in grocery stores now. So you're waiting online for maybe 10, 15 minutes with people right in front of you and right behind you. That's not a good situation.

Marie Molde:
Yeah.

Dr. Paul Rozin:
It's probably closer than you're going to be in a regular restaurant, not maybe in a fast food restaurant. It's certainly not when you're eating at a counter, but if you eat at a regular restaurant, you are further apart than you are in a crowded grocery store. So that doesn't make any sense.

Marie Molde:
Yeah.
Dr. Paul Rozin:

However, when you're eating, because eating is often a cause of infection, of course. It's not for this particular organism, which is not an ingestive. It’s not like E. coli or something. There are things you can eat, in some countries particularly, and get sick, it's ingestive, but not this one. So, but I think we're more on guard when we're eating.

Dr. Paul Rozin:

We realize we're putting things into our body and that is a threatening thing to do. So I think there's a little irrationality here because this is not a big risk. You're not likely to, if you happen to eat a few Coronaviruses, nothing would happen, your stomach would kill them.

Marie Molde:

Yeah.

Dr. Paul Rozin:

You're not going to get it. The only way you'd get it in a restaurant is, if it was on the surface or something and you touched it, you touched your face and then you breathe in, maybe, or the next person to you. But the actual food is not the problem, which is why taking it home makes people maybe feel a little safer.

Marie Molde:

Yeah.

Dr. Paul Rozin:

So I think there's some irrationality here. People adapt, but you don't adapt to things that are changing. You adapt to things that are steady, like the steady risk of adjusting a microorganism in normal life or crossing a street. But now we're dealing with an enhanced risk. So I think in this period, people aren't going to get used to it, yet.

Marie Molde:

Yeah.

Dr. Paul Rozin:

This is going to stabilize. That's the whole point of all these courses we're taking and when it stabilizes, it'll be different. But I think restaurants are going to get, people don't like to cook in this country, mostly. So, restaurants provide something for them and I think there may be a move toward more takeout. The restaurants may make up much of their loss by takeout. Once it becomes clear, most people probably have never used GrubHub or I don't know what percent of people, do you know, use takeouts, delivery from restaurants?

Marie Molde:

You know, I don't want to quote a number right now. I think it's about a quarter or a third of people say they do and that's been recent.

Dr. Paul Rozin:
And it's going to go up.

Marie Molde:
Yeah.

Dr. Paul Rozin:
It's going to go up and that's good for restaurants. Now, the menu of a restaurant may have to change a little if this becomes more steady because certain foods are easier to do takeout than others, but okay. As I said, it'll be really tough on Chinese restaurants. You know, there's a reason that there are almost no Chinese fast food restaurants.

Marie Molde:
Because the food doesn't travel well?

Dr. Paul Rozin:
Yes. I mean, there are fast food, little trucks, but there aren't big ones like Olive Garden or McDonald's. There isn't a big Chinese fast food because it all has to be made fresh and it's hard to do that in a fast turnaround place. So anyway, it's just an accident that China is the source of all this. I mean, that's irrelevant to the fact that Chinese food is there.

Marie Molde:
Yeah. And Paul, do you think that Americans or others around the world are going to unfairly stigmatize Chinese food or Italian food?

Dr. Paul Rozin:
Well, it's happened with Chinese food. I know from just people around Philadelphia, that they say that, it's been in the news that Chinatown was pretty empty weeks ago and Chinese restaurants are getting fewer customers.

Marie Molde:
Yeah.

Dr. Paul Rozin:
Italian is going to be an interesting question. The actual incidence of the illness is higher in Italy now than in China. But Italian food is almost American food. Pizza is the most popular American food.

Marie Molde:
I'd have to say, that's true.

Dr. Paul Rozin:
So it's hard to say, how could we turn on Italian food? That would be almost stopping eating. So it may be that Italian food will not suffer. I was saying to you that technically, Mexican food should go up compared to Italian. If people are worried about the source of this thing. I don't know that that will
happen. But it's happened already for Chinese food. So this particular one is not related to any particular food because it's an airborne virus.

