

Trust us, we know what we are doing:

Institutional Trust in Croatia during the Coronacrisis

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ABSTRACT

Low levels of trust in institutions in a post-socialist world is a relatively well documented finding across various disciplines of social science. Building upon this argument, the paper adds new insights to this discussion by contextualizing institutional trust in the midst of the COVID-19 pandemic in Croatia. Relying on the results from the national probabilistic sample, authors explore how three sets of predictors - socio-demographic variables, individual characteristics (i. e. motivational orientations of authoritarianism and social dominance) and participants' experiences during the coronavirus pandemic determine the level of trust in public institutions. Results unequivocally showcase a fairly weak relationship between authoritarianism and social dominance orientation with institutional trust, unlike situational experiences, which play the most significant role in explaining levels of institutional trust. Contrary to authors' expectations, adherence to measures and worries about catching the COVID-19 disease in the future were not predictive for institutional trust.

Key words: COVID-19, corona crisis, Croatia, institutional trust

Introduction

In the last three decades contemporary democracies, particularly those in Eastern Europe, have been facing a grave decline in institutional trust (Boda, Medve-Balint 2014; Van der Meer 2017) This trend, amplified by the economic crisis that started in 2007, has brought into question the mere mandate of the state, as democratic political regimes “require at least tacit consent and passive support for the democratic political institutions of the citizens” (Henjak 2017, 344) Even though low levels of trust in institutions are most certainly not inherent only for post-socialist countries, they are marked by considerably high levels of public discontent with the democratic system of government as such (Boda & Medve-Balint 2020; 2014; Linde &

Ekman 2005; Mishler & Rose 2001) Low levels of trust in political institutions are a danger for the state as they could lead to democratic deficit and the lack of support for governmental policies aimed at solving existing societal problems. Although Croatia is no exception to this case, it makes, due to its structural characteristics, a peculiar case-study worth a closer look. Similarly to other post-socialist societies, Croatia is facing a high level of corruption, low level of political literacy, economic deprivation, social inequalities, but also high polarization and political division based on predominantly ideological differences (Henjak 2017; Sekulić 2016; Šiber 1998) In such polarized societies, outcomes of democratic institutions are subordinate to whether the preferred party is in power and whether the government agenda represents the views of a specific group (Anderson et al. 2005; in Henjak 2017) These structural characteristics of a certain society do not pose only a discursive problem but also influence negatively the decision-making processes and make a common vision of the future challenging to define. One might think this issue would provoke a considerable interest among social scientists, in order to understand the democratic deficit in Croatia in more detail; however, studies on configuration, effects and predictors of institutional distrust of general population in Croatia, even though existing, still do not offer meticulous analyses of individual and social characteristics influencing the level of institutional trust¹.

Nevertheless, a few examples illustrate predominant elements of institutional trust in Croatia. Generally, Croatian citizens have low levels of trust in institutions of representative democracy such as parliament, government and political parties (Baloban & Rimac 1998; Rimac 2000) Studies also show that there is a positive correlation between conservative values and trust in institutions while echoing low levels of trust in Croatia (Sekulić & Šporer 2006; 2010) Certain authors speculate that a high level of perception of corruption could be a reason for low levels of institutional trust (Štulhofer 2004) In regard to the role of media in explaining institutional (mis)trust, Čuvalo (2013) showcases that the frequency of media use in

¹ The exception from this is a plethora of studies about institutional trust of young people (Ilišin, Gvozdanović & Potočnik 2018; Gvozdanović 2014; 2015; Ilišin 2015; Franc & Međugorac 2015) A number of studies confirm young people in Croatia demonstrate great institutional mistrust which is “significantly formed by a set of political values (interest in politics, self-expression values and political preference) and evaluation of political system’s democratic functioning (perception of political influence)” (Gvozdanović 2014, 5)

Croatia is the best predictor of institutional trust, just as the frequency of television viewing has a positive effect on trust in state institutions. Furthermore, some more recent studies demonstrate that greater trust in governmental institutions is related to more frequent voting but has negative effects on protest participation (Franc, Maglić & Sučić 2020)

This long lasting problem of low level of institutional trust was additionally aggravated by the global COVID-19 pandemic that started in 2020. Starting as a health crisis, it very soon became a social, economic and political issue just as much. The state institutions have put most of their focus in attempts to control and alleviate the effects of the coronavirus crisis, however, as one would expect, it was difficult to implement the decisions in societies characterized by low level of trust in governmental institutions and actions (Van Assche et al. 2020) Public discourse in Croatia did not only entail dissonant voices characteristic of pluralistic democracy, but also a call for disobedience against the government, diminishing legitimacy of epidemiological measures and sometimes even active resistance against the national policies aimed to control the pandemic. Without engaging into discussion on the effectiveness and justification of the proposed policy measures, the question relevant for this context becomes – what determines public (mis)trust in democratic institutions in the midst of the pandemic? Which individual and social characteristics determine the level of trust in public institutions? These questions are the main focus of this paper.

