

Contours of Compliance: Unravelling Factors Shaping Public Health Policy Preferences in the COVID-19 Era

JURIJS NIKIŠINS

Faculty of Economics and Social Sciences, University of Latvia, Lauvas iela 4, 1003 Rīga, Latvia
Email: jurijs.nikisins@lu.lv

The COVID-19 pandemic has highlighted the critical role of public attitudes in shaping policy responses to crises. Political trust, conspiracy beliefs, support for democracy, and acceptance of authoritarian rule are key factors influencing public preferences for policy trade-offs, such as prioritising public health versus economic activity, public monitoring versus privacy, and compliance with government regulations versus individual autonomy. This study aims to examine how these factors shape Europeans' policy priorities during the pandemic and how variations in political trust at the national level influence these preferences. Using data from the European Social Survey Round 10 (2020–2022), which includes responses from 29 countries, multilevel regression analysis is employed to explore individual and country-level dynamics. The results indicate that higher political trust is associated with greater compliance with government measures, while conspiracy beliefs and authoritarian inclinations correlate with resistance to restrictions. Support for democracy shows limited influence on policy preferences. The findings underscore the importance of political trust in fostering public cooperation during crises and highlight the challenges posed by conspiracy beliefs and authoritarian support. The study contributes to understanding the interplay of trust, governance, and public attitudes, offering insights for designing efficient and publicly acceptable crisis policies.

Keywords: authoritarianism, conspiracy beliefs, COVID-19 pandemic, democracy, European Social Survey, political trust, policy preferences

INTRODUCTION

Public policy can be broadly defined as the behaviour of an actor, such as a government agency, within a specific area of activity, reflecting what governments choose to do or not to do, and involving the allocation of resources to address public problems (Anyebe 2018: 2). Alternatively, it can be understood as the process of translating policy ideas into actual policies that are implemented and evaluated (Birkland 2011: 25).

Policy preferences of the public are crucial for understanding how populations across different countries perceive and prioritise various policy issues (Dieckmann et al. 2021; Trautendorfer et al. 2023; Weible et al. 2020). Within the context of the recent COVID-19 pandemic,

research has focused on cross-country variations in public policy responses, addressing trade-offs such as those between public health and economic activity (Balmford et al. 2020; Klumpp et al. 2022; Nguyen et al. 2024), privacy versus monitoring (Chen, Assefa 2021), and compliance with government-imposed regulations versus individual autonomy in decision-making (Béland et al. 2022; Lim et al. 2023; Nguyen et al. 2024). It was found that even similar policies can lead to varying outcomes (Lim et al. 2023). Other research, such as that by Unruh et al. (2021), highlighted substantial differences in governance, public compliance, and the balance between public health and economic priorities.

The focus of this study is on public attitudes – specifically, support for or opposition to certain policy measures enacted in response to the pandemic. This highlights the need to examine policy preferences from a sociological perspective, particularly through the lens of value orientations. According to the seminal theory of basic human values developed by Shalom Schwartz and his colleagues, values possess six key characteristics. First, they are beliefs, becoming emotionally charged when activated. Second, values are linked to desirable goals that motivate behaviour, such as the pursuit of social order or justice. Third, values transcend specific situations and actions, applying broadly across different contexts. Fourth, they serve as standards or criteria for evaluating actions, policies and events. Fifth, values are ordered by their relative importance, forming a hierarchy that characterises individuals. This hierarchy determines whether one prioritises, e.g. achievement over justice, or novelty over tradition. Finally, the relative importance of values influences behaviour, as actions often reflect a trade-off among competing values (Schwartz 1992; 1996; 2006; 2012).

Although policy preferences are more specific and do not align perfectly with Schwartz's definition of values, they have some characteristics in common. Like values, policy preferences involve beliefs about desirable outcomes or courses of action and underpin specific decisions or behaviours by individuals or authorities, such as staying at home to minimise the risk of infection or imposing travel restrictions. Importantly, these preferences can embody differing, and even opposing, views on the best course of action to achieve a particular outcome, which can lead to polarisation.

While there have been studies addressing public policy preferences during crises such as the COVID-19 pandemic, there remains a lack of research that places them at the centre of sociological inquiry. Also, there is limited exploration of their hypothetical factors and correlates, such as levels of political trust, belief in conspiracy theories, commitment to democracy, and acceptance of authoritarian rule. These gaps can be addressed by analysing data from robust, methodologically sound cross-national social research, such as the European Social Survey (ESS) Round 10. This round specifically focused on Europeans' perceptions of the pandemic, of the policy priorities adopted by governments, and the impact of the aforementioned factors and correlates.

This study aims to provide insights into the diverse public policy preferences across European populations and trade-off decisions they make, contributing to a deeper understanding of these preferences and informing more efficient and responsive policymaking.

THEORETICAL BACKGROUND

The potential key correlates of policy preferences explored in this study include political trust, conspiracy beliefs, support for democracy, and acceptance of authoritarian rule. Their examination is warranted by their role in shaping public attitudes towards government actions and policy decisions, especially in the context of crises. Political trust can be assumed

to influence the extent to which individuals view government policies as legitimate and effective, while conspiracy beliefs can undermine trust in institutions and foster scepticism towards official narratives. Support for democracy reflects a commitment to participatory governance and civil liberties, whereas the acceptance of authoritarian rule highlights a preference for strong, ruthless authority, justified by perceived threats or emergencies. Together, they offer a framework for understanding the diverse and sometimes conflicting drivers of policy preferences.

Trust is a foundational concept in social sciences. Simmel (1950 [1906]: 318) emphasised its role as a societal force, essential for cohesion, noting that 'without the general trust that people have in each other, society itself would disintegrate'. Rotter (1971: 444) describes it as an 'expectancy' that others' statements can be relied upon. In turn, political trust refers to 'confidence that authorities will observe the rules and serve the general interest' (Citrin, Muste 1999: 465), while Hetherington (2005: 9) describes it as the perception that government outcomes meet public expectations. Political trust is crucial for supporting leaders' decisions, especially during crises like the COVID-19 pandemic, as it indicates the perceived safety and effectiveness of these decisions (Weinberg 2022).

