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Chapter 2: A QUESTION OF TRUST

Chapter 2

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A question of trust: Exploring trust concepts, experiences, and early observations from Europe

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Abstract

In times of global crises, such as those that originated from novel infectious diseases, people lack knowledge to understand how to cope with them. Because of potential life-threatening situations caused by these diseases, people will start seeking information to increase their knowledge on the matter and improve the quality of their decisions. Not all information is equally credible. Why then do people gauge some sources of information more credible than others? Research shows that it all depends on one key factor – trust. Trust is an essential coping mechanism people use when they lack sufficient information or expertise to make an objective decision such as following health recommendations. In health crises, it has been repeatedly shown that trust in the source of risk information highly influences people's willingness to follow public health rules and guidelines. This chapter seeks to clarify the concept of trust and the mechanisms as well as outcomes it produces. As trust is attributable to relationships at all levels of society, within and among social groups, this chapter structures the discussion of trust focusing on the micro, meso and macro levels and offers some illustrative examples from Europe of its relevance within the context of the COVID-19 pandemic that are both translatable and applicable in different geographical contexts as well as forms and types of crisis.

A question of trust: Exploring trust concepts, experiences, and early observations from Europe

Introduction

The COVID-19 situation in Europe has been complex with some countries hit hard while others have been less affected. At the time of writing, the UK, Italy, and Spain have had respectively 152,725, 127,680, 80,934 COVID-related deaths (Coronavirus (COVID-19) in the UK 2021a, European Centre for Disease Prevention and Control 2021). The same figures for Norway and Finland were 794 and 974. Huge regional differences have also been noted in vaccination uptake. The UK (Coronavirus (COVID-19) in the UK 2021b) and Iceland had covered 86 and 88 percent of adults above 18 respectively with one dose, while the similar figure for Bulgaria was 16.3 percent (European Centre for Disease Prevention and Control 2021b). On a whole, several surveys show how citizens have been dissatisfied with the handling of the pandemic (e.g., Eurofound 2021). In many countries trust has plummeted during the period, including trust in institutions and national governments. This chapter addresses this issue. Although the focus is on Europe, we maintain that much of the theorising also applies to other contexts as well.

In times of global crises, such as those that originated from novel infectious diseases, people lack the knowledge of how to understand, cope and deal with them. Because of potential life-threatening situations caused by these diseases, people will start seeking information to increase their knowledge on the matter and improve the quality of their decisions. Not all information is equally credible. Why then do people gauge some sources of information more credible than others? Research shows that it all depends on one key factor – trust. Trust is an essential coping mechanism people use when they lack sufficient information or expertise to make an objective decision such as following health recommendations (Siegrist and Cvetkovich 2000). Thus trust impacts people's behaviours in times of crises (Fancourt, Steptoe and Wright 2020).

Trust is not to be confused with trustworthiness (Hardin 1996, 2002). Trustworthiness can induce trust. The former involves a moral dimension, whereas the latter does not. Trustworthiness of actors is

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often described as the trustor's perception of the ability, integrity, and benevolence of the trustee (Mayer *et al.* 1995) and is evaluated in terms of intentions. Honest, genuine intentions to signpost the path to trustworthiness. The notion of "encapsulated interest" has been proposed to describe the expectation of the trustor (Hardin 2002). The trustor believes that the trustee has some kind of reason to act in the best interest of the trustor. The trustee will, for instance, value their relationship. This then, is highly context dependent.

In health crises, it has been repeatedly shown that trust in the source of risk information highly influences people's willingness to follow public health rules and guidelines, which are particularly important to control infection spread and mortality (Bargain and Aminjonov 2020). A source is trusted when it is perceived to have appropriate knowledge and expertise to provide correct and accurate information and when it is considered as trustworthy, which practically translates to when people perceive the source's intentions to supply correct information are honest (Lucassen and Schraagen 2012). In times of pandemics, for instance, doctors are often perceived to have the best knowledge and expertise regarding an infectious disease and are trustworthy sources because they normally have no commercial interest or personal interest to recommend specific preventive behaviours. This has been demonstrated across Europe in the use of scientific advisors to create credibility and support to the regular messaging from politicians (European Commission 2020, Farjam *et al.* 2021)

The key word 'trust' frequently turns up in European media coverage of the COVID-19 pandemic, not least in reports about trust surveys, as well as in academic publications (see for e.g., Devine *et al.* 2020, Goldstein and Wiedemann 2021, Offerdal *et al.* 2021). As a concept, however, it is frequently poorly defined and many different understandings exist. This chapter seeks first to clarify the concept of trust and the mechanisms as well as the outcomes it produces. As trust is attributable to relationships at all levels of society, within and among social groups, this chapter structures the discussion of trust focusing on the micro, meso and macro levels and offers some illustrative examples of its relevance within the context of the COVID-19 pandemic.

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Trust defined

Trust is perhaps one of the most studied concepts in the humanities and social sciences. Interestingly, despite the large number of papers and books about trust, Li's (2011) editorial for the launch issue of the *Journal of Trust Research* argued that at that point there was a persistent lack of consensus about trust which does make the field interesting to navigate and interpret. To frame the discussion we can see Lane's (1998) argument that trust is a social phenomenon to be studied at interpersonal, interorganizational and systemic levels. Most conceptions of personal trust share three basic assumptions: that there will be a degree of interdependence between trustor and trustee; that trust provides a way to cope with risk and uncertainty in exchange relationships and the expectation that there will not be an abuse of the vulnerability resulting from the acceptance of risk in the relationship (Colledge *et al.* 2014). Trust is also something to be given or placed, it may be placed in a person (micro), an organization/institution (meso), and the broader structures that affect roles and organizations, etc., (macro) such as codes of conduct, industry bodies, relevant law and broader societal norms (Colledge *et al.* 2014). The mechanisms by which trust influences people's attitudes and behaviours are multifaceted and sometimes indirect, meaning trust can be given to a person if one believes this person is trustworthy because others in his/her inner circle endorse them as giving or eliciting trust. This is a sort of "trust spillover effect".