By using data from the survey conducted in the end of August and beginning of September 2020, on a national probabilistic sample of 1,060 participants aged 18 to 74 years², this paper seeks to explore some of the structural characteristics of Croatian society in the context of the coronavirus crisis. The paper consists of two parts. In the first part, we explore the general phenomenon of trust in the context of the

² The survey is a part of a “research project entitled **Name of the project**, funded by the Croatian Science Foundation, which sought to address the psychological and social consequences of facing the long-standing coronavirus pandemic in Croatia, as well as whether Croatia, as a society, can recover from the pandemic. The research was conceived as a longitudinal study that assessed, at three points in time over the course of a year, how Croatian citizens faced the pandemic, how they perceived the society in which they lived and what kind of society they expected in the future” (Authors 2020, 14)

coronavirus crisis, while in the second part the analysis of institutional trust based on the survey data on Croatia is being presented.

Trust (in institutions) and Coronavirus

The trust in system institutions is one of five various levels of support for the democratic regime (Norris 1999; Holmberg 1999), along with the support to the political community, regime principles, regime performance and political leaders. In this multi-dimensional model, trust in institutions is at level four, between the support to regime performance and the support to political leaders, where, based on David Easton's insights (1975), higher levels encompass a diffuse support to the democratic regime, and lower levels a specific support. Thereat, diffuse support means evaluating objects of political system (political community, regime principles) without attachment to a concrete person, while the specific implies satisfaction with the “current efficiency of particular political objects” (Čular and Šalaj 2019, 9), which includes system institutions and political leaders. Although low levels or fluctuations of specific support are of lesser concern for the democratic regime, than those related to diffuse support, it has to be pointed out that if there is a long-term trend of low trust in institutions, a decrease of diffuse support can also occur (Miller and Listhaug 1999, 216) The same authors indicate that the main predictor of trust in political institutions is their performance, i.e., the expectations of citizens and the delivered outputs. If expectations are not met, then trust is also low, and if citizens are satisfied with the work of institutions, then they will have greater trust in the latter. Regarding that citizens' reliance on institutions is based on incomplete information related to inputs and outputs, trust in institutions can be defined “as confidence that political institutions would not misuse their power” (Lühiste 2006, 478) The concept of trust that involves risk is based on accepting the possibility of being deceived and hurt, but in return getting potential cooperation and benefits (Warren 1999, 311) Therefore, the citizens' trust in institutions that Eek and Rothstein (2009) call vertical trust is important for democracy because it points to the willingness of citizens to rely, despite the risk, on the institutional order, with the aim of fulfilling their demands and needs. In other words, that

there is avoidance of institutions when there is low trust due to failed expectations and dissatisfaction with their work. In this case, political institutions are unable to implement successfully the set goals (Reeskens and Muis 2020)

Institutional trust is important for the functioning of democracy and political institutions, because it ensures citizens' acceptance of decisions and policies (Levi and Stoker 2000, 493) This is particularly evident in cases of unpredicted or crisis situations, which is also suggested by recent papers related to COVID-19 (Devine et al. 2020; Han et al. 2020; Olsen and Hjorth 2020; Van Bavel et al. 2020; Dohle, Wingen and Schreiber 2020) Previous research on other epidemics and crises also support this viewpoint (Blair, Morse and Tsai 2017; Meredith et al. 2007; Prati, Pietrantoni and Zani 2011; Siegrist and Zingg 2014; Tsai, Morse and Blair 2020; van der Weerd et al. 2011; Vinck et al. 2019) The main insights of these studies indicate that higher levels of trust in such situations enable easier consent of citizens to comply with the governmental decisions that to a certain degree influence individual freedoms, e.g. deciding upon vaccination, complying with the measures, accepting the guidelines of competent institutions, etc. The authors (Han et al. 2020, 13) of one of the most comprehensive research on the topic during the coronavirus pandemic infer that it is the higher levels of institutional trust that are related to stronger compliance with the measures promoted by the authorities to prevent the spread of the coronavirus. These measures include keeping physical distance, washing hands and practising self-isolation. Similar conclusions are those by Dohle, Wingen and Schreiber (2020, 17), who find that it was the trust in politics and science that, along with the perceived risk, occurred as the deciding factors in accepting the protective measures, while Oksanen et al. (2020, 7) for the same reasons characterize trust as a protective factor.