Political trust is contingent upon the assessment of political institutions' performance (Mishler, Rose 2001) which encompasses not only the quality of political decisions but also the perceived integrity and conduct of politicians and institutions. The stability and legitimacy of political regimes rely heavily on trust in state institutions (Kołczyńska 2021). Scepticism towards political institutions endangers the vitality of democratic systems (Mari et al. 2021). As noted by Torcal and Christmann (2021), economic prosperity and effective governance are important factors for fostering trust among citizens, although they alone may not guarantee a trusting population.

The onset of the COVID-19 pandemic has sparked renewed interest in the dynamics of political trust, particularly during times of crisis. In the recent years, scholars studied the association between political trust and public adherence to measures aimed at mitigating the pandemic, focusing on three main subtopics: 1) support for or opposition to COVID-19 preventive measures; 2) vaccine acceptance and support for vaccine mandates; 3) conspiracy beliefs and their interplay with trust and compliance.

Lack of trust in authorities leads to less support for, or even opposition towards policies, involving risk or sacrifice (Weinberg 2022). Political trust can serve as a heuristic, guiding individuals in deciding whether to endorse or condemn a policy, and this is why political trust assumes greater significance during crises, where noncompliance with rules may have life-threatening consequences (Weinberg 2022). Indeed, Charron et al. (2023) found that countries with higher social and political trust managed the pandemic more effectively, while regions with lower trust saw increased excess mortality. A related finding is that individuals who trust political leaders are more likely to accept government-imposed pandemic measures, even if they infringe on personal freedoms. This effect varied by political leanings, with political trust having a stronger impact on liberals than on more authoritarian individuals (Jäckle et al. 2022).

Several studies have explored the paradox of stable or even rising levels of political trust during the worsening phases of the pandemic. It is attributed to public concern or fear of the consequences of ignoring government advice or restrictions. Lalot et al. (2022) found that both concern and political trust significantly influenced compliance with restrictions, particularly when combined. On the contrary, low levels of both trust and concern led to 'distrustful

complacency' (Lalot et al. 2022: 109), where individuals were less willing to comply. However, trust is not always directly linked to compliance. Newton (2020) observed that, despite declining trust in the UK government, the public largely adhered to pandemic rules, relying instead on credible information from mainstream media and non-governmental experts. Similarly, Vasilopoulos et al. (2022) showed that the fear of COVID-19 increased the acceptance of civil liberty restrictions, even among those who distrusted the government.

A prevailing climate of scepticism toward political institutions poses a threat to the vitality of democratic systems (Mari et al. 2021), often manifesting in the form of conspiracy beliefs. Conspiracy beliefs (CBs) can be defined as '*the tendency to explain prominent political and societal events <...> as due to a malevolent plot by hidden, powerful agents aimed at some goal through systematic deception*' (Mari et al. 2021: 279). Exploring the link between (dis)trust and CBs, Mari et al. observe that conspiracy beliefs erode trust in key institutions like government and security systems. Similarly, Mancosu et al. (2021) revealed negative links between institutional trust and conspiracism during the pandemic, with higher pandemic stress intensifying these associations. They concluded that conspiracism may serve as a coping mechanism and the time of disorientation caused by crisis for those with a low interpersonal trust. Cadeddu (2023) also linked vaccine hesitancy to conspiracy beliefs and distrust of the scientific community. A study by Regazzi et al. (2023) revealed that a higher likelihood of subscribing to conspiracy theories was linked to male gender, middle age, lower education levels, unemployment, diminished trust and satisfaction levels, and right-wing political orientation. Eastern European countries exhibited higher levels of conspiracy beliefs than Western Europe. Individuals endorsing conspiracy beliefs demonstrated a lower COVID-19 vaccine uptake, a decreased satisfaction with healthcare system responses to the pandemic, and a diminished support for governmental restrictions (Regazzi et al. 2023).

The interplay between democratic and authoritarian sentiments represents another set of potentially significant factors. Democracy, originating from the Greek terms *demos* (people) and *kratos* (power), is understood as a political system rooted in the principle of rule by the people, requiring public participation in decision-making and the selection of leaders (cf. Parry et al. 1992: 3). Apart from the procedural aspects of voting and governance, it also embodies the collective aspirations of individuals for self-determination, dignity and freedom. Authoritarianism, as the system opposite to democracy, is typified by the rejection of conflict and plurality as normal aspects of politics, a strong central power's effort to preserve the status quo and suppress change, and the erosion of fundamental democratic principles such as the rule of law, the separation of powers, and fair voting procedures (Cerutti 2017: 17).

Research has associated democracies with positive outcomes, such as stronger protection of human rights (De Mesquita et al. 2005), more effective governance (Gisselquist 2012), and higher levels of human development (Gerring et al. 2012; Liotti et al. 2018). Nevertheless, the mere presence of democratic institutions does not automatically ensure these benefits. Their effectiveness and legitimacy, as perceived by the public, are equally crucial (Thomassen 2007), hence the importance of taking support for democracy into account.

As Inglehart and Welzel (2005: 270) observe, the contemporary world is no longer divided between those who support and those who oppose democracy, as the vast majority now favours it. The distinction lies in whether this support is instrumental or intrinsic. Instrumental support arises when individuals associate democracy with material benefits, such as economic prosperity, while intrinsic support reflects a genuine appreciation for democracy's civil and political liberties as ends in themselves (Inglehart, Welzel 2005: 119). Democracy enjoys

widespread global endorsement, transcending cultural and political differences, and demonstrating its universal appeal (Inglehart, Welzel 2005: 264). However, instrumental support, particularly in newly democratised countries, can render democracy vulnerable if transitions fail to meet public expectations (Inglehart, Welzel 2005: 119). As the most recent World Values Survey and European Values Study indicate, approximately 40% of respondents globally simultaneously support both democracy and a 'strong leader,' suggesting that these preferences are not mutually exclusive (EVS/WVS, 2022; author's calculations from the dataset). This finding implies that support for democracy is often conditional and can coexist with openness to authoritarianism, highlighting a potentially fragile commitment to democratic principles. Large-scale societal crises, such as the pandemic, often challenge and test the resilience of democratic support.

