

Decision Making to Prevent Genocide: National Security vs. Saving Lives?

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The final report by the Genocide Prevention Task Force (Albright & Cohen, 2008, pp. xv, 3) begins by emphasizing “. . . the fundamental reality that genocide and mass atrocities threaten American values and interests” followed in short order by the surprising statement that “Simply put, the U.S. government does not have an established, coherent policy for preventing and responding to genocide and mass atrocities.” This lack of connection is alarming: if key American interests are not protected by coherent policies, there exists an open invitation for inconsistent, inefficient, and misleading actions that may lead to detrimental effects on national interests.

Most policymakers would agree that decisions about whether the U.S. should attempt to intervene and stop genocide taking place in another country are among the most complicated facing elected officials (Power, 2002). The context for intervention decisions typically is characterized by insufficient time, limited information, scarce financial resources, and (because human lives are at issue) strong emotions. Close oversight and media controversy also are to be expected. In this paper we summarize insights for genocide intervention choices that can be gained from theoretical and applied research in the descriptive and prescriptive decision sciences. We highlight the role of decision aids, useful because policymakers inevitably face difficult tradeoffs across a range of alternatives characterized by the presence of competing value dimensions, diverse stakeholders, and a lack of high quality, trusted information.

Researchers and practitioners interested in judgment and decision making are engaged in two types of related but distinct tasks (Bell, Raiffa, & Tversky, 1988). One is concerned with what people do in the course of making decisions. These *descriptive studies* have provided remarkable insights into the capabilities and limitations of human decision-making skills (Kahneman, 2011). As an example, numerous studies on the phenomena of *constructed preferences* have shown that when situations are novel and unfamiliar, decision makers’ views will not be fully formed but, instead, will be constructed in relation to the various cues that (intentionally or unintentionally) are provided (Lichtenstein & Slovic, 2006). Related studies on judgmental biases (Kahneman & Tversky, 1984) show that new situations may also be understood in terms of others easily available in memory, thereby missing some key reasons why a current situation (e.g., warring factions within Syria) differs from what was experienced before (e.g., in Bosnia or in Afghanistan).

The essential nature of genocides and mass atrocities, in which large numbers of civilians already have been killed and many more are at risk, introduces several other factors that can influence decision makers’ perceptions and choices, without their conscious knowledge of these underlying influences. Statistics of mass human suffering have been referred to as “human beings with the tears dried off” in recognition of the demotivating lack of emotion called *psychic numbing* that results from our inability to appreciate losses of life as they become incrementally larger. This means that for many individuals the importance of life, so great when it is the first or only life saved, diminishes as the total number of lives at risk increases. At some point, the number of people at risk becomes sufficiently large that we seemingly become insensitive to what actually are quite large differences, so that 400 lives at risk feels the same as 4,000 or 400,000. There is thus an incongruence between the normative and rational models of

caring that we assume underlie our preferences and the devaluing of incremental increases in the loss of life in the context of large-scale tragedies (Slovic, Västfjäll, Gregory, & Olson 2016).

Descriptive studies have found that strong images have the power to overcome numbing in a way that statistics rarely do because they invoke our more automatic, System 1 thinking, based on experience and intuition and feelings. This mode contrasts with our complementary System 2 thinking, which involves the slower, more reasoned responses that arise in relation to numbers and statistics (Kahneman, 2011). This may explain why vivid images of children suffering after chemical attacks in Syria produced a military response from the U.S. even though several years of sharply rising death tolls did not move either of two U.S. Presidents to similar action. The images from Syria also bring to mind the photograph of three-year-old Aylan Kurdi lying lifeless on a Turkish beach, which (at least for a short time) brought forth international attention and outrage.

Another reason that decision-making processes may fail to endorse actions to save lives is the cognitive bias known as the *prominence effect*: when struggling to choose among alternatives with important yet conflicting objectives, we often fail to consider the full range of concerns and instead simply choose the option which addresses the more prominent and more easily justifiable attribute, such as national security. As a result, the humanitarian concern of protecting life often becomes devalued in light of the undeniable importance of protecting the homeland (Slovic & Västfjäll, 2013).

Because decisions to protect others also are informed by the perceived efficacy of actions (Andreoni, 1990), a third psychological factor influencing intervention decisions is that feelings of inefficacy can have a demotivating effect. Knowing that millions are in need, whereas any actions one person will take can save only a few, therefore may lead to a non-rational feeling of *pseudoinefficacy*: even though our actions actually can help some people, we turn away due to negative feelings that demotivate us from taking any action. This affective response has been termed *compassion fade*: our positive feelings associated with helping others are dampened by negative feelings about those we are unable to help.