It is therefore important to strive to identify what determines the levels of trust, and particularly what trust is like during crises. This is why the matter of institutional trust during the coronavirus pandemic was the focus of many authors trying to provide various explanations. An array of explanations, which are not unambiguous, are related to reactions of authorities and to viewing the pandemic as an outer threat. Some authors underline the existence of the "rally around the flag" effect, which manifests in a, usually short-

lived, increase of trust in institutions during the times of crisis (Bækgaard et al. 2020; Esaiasson et al. 2020; Reeskens and Muis 2020) Rally around the flag literature is focused on exploring the trust in institutions during the pandemic, with health crisis being observed as other threats, such as wars or terrorist attacks, albeit taking into account certain differences, such as imprecise time of beginning and uncertain ending. Bækgaard et al. (2020) and Sibley et al. (2020) explain higher levels of trust as a consequence of the “rally around the flag” effect, occurring due to the strengthening of the pandemic and the introduction of lockdown. The importance of introducing lockdown for the increase of institutional trust is recognized by Bol et al. (2020) in their study. However, they report not finding any significant proof of existence of the “rally around the flag” effect, because the levels of trust did not depend on the number of deceased. In contrast, Schraff (2020, 11) rejects the influence of lockdown and attributes the increase of trust to the “rally around the flag” effect, i.e. suggests that the level of trust followed the number of accumulated cases. Further on, in explaining a steep increase of institutional trust in Italy, Falcone et al. (2020, 15) find the main predictors in citizens' perception of the authorities' competency and reliability, and the perception that the government's decisions and the interventions undertaken were clearly directed and adequate.

On the other side, the level of institutional trust is viewed in relation to personal experience with the coronavirus, in the sense of direct (personal infestation) or indirect (contact with the infected) exposure of the respondents to the disease. Further, it is related to economic experience through the working status (Brück et al. 2020), or to close contacts with those who were infected with the coronavirus, i.e. relatives and friends (Amat et al. 2020) Thus, Amat et al. (2020) find that as a result of personal experience institutional trust is decreased, while the demands for introducing a technocratic government and authoritarian measures are increased, along with the willingness to give up personal freedoms. Nonetheless, Tepe et al. (2020) also note the willingness to give up personal freedoms with the aim to prevent the rise in the number of deceased from COVID-19, and to give greater power to executive authorities in relation to the parliament.

Present study

The goal of the present study was to explore determinants of institutional trust in the context of the coronavirus pandemic in Croatia. We assumed two groups of predictors to be relevant for explaining institutional trust in pandemic. The first group are relative stable motivational orientations, namely social dominance orientation (SDO) (Sidanius & Pratto 1999) and right-wing authoritarianism (RWA) (Altemeyer 1998), which form basic dimensions of ideological beliefs within the dual process motivational approach to ideological attitudes (Duckitt & Sibley 2009; 2010) Those high in SDO perceive the world as a jungle and value ingroup dominance, power and superiority, while those high in RWA perceive the world as a threatening place and value societal security, order and stability (Duckitt & Sibley 2007) Therefore, the coronavirus crisis as a world-wide pandemic set challenging social circumstances, alleviating threat and danger among many, but especially among authoritarians and social dominators whose basic needs for stability, order and power have been endangered. Since political and public institutions are epitomes of authority and stability, as well as power and dominance, those high in SDO or RWA should have greater institutional trust. Several studies found results that are in concordance with these hypotheses. E. g. Devos et al. (2002) found a positive correlation between valuing power or security and institutional trust. Furthermore, Jost, Nosek, & Gosling (2008) found that conservatives endorsed more positive attitudes toward government, police and the military, while Dunn (2020) found that those higher in authoritarianism showed greater trust in various institutions (e.g. military, government, parliament, police) Recent study by Lowrey-Kinberg, Mellinger, & Kearns (2020) also showed that individuals higher in SDO showed greater levels of trust in the police. Hence, in the present study we expected those higher in RWA and SDO to show higher levels of trust in political and public institutions (H1) The second group of predictors entail experiences with the pandemic. We expect that both negative and positive experiences should have a positive impact on institutional trust levels. Regarding negative experiences, as with previous studies on institutional trust during the pandemic, we expect to find a rallying around the flag effect (e.g. Bækgaard et al. 2020; Daniele et al. 2020; Esaiasson et al. 2020) This effect can be thought of as compensatory institutional trust, which refers to a “blind” increase in institutional trust as a response to experienced low

sense of safety, security, certainty, control, meaning etc. (Shockley & Shepherd 2016) The implication is that those individuals that are more worried about (contracting) the coronavirus should show greater levels of institutional trust (H2) (as shown in Bruck et al. 2020; Daniele et al. 2020; Reeskens & Muis 2020), which is also true for those that adhere more to government imposed measures (H3) (Daniele et al. 2020) Furthermore, we expect that the compensatory institutional trust should be amplified if citizens are satisfied with national actors handling the pandemic (e.g. ministry of health or governmental task forces) (H4) Since the coronavirus pandemic has impacted societies around the world at an unprecedented level, it has been a breeding ground for conspiracy theories. If we understand belief in conspiracy theories as a “radical and generalized manifestation of distrust” (Aupers 2012), then we can expect those individuals that support conspiracy theories regarding the coronavirus to have lower levels of institutional trust (H5) This has been shown in several studies (Bruder & Kunert 2020; Earnshaw et al. 2020; Karić & Međedović 2020; Pavela Banai et al. 2020; Pummerer et al. 2020; van Mulukom et al. 2020)