RESEARCH QUESTIONS, DATA AND METHOD

Building on the theoretical framework reviewed above, this study investigates the role of political trust, conspiracy beliefs, democratic commitment, and authoritarian inclinations in shaping public responses to critical policy trade-offs during the COVID-19 pandemic, bridging theoretical insights with empirical evidence to address the proposed research questions:

RQ1: How do political trust, agreement with conspiracy beliefs, commitment to democracy, and the acceptance of authoritarian rule influence Europeans' policy priorities during the COVID-19 pandemic? *Specifically*, how do they shape responses to trade-offs between a) public health and economic activity, b) public monitoring versus privacy preservation, and c) adherence to government regulations versus individual decision-making autonomy?

RQ2: How does the variation of political trust at the national level impact the influence of each factor on decision-making involving these trade-offs?

To address the research questions, I use data from the European Social Survey Round 10, collected from 2020 to 2022 in 31 countries (ESS 2020). This dataset represents the most recent compilation available, comprising responses from more than 58,000 individuals selected through nationally representative sampling methods. The questions on conspiracy beliefs were omitted in France and Montenegro, leaving 29 countries out of 31 in the analysis. Data collection involved in-person interviews conducted at respondents' residences, with self-completion fieldwork permitted in nine countries due to recurrent outbreaks of the pandemic. Given the extensive cross-national dataset, a multilevel approach is employed for analysis.

The trade-offs outlined in RQ1 are captured by the following ESS Round 10 questionnaire items measured on an 11-point quasi-interval scale from 0 (much more important to prioritise public health, public monitoring, and adherence to government regulations, respectively) to 10 (much more important to prioritise economic activity, preservation of privacy, and individual autonomy):

- *Is it more important to prioritise public health or economic activity when fighting a pandemic?*
- *Is it more important for governments to monitor and track the public or to maintain public privacy when fighting a pandemic?*
- *Is it more important for you personally to follow government rules or to make your own decisions when fighting a pandemic?*

These trade-off variables are regressed on political trust, conspiracy beliefs, commitment to democracy, and the acceptance of authoritarian rule. Political trust is assessed using a composite index, calculated as the mean of three items measured on an 11-point quasi-interval scale ranging from 0, indicating no trust at all, to 10, representing complete trust in

the national parliament, politicians, and political parties (Cronbach alpha = 0.90 as calculated from the dataset). This operationalisation of political trust is commonly employed in studies of political trust using ESS data (e.g. Reher 2020; Vilhelmsdóttir 2020).

The ESS Round 10 questionnaire includes three items rated on a 5-point scale, ranging from 'Agree strongly' to 'Disagree strongly,' aimed at evaluating agreement with conspiracy beliefs in line with the definition proposed by Mari et al. (2021). These items are the following: *A small secret group of people is responsible for making all major decisions in world politics; Groups of scientists manipulate, fabricate, or suppress evidence in order to deceive the public; Coronavirus is the result of deliberate and concealed efforts of some government or organisation.* From these three items, a corresponding index is derived (Cronbach's alpha = 0.79) measuring the inclination to support conspiracy beliefs.

Commitment to democracy is captured by a single item, *'How important is it for you to live in a country that is governed democratically?'* ranging from 0 (not at all important) to 10 (extremely important). The readiness to support authoritarian rule is operationalised by the question: *'How acceptable for you would it be for [country] to have a strong leader who is above the law?'* ranging from 0 (not at all acceptable) to 10 (completely acceptable) which captures the definition of authoritarianism as proposed by Cerutti (2017).

I include respondents' gender, age, education, and their subjective perception of household income as control variables. Gender is a binary variable (male = 0, female = 1). Age is recorded in full years as reported by respondents. Education is coded as 0/1 to indicate the absence or presence of higher (tertiary) education. The perception of household income is captured using a four-point scale with the response options: *Living comfortably on present income; Coping on present income; Finding it difficult on present income; and Finding it very difficult on present income.* The original subjective income variable is recoded so that higher values correspond to more positive perceptions of income.

Data were weighted using the ESS *anweight* variable which accounts for varying selection probabilities within each country based on the sample design, adjustments for nonresponse, noncoverage, and sampling error. It also incorporates differences in population size across countries. Its construction involves calculating the design weight, followed by a post-stratification adjustment, and finally, an adjustment for population size (Kaminska 2020).

To address the research questions, multilevel linear regression is applied to account for the hierarchical structure of the dataset, with individuals nested within countries. This approach enables the analysis of both individual and country-level factors influencing policy choices. By using a random-coefficient model, political trust is allowed to vary both within and between countries, capturing its individual-level effects while accounting for cross-national differences (cf. Charron et al. 2023). The inclusion of fixed and random effects ensures a comprehensive understanding of how political trust operates across diverse contexts.

RESULTS

Table 1 illustrates a cross-country comparison of the outcome variables, depicting the public's preferences regarding health versus economic activity, monitoring and tracking versus preserving autonomy and privacy, and adherence to government-imposed rules versus autonomy in decision-making.