These psychological factors can be viewed as failings of our moral intuition, which favors individual lives and sensational stories. In sharp contrast, decisions in the face of the steady accumulation of unknown persons dying instead require analysis and deliberation to address the tradeoffs associated with various policy actions and to reassert, at both a personal and national level, our priorities and our moral compass. President Obama addressed this need in the context of discussing U.S. policies in the Middle East: “We have to be able to distinguish between these problems analytically, so that we’re not using a pliers where we need a hammer, and we’re not using a battalion when what we should be doing is partnering with the local government . . .” (Remnick, 2014). As researchers and outside observers of national-level policy choices, we have little direct experience of the process by which Washington’s policymakers reach decisions regarding the prevention of genocide or mass atrocities. However, the anecdotal reports of staff and observers (Finkel, 2014; Osnos, 2014) emphasize that even major intervention decisions are often made without reference to clear definitions or a coherent decision structure that carefully delineates competing interests and evaluates the likely ability of different intervention alternatives to address these multiple concerns.

What can be done to ensure that concerns for protecting national security are balanced by other objectives that arise in the context of genocide intervention decisions? The response

involves another important role for decision scientists, who adopt the findings of *prescriptive studies* concerned with helping to structure and organize decision-making processes to improve the quality and defensibility of intervention choices. These decision-aiding procedures are designed to balance fast, intuitive modes of thinking with more deliberative or analytic modes of thought, thereby encouraging dialogue and helping policy makers to identify relevant interests and evaluate policy alternatives in light of the problem context (Raiffa, 2002).

Experiences in two national-scale workshops involving Ambassadors and State Department staff (Gregory, Slovic, & Harstone, 2017) have revealed five categories of values relevant to many intervention decisions to prevent mass atrocities and genocide. Using visual displays to refine objectives through use of *objectives hierarchies* (Keeney, 1992), these expressed intervention values include (1) effects on national security (including both domestic and international political or economic threats), (2) protection of human lives, including civilian and military fatalities and injuries (both U.S. and foreign), (3) economic costs of intervention and aid, (4) effects on the reputation of the U.S. (related to meeting legal obligations or what Power (2002, p. 508) calls “the moral stigma associated with allowing genocide”), and (5) anticipated impacts on regional stability. Measuring predicted changes in objectives as the result of intervention strategies can sometimes be relatively easy, for example using dollars to measure estimated increases in costs. Other important objectives, such as “national security” or “national reputation,” are more difficult to define and may require specific, constructed scales. (Keeney & Gregory, 2005). However, deliberations about intervention options will be improved to the extent that different strategies can be compared explicitly on their more important dimensions and all stakeholders are using the same working definitions for these concerns.

Why the emphasis by decision scientists on clarifying relevant objectives? A short response is that the evidence at hand suggests that policy makers typically give insufficient attention to understanding and carefully defining either their own or others’ objectives when seeking to generate or examine genocide prevention alternatives. This has three main implications. First, only by simplifying the issues and identifying a small set of objectives will it be possible to create responsive alternatives and, in turn, to evaluate the success of the strategies and actions that are undertaken in terms of the extent to which they satisfy the objectives. Second, if objectives are not clearly specified, then it will not be possible to address the trade-offs that inevitably arise in the course of choosing among intervention decisions. Recognizing the importance of objectives also helps decision makers to overcome judgmental biases and develop strategies to address trade-offs that are more appropriate for the current situation. Third, people may realize that as they consider a potential intervention decision from different perspectives they are refining and constructing their values base through the shared activities of learning more about the situation and discussing key elements with others (Lichtenstein & Slovic, 2006). This constructive aspect of decisions encourages both learning and deliberation, which helps people to move beyond their initial gut feelings or intuitions and, perhaps, to arrive at a new conclusion that better reflects the full range of information at hand.

Consequence tables are another key decision structuring tool (Clemen, 2004), used to emphasize the link between the consequences of actions and the concerns that matter the most. They are thus directly responsive to the observation of Albright and Cohen (2008, p. 75) that military leaders and other decision makers “. . . should be prepared to support the decision-making process by describing a range of options, their risks, and likely consequences.” Columns show the different intervention alternatives under consideration and rows show the different values that may be impacted. Each cell of the table thus indicates what is likely to

occur if an alternative is selected. Consequence tables can be kept simple or they can incorporate additional considerations, such as changes in information over time, different geographic regions, or thresholds that might signal the need for a marked shift in action.

Decisions involving threats to national security are inherently difficult. What we are suggesting is that there exist techniques, from both the descriptive and prescriptive sides of the decision sciences, that decision makers appear to find helpful and merit broader application. Depicting genocide prevention decisions in terms of fundamental values, clearly articulated measures of performance, a range of possible alternatives, and including key sources of uncertainty can help to organize what is known about the predicted consequences of interventions while highlighting key information gaps. A more structured approach to genocide intervention choices also has the capability to examine carefully a vague doctrine, such as “protect the national interest” or “promote humanitarian interventions,” and clarify its meaning to promote both understanding and dialogue. Of course, a decision-aiding framework cannot “make” the tough choices required of the U.S. government with respect to interventions intended to reduce genocide and mass atrocities. What it can do is to improve the quality and extent of intervention deliberations, laying the groundwork for a more consistent and comprehensive national policy in the face of threats posed to American values and interests.

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