As we emphasized above, since institutional trust is a form of vertical social trust within a society, it should be positively related to positive social experiences that individuals experience. An important aspect of social experiences is our sense that others in a given situation share our social identity (Neville & Reicher 2011) Studies showed that shared identity relates to more positive emotions regarding collective experiences (ibid), greater collective support and wellbeing (Gray & Stevenson 2018), higher self-assessed health levels (Khan et al. 2015), etc. Since the coronavirus pandemic is a collective experience *par excellence*, several authors have proposed that the key to collective resilience, positive health practices, solidarity, and strong social ties is having a shared identity within the collective (Elcheroth & Drury, 2020; Jetten et al. 2020; Reicher & Stott 2020; however, see Forsyth 2020) Thus, we expect that those individuals that have a greater sense of shared identity with other members of the community should also show greater levels of institutional trust (H6) Similarly, we expect individuals whose general quality of life, which is at least partly related to hers/his relationship with others, was positively evaluated during the pandemic to have greater levels of institutional trust (H7) (Bruck et al. 2020)

Method

In order to answer our hypotheses, we surveyed a probabilistic national sample of Croatian citizens (N=1060) about their experiences and perceptions of the coronavirus pandemic. The sample was stratified based on the region and size of participants' settlement. The survey was conducted via the internet (CAWI method) at the end of August and beginning of September 2020. Following a major decline in the number of new cases at the beginning of the summer, this period showed a strong increase in daily numbers of new coronavirus cases (averaging at 260 cases per day) (Authors 2020)

The sample consisted of 50.8%³ female participants, average age was 44.96 (SD = 15.5), with 93.6 % participants being ethnic Croatian. Most participants (58.9%) had middle school education, 16.3% had lower than that, and 24.8% had finished college or higher.

Measures

To measure *institutional trust* we asked people the following question "Please assess the level of trust you personally have in the following persons, institutions or organizations, on a scale from 0 (no trust at all) to 10 (complete trust)". We focused on 12 institutions from three groups - political institutions included political parties, the Government, the Parliament, the President, and the National Civil Protection Headquarters; public institutions included judiciary, police and the educational system; independent institutions included scientists, NGOs, the media, and the Catholic Church. Measures of each group of institutions had satisfactory results of confirmatory factor analysis as well as levels of internal consistency⁴. Since correlations between mean levels of trust for each group were very high (>0.74), we aggregated them into a general measure of institutional trust (based on suggestions in Dattalo 2013)

³ Descriptives (means, standard deviations and percentages) are weighted by region, size of settlement, gender, age and education. All other statistical procedures are conducted on non-weighted data.

⁴ Political institutions - ($\chi^2 = 23.981$; $df = 4$; $p < .001$; RMSEA = 0.063; CFI = 0.995; TLI = 0.986; $\alpha = .87$); public institutions ($\chi^2 = 0$; $df = 0$; $p < .001$; RMSEA = 0; CFI = 1; TLI = 1; $\alpha = .76$); independent institutions ($\chi^2 = 22.178$; $df = 2$; $p < .001$; RMSEA = 0.089; CFI = 0.979; TLI = 0.936; $\alpha = .67$)

For measuring *social dominance orientation* we used the five-item scale developed by Todosijević (2013); CFA results were adequate ($\chi^2 = 327.3$; $df = 33$; $p < .001$; RMSEA = 0.09; CFI = 0.96; TLI = 0.94) for a single factor structure with Cronbach alpha of 0.79. *Right-wing authoritarianism* was measured with the six-item scale from Bizumic & Duckitt (2018) Unfortunately, both inter-item correlations and Cronbach alpha were very low ($\alpha = .48$); the exception being the conventionalism subscale ($r = .54$) Thus, we decided not to use the whole scale, focusing only on conventionalism subscale which we use as a proxy for authoritarianism in further analyses.

Personal experiences with the coronavirus were measured by five variables: worries about getting infected with the coronavirus, adherence to preventive behaviors suggested as preventive measures in fighting the coronavirus, beliefs in conspiracy theories, satisfaction with the work of national actors responsible for fighting the epidemic and perception of a shared identity with compatriots. *Worry about the coronavirus* was measured with a single item asking participants to rate their level of worry about contracting the coronavirus in the future (0-not at all; 10-extremely worried)

The level of *adherence to preventive behaviors* promoted by the National Civil Protection Headquarters was measured with an ad-hoc scale, from which we focused on three most prominent measures - adherence to social distancing, wearing a mask, and washing hands. We used a 4-point scale, 1 being “doesn’t apply to me at all”, and 4 being “completely applies to me”.