All in all, countries exhibit a moderate preference for public health over economic activity, with a mean score of 3.59 on a scale of 0 to 10. Notably, countries like Israel ($M = 4.50$) and Italy ($M = 4.00$) exhibit higher average scores, indicating a somewhat weaker prioritisation of

Table 1. Public's policy preferences across countries

	Public health (0) vs economic activity (10)			Monitor public (0) vs public privacy (10)			Follow rules (0) vs own decisions (10)		
Country (abbreviation)	<i>M</i>	<i>Stdev</i>	<i>N</i>	<i>M</i>	<i>Stdev</i>	<i>N</i>	<i>M</i>	<i>Stdev</i>	<i>N</i>
Austria (AT)	3.16	2.35	1.987	6.14	3.04	1.992	4.23	3.16	1.995
Belgium (BE)	3.91	2.25	1.338	6.47	2.47	1.333	4.14	2.78	1.335
Bulgaria (BG)	3.84	2.56	2.662	6.20	2.65	2.647	5.04	2.76	2.660
Switzerland (CH)	3.83	2.15	1.504	6.76	2.43	1.499	4.35	2.70	1.504
Cyprus (CY)	3.39	2.71	863	3.97	3.22	863	3.25	3.11	869
Czechia (CZ)	4.05	2.48	2.392	7.00	2.48	2.419	5.75	2.81	2.437
Germany (DE)	3.27	2.39	8.594	5.17	3.07	8.588	3.80	3.01	8.587
Estonia (EE)	3.88	2.29	1.534	6.48	2.58	1.529	4.50	2.91	1.539
Spain (ES)	3.28	2.70	2.263	4.26	3.55	2.257	3.12	3.07	2.266
Finland (FI)	3.64	2.32	1.561	6.23	2.77	1.557	3.50	2.68	1.564
United Kingdom (GB)	3.81	2.62	1.134	5.64	2.70	1.128	3.80	3.06	1.140
Greece (GR)	3.28	2.26	2.765	5.60	2.61	2.712	5.07	2.29	2.772
Croatia (HR)	3.71	2.73	1.558	7.50	2.67	1.560	5.08	3.19	1.559
Hungary (HU)	3.82	2.14	1.817	6.53	2.34	1.784	5.40	2.44	1.811
Ireland (IE)	3.76	2.61	1.740	5.86	2.72	1.721	4.46	2.76	1.732
Israel (IL)	4.50	3.01	1.291	5.37	3.28	1.289	4.26	3.25	1.297
Iceland (IS)	2.90	2.25	894	5.69	3.14	884	2.67	2.62	895
Italy (IT)	4.00	2.44	2.583	4.83	2.74	2.530	3.85	2.49	2.589
Lithuania (LT)	3.99	2.61	1.596	5.89	2.76	1.550	5.36	2.96	1.624
Latvia (LV)	4.14	2.83	1.009	5.43	3.24	1.009	4.87	3.52	1.013
North Macedonia (MK)	3.58	2.83	1.410	6.35	3.00	1.370	4.30	3.08	1.405
Netherlands (NL)	4.08	2.07	1.456	6.29	2.31	1.458	4.13	2.53	1.459
Norway (NO)	3.52	2.19	1.409	6.34	2.59	1.403	2.67	2.38	1.410
Poland (PL)	3.69	2.91	2.007	5.91	3.46	2.035	4.42	3.54	2.040
Portugal (PT)	3.01	2.38	1.821	5.54	2.91	1.772	3.11	2.69	1.815
Serbia (RS)	3.48	3.11	1.462	6.09	3.72	1.477	4.34	3.90	1.491
Sweden (SE)	3.23	2.45	2.252	3.84	3.04	2.260	3.01	2.80	2.270
Slovenia (SI)	3.26	2.55	1.229	5.76	2.92	1.198	5.30	3.14	1.235
Slovakia (SK)	3.49	2.58	1.399	5.92	2.71	1.369	4.77	2.74	1.386
TOTAL	3.59	2.52	55.530	5.73	3.01	55.193	4.22	3.02	55.699

Source: ESS Round 10 data; author's own calculations.

M = average; *Stdev* = standard deviation; *N* = number of respondents in the respective country.

public health, while countries like Iceland ($M = 2.90$) and Spain ($M = 3.28$) show comparatively lower scores closer to 0, meaning that public health is clearly seen as a priority.

The data comparing public support for monitoring and tracking versus preserving autonomy and privacy show more variation. The average preference leans slightly towards preserving public privacy over monitoring and tracking, with a mean score of 5.73. For instance, countries like Croatia ($M = 7.50$) and the Czech Republic ($M = 7.00$) exhibit higher average scores, indicating a strong choice for preserving privacy and autonomy, whereas countries like Cyprus ($M = 3.97$) and Spain ($M = 4.26$) have lower average scores, suggesting a stronger inclination towards monitoring and tracking the public to ensure its compliance with the pandemic-related restrictions.

Cross-country variation is observable when exploring the compliance with regulations vs decision-making autonomy. On average, countries exhibit a moderate preference for following government-imposed rules over making one's own decisions, with a mean score of 4.22 out of 10. Countries like Croatia ($M = 5.08$) and Lithuania ($M = 5.36$) demonstrate higher average scores, suggesting a greater willingness to make autonomous decisions, while countries like Norway ($M = 2.67$) and Iceland ($M = 2.67$) show lower average scores, indicating a stronger preference for compliance.

I now transition to multilevel linear regressions using the mixed command in Stata 16 software (Stata Corp, 2019) to analyse three outcome variables. The primary predictors include the political trust index, agreement with conspiracy beliefs, the importance of democratic governance, and the acceptability of authoritarian leadership. All four factors are group mean centred, allowing variations to be measured by differences from the mean within each country, rather than from a grand mean of all countries pooled together. Gender, age, age squared, dichotomous education, and the subjective perception of household income are included as outcome variables. Political trust is allowed to vary at the country level.

The outcomes of the initial set of choices, where prioritisation between public health and economic activity is the focus, are presented in Table 2 (fixed effects) and Table 3 (random effects). At first glance, all four factors of interest are statistically significant, but the magnitude and direction of the coefficients varies, warranting a more careful examination.