Marie Molde:
Yeah.

Dr. Paul Rozin:
But the point is, the public doesn't know a lot of this. The scientists don't know a lot of it yet, about this organism. So uncertainty breeds a certain level of discomfort and a certain level of caution as we learn more about this. And of course, say for influenza, we've gotten used to it. Nobody worries about getting influenza in a restaurant.

Marie Molde:
Yep. Yeah. Dining doesn't suffer during winter time when flu is rampant.

Dr. Paul Rozin:
That's right.

Marie Molde:
Yeah.

Dr. Paul Rozin:
Because we're used to it and this one seems more threatening. I don't really know how deadly this is, nobody really knows that yet. They say 10 times the flu, but they don't really know that because they don't know the number of people who are infected. They only know the number of people who are dying. That they can count.

Marie Molde:
Yeah.

Dr. Paul Rozin:
What might be of interest, maybe to your audience, people show what is called the denominated neglect.

Marie Molde:
Yes.

Dr. Paul Rozin:
That is when they see a risk, they see how many people die and that gets them upset. They don't divide it by how many people there are. So think 10 people in China get ill, that's 10 over 1.4 billion. If 10 people in Iceland get ill, it's 10 over 354,000, they don't pay any attention to the denominator. It's how many people are sick, right?

Marie Molde:
Yep.

Dr. Paul Rozin:
Or how many people are dying? So we have a very low rate right now in our country because we have 330 million people and we have, well, how many people are known to be... well, how many people have died in the United States? 70, I don't know the number?

Marie Molde:
I think it's about that, in a few thousand cases, maybe 3,000 something.

Dr. Paul Rozin:
Yes. So in turns of incidence, we're very low.

Marie Molde:
Yeah.

Dr. Paul Rozin:
Italy's much higher than us, for example. Italy's higher than China right now.

Marie Molde:
I live in Seattle actually, so yeah.

Dr. Paul Rozin:
Oh, you do? Congratulations.

Marie Molde:
Yeah, thank you. We've been, person zero was here and it's a hot bed of Coronavirus since it came to the US and the most recent news that came out yesterday, is that the governor ordered all restaurants to close.

Dr. Paul Rozin:
Yes.

Marie Molde:
All restaurants and bars have to close and they can only offer takeout and delivery.
In New York too.

Marie Molde:
Oh, in New York too?

Dr. Paul Rozin:
I think just now. Yeah. It's going to be true in Philadelphia. It isn't true in Philadelphia yet, but will be shortly.

Marie Molde:
Yeah.

Dr. Paul Rozin:
I think everyone's going to do it, everyone's scared.

Marie Molde:
Yeah.

Dr. Paul Rozin:
Understandably. Their biggest risk now, is the vulnerable people and the fact that the hospitals won't be able to handle all the cases, so they have to cut down on the incidence. Yeah. So I think, but Seattle is point zero. But you know, part of that is because of that Kirkland Nursing Home.

Marie Molde:
Right.

Dr. Paul Rozin:
You get a virus in a home where almost everybody is compromised already and most of the deaths have come there. Right?

Marie Molde:
Right, correct. And do you think that these forced restaurant closures are going to psychologically harm consumers even further? That restaurants are being forced to shut down? Is it going to make people even more scared, do you think?

Dr. Paul Rozin:
Well, anytime the government takes a strong action, it's telling people this is really serious and this has happened. Now, restaurants are major places for socialization. They're not just for eating.

Marie Molde:
Yeah.

Dr. Paul Rozin:
They're for sitting down and relaxing, not having to get up and get the food and all that. It's a really nice situation. We love restaurants and they are wonderful institutions. By the way, you know, they're relatively new. They're only a few hundred years old.

Marie Molde:
Is that right?