Level of *belief in conspiracy theories* was measured with an ad-hoc scale with 10 items, ranging from theories that the coronavirus can spread faster via 5G network, to believing that Bill and Melinda Gates created the coronavirus. EFA pointed to two factors with a high correlation (0.81), so we aggregated all the items into a general measure. As reported in Tonković et al. (under review) “CFA confirmed good fit for the model with one higher-order factor ($\chi^2 = 327.3$; $df = 33$; $p < .001$; RMSEA = 0.09; CFI = 0.96; TLI = 0.94) Cronbach’s alpha was high ($\alpha = .92$)”

Satisfaction with national actors was an ad-hoc measure, asking respondents to rate the level of their satisfaction with the work of the Government, Parliament, and both National and Local Civil Protection Headquarters on a scale of 1 (not satisfied at all) to 5 (extremely satisfied)

To measure *shared identity* we adapted the five-item scale developed by Khan et al. (2015) in which participants had to evaluate how much they feel that Croatian citizens think about themselves as members of the same group, share the “we feeling” among themselves, share the same identity despite differences etc. CFA results were satisfactory ($\chi^2 = 13.575$; $df = 4$; $p < .001$; RMSEA = 0.043; CFI = 0.995; TLI = 0.986) and Cronbach alpha was 0.89.

Finally, the *quality of life* was measured with a single-item measure (Rose et al., 2009) asking participants to rate satisfaction with their life in general on a scale ranging from 0 (very unsatisfied) to 10 (extremely satisfied)

Results

Analysis was done in R 4.0.2 (R Core Team, 2020) with the following packages - *psych* (Revelle 2020), *car* (Fox & Weisberg 2019), *lavaan* (Rosseel 2012), *survey* (Lumley 2020), and *gvlma* (Pena & Slate 2019) Descriptives can be found in Table 1. Average level of institutional trust is low ($M = 3.84$; $SD=1.87$) but comparable to other studies on trust in the Croatian context (e.g. Rimac 2000; Sekulić and Šporer 2010; Nikodem and Črpić 2014) Similarly, participants were relatively unsatisfied with the work of national actors during the pandemic ($M=2.56$; $SD=0.95$) At the same time, their level of worry about getting sick with the coronavirus was below average ($M=4.86$; $SD=3.41$), and they reported high levels of adherence to prevention measures ($M=3.16$; $SD=0.73$) Participants showed an average (mid-point) level of social dominance orientation ($M=2.86$; $SD=0.77$) and below average levels of authoritarianism ($M=2.18$; $SD=1.00$) Participants showed average levels of belief in conspiracy theories about the coronavirus ($M=2.93$; $SD=0.92$), as well as average levels of shared identity ($M=2.84$; $SD=0.86$) All variables have acceptable levels of skewness and kurtosis. Finally, their quality of life was above average ($M=6.64$; $SD=1.87$)

Table 1 here

Zero-order correlations between predictors and institutional trust can be found in Table 2. Correlation between institutional trust and satisfaction with national actors was highest ($r=0.60$), followed by shared identity ($r=0.35$), adhering to measures ($r=0.21$), and belief in conspiracy theories ($r=-0.21$), while correlation with social dominance orientation was non-significant. Correlations between predictors were mostly significant and of low to medium strength.

Table 2 here

Hierarchical regression

We decided to group our predictors based on the assumption that stable individual characteristics, and individual experiences during the coronavirus pandemic would explain the criterion variance above and beyond the basic sociodemographics. Hence, we performed hierarchical multiple regression analysis by entering predictors in four steps. In the first step, sociodemographic variables, i.e. age, gender, socioeconomic status, and education level were introduced in order to control for their effects. Next, we added stable motivational orientations, social dominance orientation and authoritarianism. We assume these are the characteristics which form the background onto which perceptions of the coronavirus, a major individual and societal threat, would be formed. The third group of predictors includes variables that measure coronavirus experiences - worry about getting sick from the coronavirus in the future, adhering to preventive measures, beliefs in coronavirus conspiracy theories, satisfaction with national actors and shared identity. Although beliefs in conspiracy theories may be considered as a stable predisposition (Uscinski, Klofstad, & Atkinson 2016), these beliefs are also sensitive to social contexts (van Prooijen & Douglas 2018) and hence liable to be developed or strengthened depending on actual matter that needs to be explained outside and beyond official explanations. Therefore we have decided to include conspiracy theory

beliefs as a part of the set of variables related to personal coronavirus experiences. Finally, we add a global estimate of quality of life in the coronavirus crisis considering it as a mental health indicator stemming from how people process their experiences with the coronavirus.

Using the package *gvlma* (Pena & Slate 2019) we tested for the regression assumptions of the full model. The results showed that the model did not satisfy the linearity and kurtosis assumption. To ameliorate this, we plotted residuals and visually inspected them for outliers. Five outliers were identified and removed, after which all regression assumptions were satisfied and thus we continued our analysis.