Table 2. Multilevel linear regression: public health vs economic activity (fixed part)

Priority: health (0) or economy (10)	Coef.	Std. error	P-value	95% CI	
				Low	High
Political Trust Index	0.03	0.01	0.01	0.01	0.05
Conspiracy Beliefs Index	0.30	0.03	0.00	0.25	0.36
Important to live in democracy	-0.05	0.01	0.00	-0.08	-0.02
Acceptability of authoritarian leader	0.04	0.01	0.00	0.03	0.06
Gender: female	-0.28	0.05	0.00	-0.39	-0.18
Age	-0.01	0.01	0.24	-0.02	0.00
Age squared	0.00	0.00	0.85	0.00	0.00
Higher education: yes	0.11	0.05	0.02	0.02	0.21
Very difficult on present income	(reference category)				

Table 2. (Continued)

Priority: health (0) or economy (10)	Coef.	Std. error	P-value	95% CI	
				Low	High
Difficult on present income	-0.12	0.15	0.42	-0.41	0.17
Coping on present income	0.05	0.17	0.76	-0.29	0.39
Living comfortably on present income	0.25	0.19	0.19	-0.12	0.62
Constant	3.70	0.18	0.00	3.34	4.05
N	46,596				
Countries	29				
Wald chi-square (sig.)	422.49 (0.00)				

Table 3. Multilevel linear regression: public health vs economic activity (random part)

Random-effects parameters (country)	Estimate	Std. Err.	95% CI	
			Low	High
Std. dev., political trust	0.04	0.01	0.03	0.06
Std. dev., constant	0.25	0.05	0.17	0.36
Correlation (political trust, constant)	0.39	0.21	-0.08	0.72
Std. dev., residual	2.45	0.05	2.35	2.55

Political trust appears to have a positive, albeit small, impact on the decision between prioritising public health and economic activity, with a preference leaning more towards the latter. A stronger endorsement of conspiracy beliefs correlates with a tendency to prioritise economic security over public health concerns. The significance of living in a democratically governed country is reflected in its negative association with the outcome variables, indicating a preference for prioritising public health over economic activity. However, its effect size is nearly as minimal as that of political trust. Authoritarian inclinations exhibit a weak but significant effect, leading to a preference for economic activity over public health. Interestingly, higher education suggests a preference for economic activity, while being female predicts greater support for prioritising public health. Perceived income status does not emerge as a significant predictor in this analysis.

From the random part, the variation of the regression slopes for political trust across countries is minimal (0.04), yet statistically significant. The correlation between the slope and the intercept is moderately strong (0.39), suggesting that countries with higher preference for economic activity over public health, with an average level of political trust, experience a larger increase in the outcome variable for each unit of trust. To verify and visualise this relationship, it is worth turning to Fig. 1 below.

Twelve countries in the lower left quadrant (LLQ) have below average outcome variable values (i.e. more supportive of prioritising public health) for respondents with the mean level of political trust but the coefficients are smaller than the average, meaning smaller effects for the impact of political trust on the choice in question. Apart from Serbia (RS), these are predominantly countries with advanced economies and a high standard of living, where economic

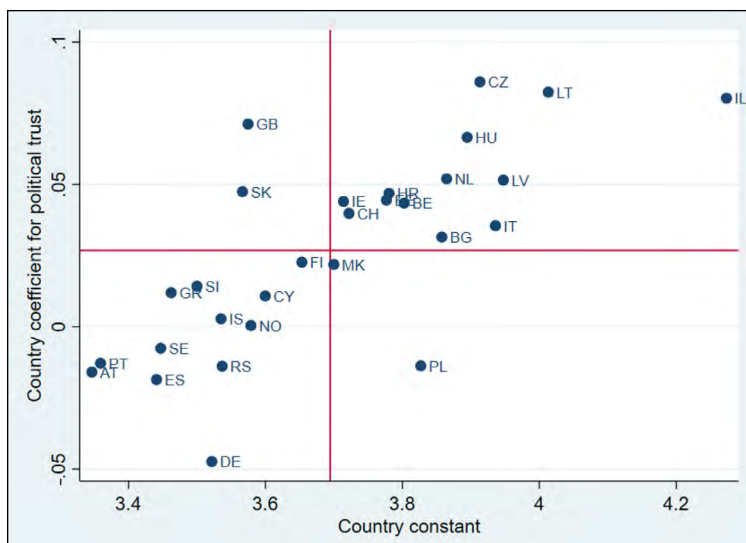


Fig. 1. Country-level effects of political trust on the choice between public health vs economic activity (random part)

concerns are less pressing for citizens compared to health, which is perceived as being threatened by the new pandemic. The UK (marked as GB for Great Britain) and Slovakia are the only two countries in the upper left quadrant (ULQ) where support for prioritising public health is associated with higher levels of political trust in line with Newton's (2020) observations. North Macedonia and Poland find themselves in the lower right quadrant (LRQ); smaller values of political trust are related to prioritising economic activity. As these two countries are not among the most affluent in Europe, it is unsurprising that many of their citizens prioritise economic security over health. Finally, in the thirteen countries in the upper right quadrant (URQ) higher levels of political trust correlate with a preference for economic activity as a priority. The overall pattern is a positive association between political trust and preference for unrestricted economic activity over preserving public health at all costs. The variation in political trust and economic development among the countries in the URQ may indicate a broader trend, suggesting that trust facilitates support for policies that reconcile economic and health priorities. In richer nations, this may arise from confidence in economic resilience, whereas in less affluent countries, it may indicate an urgent need for economic security.

The second choice is between monitoring and tracking the public and maintaining public privacy when fighting a pandemic. Like the previous outcome, the results are depicted in two tables, one for the fixed part of the regression (Table 4) and another one for the random part (Table 5). A cursory glance reveals that factors are emerging whose influence on the previous outcome was not as significant.