Dr. Paul Rozin:
Restaurants, yeah. It started sort of in France. I mean, there were Inns where you stayed overnight, and you ate but nobody went out to eat. This is a new thing and it's very popular and it's growing, especially with the decline of cooking. But now we have a new thing coming in with microwaves, with ways to get good food at home, including delivery from restaurants. So the only way you could get really good food except grandma's food, was to go to a restaurant. Now you can order it from the restaurant. So we're in a very dynamic world now.

Marie Molde:
Yeah.

Dr. Paul Rozin:
Between restaurants being places to go and places to get food from. And also food stores are selling more prepared foods, foods that you just have heat up, like skewers. So our food world is changing very rapidly and this event may accelerate some of those changes. People are going to go back to restaurants.

Marie Molde:
It sounds like one of the biggest changes that might accelerate is just the continued movement toward delivery as a solution instead of, yeah.

Dr. Paul Rozin:
Absolutely. And the delivery is going to get better, faster. And people who haven't done it are going to do it. Now, and it may be cheaper, I don't know. Because restaurants overhead will be reduced of course.

Marie Molde:
Yeah.

Dr. Paul Rozin:
So I don't know about that. And they won't need, of course, some places that make good food won't need fronts on expensive real estate streets because if it's a kitchen you can be anywhere. So I don't know if any of that's going to happen, but I think restaurants should be thinking about that.

Marie Molde:
Now, do you think it's fair, so to say, that restaurants have been forced to shut down now? I just think about here in Seattle, some stores are opting to close as well, like my yoga studio is shut down for the
month and different retailers are. But do you think that restaurants are unfairly stigmatized to be forced to shut down?

Dr. Paul Rozin:
Well that's a good question. Especially, spaced out restaurants.

Marie Molde:
Yeah.

Dr. Paul Rozin:
The answer maybe it's unfair, but you know, almost everything is closing. In Italy everything is closed except grocery stores, banks, I think. Grocery stores, banks and actually, all you need is the automatic teller. Banks, restaurants, stores, restaurants and pharmacies. So they're not picking out only restaurants, it's just that restaurants are, what's open at night.

Dr. Paul Rozin:
The stores close, usually in a certain period of daylight. And then the restaurants are open all at night and so that may be what's going on. In Italy, they originally said nothing would be open after six.

Marie Molde:
Yeah.

Dr. Paul Rozin:
Which affected restaurants. I don't know why they said that, but we're learning a lot from Italy. They're like us and they're a couple of weeks ahead of us and we're learning from them and we made mistakes. I personally think that closing the flights to Europe was a mistake. And what that's produced is massive crowds at airports, the worst crowds we've got, just standing there for hours breathing each other's air.

Marie Molde:
Yeah.

Dr. Paul Rozin:
I mean that's not a good idea. But in any event, we're exploring new things, but look, restaurants are here, they're a part of our life and they're going to take a financial beating for a while and then they're going to come back and if they switch a little more to takeout, that won't hurt them necessarily.

Marie Molde:
Yeah.

Dr. Paul Rozin:
So listen, just let me again, state my sympathies for your food vendors. I mean, the food vendors are not in trouble because everyone's got to eat. This is not like drinking. I mean like drinking alcohol, which is an option, but food is not an option.
Marie Molde:
Yeah.

Dr. Paul Rozin:
So grocery sales are going to continue, of course. It's the restaurants that are affected early.

Marie Molde:
Yeah.

Dr. Paul Rozin:
Yeah. Well this has been good. I hope I helped a little.

Marie Molde:
Yeah. Yeah. I think Paul, you helped a lot. Thank you so much for jumping on the call today. And we at Datassential plan to continue publishing research and reports on Coronavirus. We hope we can collaborate with you and have you back.

Dr. Paul Rozin:
I would be delighted to collaborate.

Marie Molde:
Okay.

Dr. Paul Rozin:
And we can find out if there's any effect on Italian food, of the fact that the Italian virus is so active.

Marie Molde:
Yeah.

Dr. Paul Rozin:
Yeah. Okay.

Marie Molde:
Okay. Great. Well, thank you so much.