Table 3 shows the results of the hierarchical regression. In the first step we add control variables which contributed significantly to the regression model ($F(4,1042)=14.193$; $p<0.001$) and accounted for 3.3% of variance of institutional trust. Next, we add SDO and authoritarianism which significantly contributed to the regression model ($F(2,1040)=24.476$; $p<0.001$), and explained an additional 2.9%. In the third step we add predictors that capture experiences with the coronavirus pandemic. This step was statistically significant ($F(5,1035)=134.313$; $p<0.001$), and explained an additional 37.7%. Finally, in the last step the measure of quality of life contributed significantly ($F(1,1034)=14.710$; $p<0.001$) with explaining an additional 0.9%. The final model explained 44.8% variance of institutional trust. Looking at individual predictors, we can conclude that older participants have higher levels of institutional trust, as well as those with higher levels of social dominance orientation and authoritarianism. Regarding experiences with the coronavirus, results show that individuals who are more satisfied with national actors have higher levels of institutional trust, as well as those who think that Croatian citizens share a common identity. Furthermore, stronger belief in conspiracy theories about the coronavirus was connected with lower institutional trust. Finally, participants who reported higher levels of quality of life had greater levels of institutional trust.

Table 3 here

Discussion

The present study aimed to explore predictors of institutional trust in the Croatian general population. We hypothesized that individual and social experiences during the coronavirus pandemic as well as self-perceived quality of life of participants would contribute significantly in explaining the variance of the criterion of institutional trust above and beyond sociodemographics and stable individual characteristics. Before commenting on the results of the prediction itself, it is worth pointing out that the level of trust is relatively low, corroborating previous findings and indicating a chronically low trust in institutions in Croatia (Henjak 2017; Majetić et al. 2017) The selected set of predictors have explained almost 45 percent of variance in institutional trust. After controlling for sociodemographic variables, we expected stable individual characteristics, recent experiences with the pandemic and outcomes associated with how people have processed their experiences to contribute significantly in explaining the criterion of institutional trust. Our results showed that sociodemographic variables were fairly weak predictors of institutional trust, and only age and socioeconomic status proved to be significant, showing that those older and of higher socioeconomic status also trusted the institutions more. These results are in line with other studies (e. g. Drakos, Kallandranis, & Karidis 2019; Nieminen et al. 2008; OESC 2017)

After controlling for the influence of sociodemographics, stable individual characteristics, i. e. motivational orientations of authoritarianism and social dominance orientation contributed also only marginally, indicating that these variables, though theoretically sound, are not substantial in explaining institutional trust, and hence not of utmost relevance to be controlled for. Nevertheless, our results showing a fairly weak relationship between authoritarianism and particularly SDO with institutional trust are supported by previous findings. E. g. the study by Castillo, Miranda & Torres (2011) showed significant but only modest correlations between RWA and SDO with trust in various governing institutions. Importantly, there are more studies linking authoritarianism and institutional trust than those linking SDO and institutional trust, and their results have confirmed the expected relationship: those high on the authoritarian dimension also trusted the institutions more (Henjak 2017; see also Jamal & Nooruddin 2010) In the present study

authoritarianism proved to be a slightly better predictor of institutional trust than social dominance orientation. It is possible that times of threat have a more stimulating effect for authoritarians to react, in this case with trusting more in institutions as a way of satisfying their basic need for stability and security (Duckitt & Sibley 2007) Nevertheless, although authoritarianism was a slightly better predictor of trust, predictive power of neither of motivational orientations was robust. Future research may want to explore further differences in how authoritarians and social dominators respond to crisis and how these responses are reflected in how much trust these social actors are willing to give to the governing institutions. Unlike individual characteristics, immediate experiences during the pandemic proved to be the most robust predictors of institutional trust showing its relative fragility and dependence on social circumstances. Though there is a lively debate in the literature about stability of different forms of trust (e. g. Dawson 2019), institutional trust is expected to be reactive, i. e. related to what people experience in their daily lives, especially in times of crisis, economic hardships and/or public health threat (cf. Foa et al. 2020) In our study, by adding variables related to experiences during the coronavirus pandemic to the equation, the amount of explained variance in institutional trust was practically quadrupled. Along these lines the most robust predictor in the group of predictors related to the participants' experiences during the coronavirus pandemic was satisfaction with the work of key national actors. It shows that those who were more satisfied with their work during the pandemic were also the most trustful. As expected, shared identity also contributed positively, showing that those who perceive the nation as being more united, sharing similar goals and similar destiny in spite of possible differences also trusted the institutions more, apparently perceiving officials and institutions as being representatives of "us". It is possible to interpret these results as a product of the "rally around the flag" effect that is observed in times of crisis, including this one the world has been experiencing for almost a year now (Bækgaard et al. 2020; Esaiasson et al. 2020; Reeskens & Muis 2020)