Political trust is associated with support for monitoring and tracking the public (-0.07), suggesting that trust acts as a proxy variable for people's readiness to grin and bear it when it comes to restrictions aimed at deterring the pandemic (cf. Jäckle et al. 2022; Kestilä-Kekkonen et al. 2022). Conspiracy beliefs (0.41) are linked to prioritising public privacy, manifesting

Table 4. Multilevel linear regression: monitoring the public vs preserving privacy (fixed part)

Priority: monitoring (0) or privacy (10)	Coef.	Std. error	P-value	95% CI	
				Low	High
Political Trust Index	-0.07	0.02	0.00	-0.11	-0.04
Conspiracy Beliefs Index	0.41	0.05	0.00	0.31	0.51
Important to live in democracy	0.00	0.03	0.88	-0.06	0.05
Acceptability of authoritarian leader	-0.02	0.01	0.03	-0.04	0.00
Gender: female	-0.10	0.04	0.01	-0.17	-0.03
Age	-0.02	0.01	0.01	-0.04	-0.01
Age squared	0.00	0.00	0.60	0.00	0.00
Higher education: yes	-0.09	0.06	0.15	-0.22	0.03
Very difficult on present income	(reference category)				
Difficult on present income	-0.31	0.16	0.06	-0.63	0.02
Coping on present income	-0.33	0.15	0.03	-0.62	-0.03
Living comfortably on present income	-0.47	0.15	0.00	-0.76	-0.18
Constant	6.21	0.18	0.00	5.86	6.57
N	46,521				
Countries	29				
Wald chi-square (sig.)	1083.16 (0.00)				

Table 5. Multilevel linear regression: monitoring the public vs preserving privacy (random part)

Random-effects parameters (country)	Estimate	Std. Err.	95% CI	
			Low	High
Std. dev., political trust	0.09	0.02	0.06	0.13
Std. dev., constant	0.90	0.13	0.68	1.18
Correlation (political trust, constant)	-0.49	0.10	-0.66	-0.27
Std. dev., residual	2.86	0.11	2.65	3.08

the opposition to infringement on the rights and freedoms of citizens. The importance of living in a democratically governed country does not exert any influence at all (zero regression coefficient). The acceptance of authoritarian rule manifests a tiny, although significant, association with support for monitoring and tracking the public (-0.02). Females (-0.10) and older people (-0.02) also show more understanding and acceptance for monitoring, while the effect of higher education is non-significant. Prioritising control also rises as the subjective perception of one's household income becomes rosier.

In the random part, the SD for political trust (0.09) suggests that there is variability of regression slopes across countries, and the SD for constant (0.90) indicates that the baseline

level of the outcome varies considerably across countries, as seen from Table 1. The correlation between the two previous parameters is -0.49 and is to be explored in more detail with the aid of visualisation.

In Fig. 2, most countries are situated within the upper left quadrant (ULQ) and lower right quadrant (LRQ), suggesting that if a regression line were drawn through them, it would demonstrate a negative association. Within the ULQ, citizens tend to prioritise monitoring and tracking the public over maintaining personal privacy, with the effect of political trust being more pronounced in these ten nations. Within the LRQ, another ten countries demonstrate preference for personal privacy over monitoring and tracking the population, associated with lower trust. The pattern illustrated by the negative regression coefficient for political trust in the fixed part of the multilevel model holds true for most countries (20 out of 29). In nations with higher political trust, citizens are more likely to perceive monitoring and tracking measures as legitimate for ensuring public safety during the pandemic. This confidence alleviates fears of data misuse, fostering greater acceptance of monitoring over privacy. In countries with lower political trust, scepticism about government intentions is more prevalent, with concerns that such measures could result in power abuse or a lasting erosion of civil liberties. The pandemic amplified the need for government intervention in public health crises, but while high-trust populations were inclined to view monitoring as essential for controlling the virus, low-trust populations were more resistant, driven by worries about potential overreach.

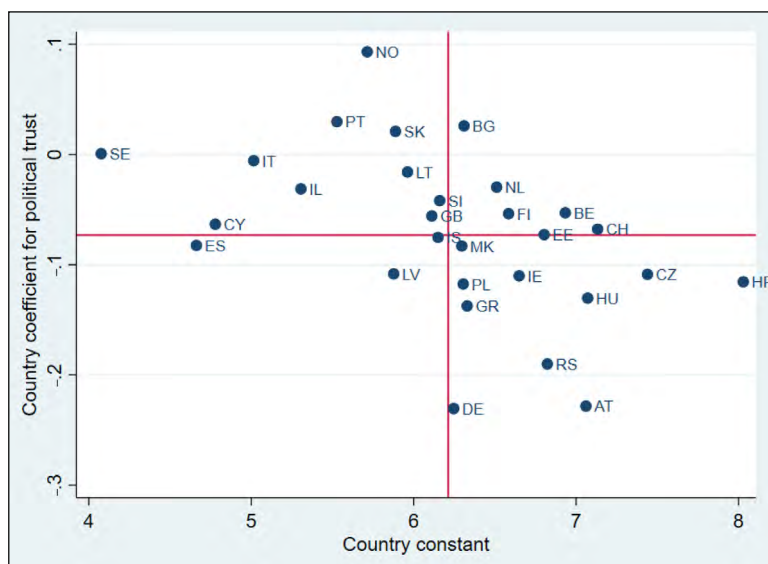


Fig. 2. Country-level effects of political trust on the choice between monitoring vs privacy (random part)

The third outcome variable represents the choice between following government rules or making one's own decisions when fighting a pandemic. While the previous two dependent

variables asked about prioritising one of the two choices in general, the ultimate one pertains to personal preferences of respondents. The regression results utilising the same set of factors are shown in Tables 6 and 7.