It is worth pointing out that the perception of shared identity in our study was the second best predictor of institutional trust. The implication of these results is fairly clear - one strategy for boosting institutional

trust in the general public may be to promote and even heighten the sense of shared identity and belonging. Thus, a sense of community and shared identity may also contribute to societal health as much as they help individuals to cope with stress and the challenges they face (Jetten, Haslam & Haslam 2011; Jetten et al. 2020; Sibley et al. 2020) Finally, beliefs in conspiracy theories were also significant among predictors of institutional trust relevant for experiences during the coronavirus crisis. As expected, the results showed that those who believe in conspiracy theories related to a variety of aspects of the coronavirus pandemic also trusted the institutions less. At the core of beliefs in conspiracy theories is an underlying assumption that those in power, basically for their own interests, keep secrets, hide important information or plot against the public (Douglas et al. 2019) Usually, although not exclusively, governments and/or equally powerful officials are those who are “accused parties” in most conspiracy theories and related beliefs. Therefore our results showing that conspiracists trust less in institutions are in line with theoretical expectations and previous findings (e.g. Douglas et al. 2019; Freeman et al. 2020; Kim & Cao 2016) Our more in-depth analysis of the same data set on conspiracy beliefs in Croatia has shown that little less than a quarter of participants endorse conspiracy beliefs related to the coronavirus pandemic (Tonković et al., under review; cf. Freeman et al. 2020), meaning that there is a not so small minority who could undermine institutional efforts in fighting the coronavirus pandemic.

In line with these concerns are the results of our non-significant predictors. Contrary to our expectations, adherence to measures and worries about catching the COVID-19 disease in the future were not predictive for institutional trust. Previous research has shown a straightforward relation between institutional trust (i. e. trust in government) and adherence to health guidelines and measures introduced during pandemics (Dohle, Wingen & Schreiber 2020; Gilles et al. 2011; Quin et al. 2013) Nevertheless, our results failed to corroborate these previous findings. However, bivariate correlations among the variables concerned indicate a possibility that the most robust predictor of being satisfied with the work of national actors overtakes the effects of predictors less correlated with the criterion of trust. Indeed, additional analyses proved satisfaction with national actors as being a full mediator between adherence to preventive measures

and institutional trust and a partial mediator between personal worries about the coronavirus and institutional trust. In other words, individual worries and adherence to preventive behaviors are relevant for institutional trust via citizens' perceptions of how key national actors have been doing their job during the pandemic. Therefore and again, for the public to be truthful towards the officials and institutions, especially in times of crisis, it is of utmost importance to perceive that they work efficiently for common interests. Finally, we expected that the perceived quality of life would also be predictive for how much citizens trust the institutions. The results have confirmed this expectation, showing those who perceive their quality of life as higher also trust the institutions more. Here the quality of life could be understood as a measure of subjective well-being and as such a mental health indicator, considering that subjective well-being implies a good mental state (OECD 2013) Since quality of life is highly dependent on external circumstances and on how an individual interprets them, this measure may also serve as an indicator of how participants have processed their experiences during the pandemic and what effects this processing may have on institutional trust. The observed relationship indicates that quality of life is an important determinant of institutional trust with fairly clear implication: with an expected impairment of life conditions due to pandemic one may also expect a serious decline in quality of life for many people, especially for those most deprived and vulnerable (e. g. Buheji et al. 2020) Our results suggest that this decline may have serious consequences for institutional trust.

Conclusion

The exploration of institutional trust in democracies is relevant not only for political scientists but also for a plethora of different scholars and actors as it indicates the quality of social and institutional relations in a certain community. In a time of crisis when citizens expect from institutions, which have been entrusted to alleviate problems, to act effectively, these and similar studies have additional benefits. This paper therefore contributes to a body of literature on the ongoing global crisis - COVID-19 pandemic on aspects relevant for good governance in a way that it unveils the relationship between a set of selected variables and trust in public institutions, by using data from a national probabilistic sample, in the times when these kinds of

studies are scarce. Moreover, by focusing on the Croatian context, which is characterised by a lack of large scale quantitative studies on institutional trust, this paper blatantly elucidates the importance of situational occurrences for understanding the level of trust in public institutions. Unlike sociodemographic and individual characteristics, hierarchical regression revealed that variables of citizens' experiences during the COVID-19 pandemic proved to be the most robust predictors of institutional trust showing its relative fragility and dependence on social circumstances. Surprisingly, adherence to measures and worries about catching the COVID-19 disease in the future were not predictive for institutional trust. This peculiar finding can be of particular interest to other scholars studying different national contexts during the corona crisis, as it rebuttals the ingrained media notion in which citizens that adhere to measures do so because they trust governmental decisions. However, this and other results should be taken conditionally, as for a better understanding of the relationship between the state and its citizens a longitudinal research design should be employed. Only by looking at the same variables over an extended period of time, the conclusions on the utter relevance of social conditions demonstrated in this paper would be unambiguous. Also, in this research a conventionalism subscale is used as a proxy for authoritarianism. To analyse the relationship between authoritarianism and institutional trust, a more contextually oriented authoritarianism scale should be used. Nevertheless, using socio-demographic variables, individual characteristics and participants' experiences to determine the level of trust in public institutions during the coronavirus pandemic undoubtedly contributed to our understanding of the social and political aspects of the ongoing corona crisis.