Table 6. Multilevel linear regression: following rules vs own decisions (fixed part)

Priority: following rules (0) or own decisions (10)	Coef.	Std. error	P-value	95% CI	
				Low	High
Political Trust Index	-0.19	0.02	0.00	-0.23	-0.14
Conspiracy Beliefs Index	0.55	0.04	0.00	0.48	0.63
Important to live in democracy	-0.09	0.02	0.00	-0.13	-0.05
Acceptability of authoritarian leader	0.04	0.01	0.00	0.02	0.06
Gender: female	-0.11	0.06	0.08	-0.22	0.01
Age	0.00	0.01	0.54	-0.01	0.02
Age squared	0.00	0.00	0.06	0.00	0.00
Higher education: yes	0.08	0.07	0.31	-0.07	0.22
Very difficult on present income	(reference category)				
Difficult on present income	0.18	0.13	0.17	-0.08	0.43
Coping on present income	-0.05	0.10	0.64	-0.24	0.15
Living comfortably on present income	-0.06	0.11	0.57	-0.27	0.15
Constant	4.28	0.20	0.00	3.89	4.68
N	46,733				
Countries	29				
Wald chi-square (sig.)	920.01 (0.00)				

Table 7. Multilevel linear regression: following rules vs own decisions (random part)

Random-effects parameters (country)	Estimate	Std. Err.	95% CI	
			Low	High
Std. dev., political trust	0.10	0.02	0.06	0.14
Std. dev., constant	0.92	0.10	0.75	1.14
Correlation (political trust, constant)	-0.44	0.14	-0.67	-0.14
Std. dev., residual	2.78	0.08	2.63	2.94

The negative coefficient (-0.19) for political trust in the fixed part of the model (Table 7) means that as trust increases, people tend to choose compliance with government-imposed rules aimed at suppressing the pandemic. The same applies to the importance of democratic governance (-0.09). The endorsement of conspiracy beliefs (0.55) and, to a much lesser extent, of authoritarian rule (0.04) are associated with prioritising one's own decisions when fighting the pandemic. All four factors of interest are significant, while none of the control

variables (gender, age higher education, or subjective income) reach the conventional 0.05 level of statistical significance.

The slopes for political trust vary somewhat across countries (0.10), but even more so the baseline level of the choices that are made by the public (0.92). The correlation between the two is negative (-0.44), suggesting that its graphical representation and the implied conclusions could be close to those from the analysis of preferences for monitoring vs privacy. This, however, is still to be verified (see Fig. 3).

Overall, the situation reflects the same trends as those identified in the analysis of the public's attitudes towards choosing between monitoring and privacy. In the upper left quadrant, nations as different as Israel, Norway and Portugal show a larger support for compliance with government's rules for respondents with average political trust. A comparably large (and diverse) set of countries land in the lower right quadrant preferring autonomy but with smaller coefficients for the impact of political trust (notably Austria and Serbia; except for Austria, Greece, Ireland and Switzerland, most nations in the LRQ experienced authoritarian socialism that endured collapse in the late 1980s). Recapitulating the findings for the third and last outcome variable, it can be reaffirmed that political trust is positively correlated to compliance with the government rules while lower levels of trust are associated with resisting what is seen as illegitimate pressure and infringement of one's freedom by authorities. The observed picture can be explained by a combination of historical, institutional and cultural factors. Countries with a legacy of authoritarian socialism, such as Serbia and Bulgaria, often exhibit scepticism toward government authority, leading citizens to prioritise personal autonomy over compliance. In contrast, higher-trust nations like Norway and Sweden foster compliance by promoting perceptions of government legitimacy and collective responsibility. Economic and institutional stability also play a role, as stronger institutions and stable economies are assumed to build trust and encourage adherence to government rules.

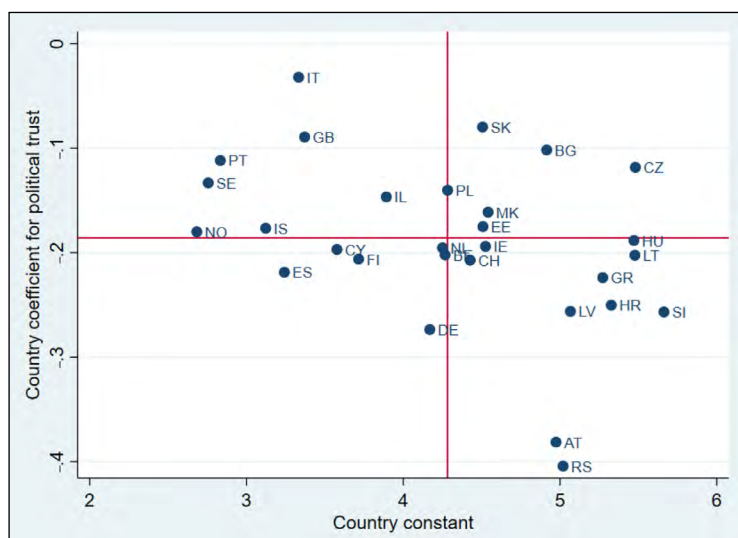


Fig. 3. Country-level effects of political trust on the choice between following rules vs making one's own decisions (random part)

DISCUSSION

This study corroborates prior research on the role of political trust in shaping policy preferences during the COVID-19 pandemic. In most countries, higher levels of political trust were associated with a greater acceptance of monitoring and tracking measures, as well as a preference for compliance with government-imposed rules over making autonomous decisions. These findings align with the observations of Lalot et al. (2022) and Kestilä-Kekkonen et al. (2022), who noted that trust fosters adherence to restrictive policies. Conversely, low levels of trust were linked to a diminished support or even an active opposition to such policies, particularly when they involved significant sacrifices of personal freedoms (Weinberg 2022).

The inclusion of the authoritarian leader variable provided further insights, echoing Jäckle et al.'s (2022) conclusion that authoritarian sentiments weaken the influence of political trust on the acceptance of restrictions. Interestingly, the importance of democratic governance did not emerge as a significant predictor of public choices, suggesting that democratic ideals may play a limited role in shaping preferences during crises.