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Table 1. Descriptives for relevant variables

	Mean	SD	Min	Max	Skewness	Kurtosis
Institutional trust	3.84	1.87	0	10	0.201446	-0.34736
Age	44.96	15.50	18	74	0.001451	-1.18227
Socio-economic status ⁵	2.86	0.77	1	5	-0.36267	0.878854
Social dominance orientation	2.31	0.87	1	5	0.444115	-0.15306
Authoritarianism	2.18	1.00	1	5	0.614297	-0.35442
Satisfaction with national actors	2.56	0.95	1	5	-0.02512	-0.7698
Shared identity	2.84	0.86	1	5	-0.11989	-0.05035
Belief in conspiracy theories	2.93	0.92	1	5	0.053667	-0.50454
Worry about coronavirus	4.86	3.41	0	10	0.06332	-1.25678
Adhering to measures	3.16	0.73	1	4	-0.84064	0.360983
Quality of life	6.64	1.87	0	10	-0.68332	-0.29087

Means and standard deviations are weighted

⁵ Socio-economic status was measured with the question "Please rate the economic standard of your household compared to the general conditions in Croatia" on a scale of 1 - considerably below average; to 5 - considerably above average

Table 2. Zero-order correlations

Variable	1	2	3	4	5	6	7	8
1. Institutional trust								
2. Social dominance orientation	.04 [-.02, .10]							
3. Authoritarianism	.17** [.11, .22]	.19** [.14, .25]						
4. Satisfaction with national actors	.60** [.56, .64]	-.04 [-.10, .02]	.14** [.08, .20]					
5. Shared identity	.35** [.30, .40]	.11** [.05, .17]	.13** [.07, .19]	.25** [.20, .31]				
6. Belief in conspiracy theories	-.21** [-.27, -.16]	.25** [.20, .31]	.20** [.15, .26]	-.22** [-.28, -.17]	-.01 [-.07, .05]			
7. Worry about coronavirus	.16** [.11, .22]	.04 [-.02, .10]	.13** [.07, .19]	.19** [.13, .25]	.05 [-.01, .11]	-.05 [-.11, .01]		
8. Adhering to measures	.21** [.15, .27]	-.16** [-.22, -.10]	-.03 [-.09, .03]	.31** [.26, .36]	.08** [.02, .14]	-.21** [-.27, -.15]	.41** [.35, .46]	
9. Quality of life	.18** [.13, .24]	-.06 [-.12, .00]	-.07* [-.13, -.01]	.11** [.05, .17]	.17** [.11, .22]	-.06 [-.11, .01]	.02 [-.04, .08]	.15** [.09, .21]

Values in square brackets indicate the 95% confidence interval for each correlation; * $p < .05$; ** $p < .01$.

Table 3. Results of hierarchical regression predicting institutional trust

Predictor	Step 1	Step 2	Step 3	Step 4
Age	0.16** [0.10, 0.22]	0.15** [0.09, 0.21]	0.07** [0.02, 0.12]	0.07** [0.02, 0.12]
Gender (0-male; 1-female)	0.02 [-0.04, 0.08]	0.02 [-0.04, 0.08]	0 [-0.05, 0.04]	0 [-0.04, 0.05]
Education (0-lowest; 2-highest)	0.03 [-0.04, 0.09]	0.05 [-0.01, 0.11]	0.02 [-0.03, 0.06]	0.01 [-0.04, 0.06]
SES	0.11** [0.04, 0.17]	0.11** [0.05, 0.18]	0.05* [0.00, 0.10]	0.02* [-0.03, 0.07]
SDO		0.03 [-0.03, 0.09]	0.06* [0.01, 0.11]	0.07* [0.02, 0.12]
Authoritarianism		0.17** [0.10, 0.23]	0.08** [0.03, 0.13]	0.09** [0.04, 0.14]
Worry about coronavirus			0.02 [-0.03, 0.07]	0.02 [-0.03, 0.07]
Adhering to measures			-0.01 [-0.06, 0.04]	-0.02 [-0.08, 0.03]
Belief in conspiracy theories			-0.12** [-0.17, -0.07]	-0.13** [-0.18, -0.08]
Satisfaction with national actors			0.51** [0.46, 0.56]	0.51** [0.46, 0.56]
Shared identity			0.19** [0.15, 0.24]	0.18** [0.13, 0.23]
Quality of life				0.10** [0.05, 0.15]
R ²	0.033**	0.062**	0.439**	0.448**
ΔR ²	/	0.029**	0.377**	0.009**

Results in the table are beta coefficients with 95% confidence intervals; * p < .05; ** p < .01.