A promising line for investigation is represented by the positive link between stronger conspiracy beliefs and the preference for personal decision-making – and, even more so, by the positive association between personal decision-making and the acceptance of authoritarian rule. This raises an important question for future research: how can support for personal freedom coexist with authoritarian inclinations, particularly in contexts of crisis and uncertainty? One possible explanation is that support for authoritarian leadership may reflect distrust in democratic governance and populist sentiments, which often rely on charismatic and centralised leadership despite their anti-elitist rhetoric (Akkerman et al. 2014).

No study is without its limitations, that, on the other hand, open venues for future research. Exploring how the perceived effectiveness of health-care services during the pandemic influence decision-making in health crises is a promising area for coming studies. They might gain an additional value from incorporating country level statistics on health expenditure or mortality rates. Another option, already pursued by Jäckle et al. (2022), would be integrating more measures of ideological conflicts into analysis, exploring their impact on views regarding public health policies and government performance during emergencies. Understanding how people's political beliefs influence their preferences for pandemic-related regulations and willingness to follow restrictions can inform the development of public health initiatives. Thus, researchers would gain a better understanding of how ideological polarisation affects public attitudes and social cohesiveness during health emergencies, guiding efforts to development of policies that are not only efficient but understandable and convincing to the public. However, a challenge is the limited availability of indicators that capture political values and ideological affiliations in cross-national, general-purpose social survey datasets, unless these are specifically designed to include multiple relevant variables.

Last but not the least, studying the link between populist attitudes and public decision-making during health crises has significant implications for democracy and government. Following this venue might enhance our understanding of how populist rhetoric, scepticism of conventional institutions, and anti-establishment sentiment influence public views towards health policy, vaccination efforts, and government responses to pandemics. Thus, researchers could obtain insight into the mechanisms by which populism influences public health outcomes and democratic governance, paving the path for evidence-based policymaking and ways to increase democratic resilience and trust during times of crisis.

CONCLUSIONS

This study highlights the critical role of political trust, conspiracy beliefs, and governance preferences in shaping public attitudes toward pandemic-related policies. Political trust emerged as a key factor promoting compliance with government-imposed restrictions, acceptance of monitoring measures, and the prioritisation of economic activity over public health. Conversely, conspiracy beliefs were associated with resistance to restrictive policies and a preference for privacy and personal autonomy. The findings also suggest that authoritarian sentiments show a somewhat mixed impact on the trade-off variables, while democratic support plays a limited role in shaping preferences during crises.

Political trust emerged as a key factor promoting compliance with government-imposed restrictions, acceptance of monitoring measures, and prioritising of economic activity over public health, while democratic governance showed a weak association with prioritising public health. Conversely, authoritarian preferences and higher education levels were linked to favouring economic activity. At the country level, the impact of political trust on these preferences showed a minimal variation, with a higher trust generally correlating with a preference for economic activity.

When examining the trade-off between public monitoring and privacy, the data revealed that a higher political trust corresponded to a greater acceptance of monitoring measures, while stronger conspiracy beliefs were linked to prioritising privacy. The importance of democracy showed no significant effect, whereas the acceptance of authoritarian rule slightly favoured privacy. Household income also played a role, with higher income levels associated with a preference for monitoring. Although some variability in regression slopes was observed across countries, the general trend indicated that a higher trust in political institutions led to a greater acceptance of monitoring measures.

In the context of compliance with government rules versus making autonomous decisions, a higher trust was positively associated with compliance, as was the importance of democratic governance. Most countries exhibited a positive relationship between trust and compliance, though the strength of this association varied. On the other hand, stronger conspiracy beliefs and the acceptance of authoritarian rule were linked to a preference for personal decision-making.

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JURIJS NIKIŠINS

Pritarimo kontūrai: COVID-19 eros visuomenės sveikatos politikos prioritetus lemiančių veiksmų atskleidimas

Santrauka

COVID-19 pandemija išryškino visuomenės nuostatų svarbą formuojant politikos atsaką į krizes. Politinis pasitikėjimas, sąmokslų teorijų palaikymas, demokratijos rėmimas ir autoritarizmo priėmimas yra pagrindiniai veiksniai, darantys įtaką visuomenės pasirinkimams dėl politikos kompromisų, tokių kaip visuomenės sveikatos prioritetizavimas prieš ekonominę veiklą, gyventojų stebėjimas prieš privatumo išsaugojimą ir pritarimas vyriausybės nustatytoms taisyklėms prieš individo autonomiją. Šio tyrimo tikslas – ištirti, kaip šie veiksniai formuoja europiečių politikos prioritetus pandemijos metu ir kaip politinio pasitikėjimo skirtumai nacionaliniu lygmeniu veikia šiuos pasirinkimus. Naudojant Europos socialinio tyrimo 10-osios bangos (2020–2022 m.) duomenis, apimančius 29 šalis, taikyta daugiapakopė regresinė analizė, siekiant ištirti individualius ir šalių lygmens dinamikos aspektus. Rezultatai parodė, kad didesnis politinis pasitikėjimas siejamas su didesniu pritarimu vyriausybės įgyvendinamoms priemonėms, o sąmokslų teorijos ir autoritarinės nuostatos koreliuoja su pasipriešinimu apribojimams. Demokratijos palaikymas turi ribotą poveikį politikos pasirinkimams. Šie rezultatai patvirtina politinio pasitikėjimo svarbą skatinant gyventojų bendradarbiavimą krizių metu ir atskleidžia iššūkius, kuriuos kelia sąmokslų teorijos ir autoritarinės nuostatos. Tyrimu prisidedama prie pasitikėjimo, valdymo ir visuomenės nuostatų sąveikos supratimo, siūlomos įžvalgos, kaip kurti veiksmingą ir visuomenei priimtina krizės valdymo politiką.

Raktažodžiai: autoritarizmas, sąmokslų teorijos, COVID-19 pandemija, demokratija, Europos socialinis tyrimas, politinis pasitikėjimas, politikos prioritetai