Studies of trust in strategic communication have explored the phenomenon at 6 levels: individual (i.e. personal); institutional (i.e. organizational); financial (i.e. market); political (i.e. government); societal (i.e. public); and relational (i.e. specific relationships) (Valentini 2021). There is a plethora of trust definitions, underlying different features, attributes and outcomes, but most of them would depict it as a state, belief or positive expectation (Rousseau *et al.* 1998). Trust is often associated with individuals, yet depersonalised and abstract forms of trust exist too, such as institutional trust and societal trust. A common definition of trust points to how the notion involves two roles as trustor and a trustee, and the willingness of the former to take risk based on expectations tied to the latter: "*the willingness of a party to be vulnerable to the actions of another party based on the expectation that the other will perform a*

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particular action important to the trustor, irrespective of the ability to monitor or control that other party” [italics in original] (Mayer *et al.* 1995, p. 712). Trust involves recognition of an assumed risk, thus setting the notion apart from confidence where no alternative course of action is considered in a particular situation (Luhmann 2000). Put differently, through trust, citizens place a bet on “the future contingent actions of others” (Sztompka 1999, p. 25). There is a possibility for disappointment. Because of this, trust is also related to evaluation of the trustees’ past performance which leads to confidence or lack of confidence, and in turn cooperation or lack of cooperation. Confidence can be “defined as the belief based on past experience or evidence that certain future events will occur as expected” (Siegrist and Zingg 2014, p. 25).

In most situations, trust presumes reciprocity between the parties, and this is learned only through regular, honest and cooperative behaviours among individuals (Fukuyama 1995, Putnam 2001). Societal trust, for example, is a type of trust where this notion of reciprocity among individuals cooperating according to shared norms in a specific community is fundamental. In these societies, citizens trust each other, and have confidence that individuals and organizations will behave according to shared norms. Furthermore, this type of trust can be learned through direct experiences and during the process of socialisation of individuals with community norms, reciprocity and cooperative behaviours.

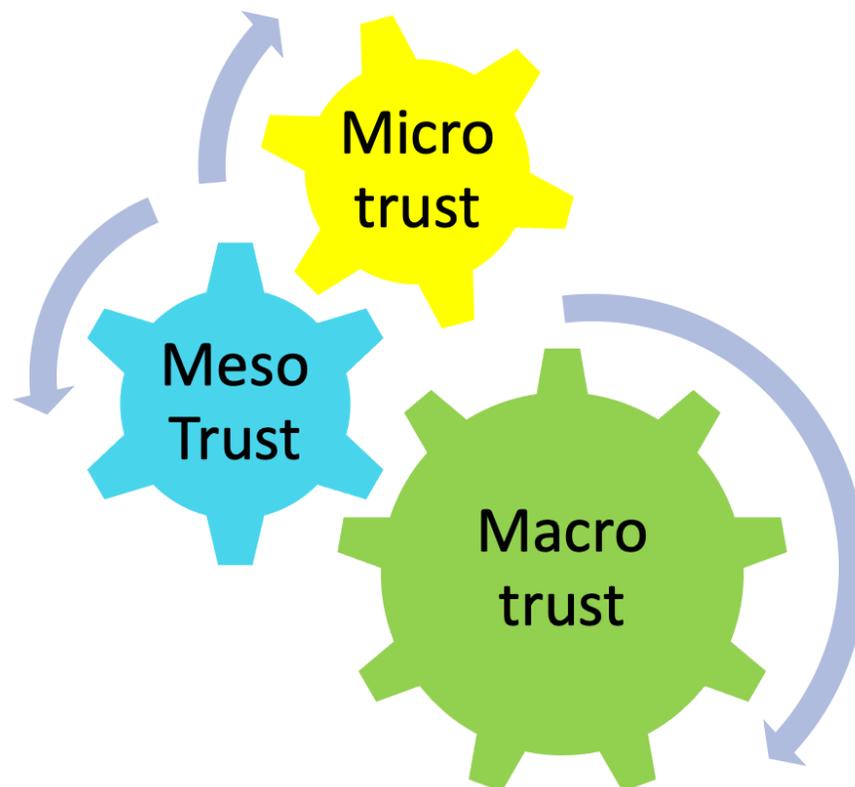
Trust can occur at different levels and with different intensities, that is, it can be conceptualized dichotomously (one either trusts or distrusts) or in a more graded fashion (one trusts or distrusts to a degree) (Levi and Stokker 2000). Previous research shows that trust is a multi-layered concept applicable to different types of subjects, objects, and processes. So, trust can be ascribed to information, channels, institutions and undefined members too. Literature suggests that there is a casual relationship between these different forms of trust and that each sustains the next level. Specifically, trust in information is highly influenced by the trust in the source, and the latter is influenced by trust in the medium or channel of communication, and next to society at large (Lucassen and Schraagen 2012).

In the next section we explore specifically three levels of trust that research shows play an important role in the management of risk situations. The three levels are illustrated in Figure 2.1 and

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correspond to micro, meso, and macro level forms of trust.

Figure 2.1 Levels of trust



Source: authors

Micro: Interpersonal trust

The most basic form of trust is that occurring between two individuals, a trustor and trustee. This type of trust is known as interpersonal trust and has been described as *horizontal trust*. McAllister (1995) makes a distinction between cognitive and affective foundations of interpersonal trust. The cognition-based trust relates to evidence of trustworthiness whereas the affective foundation of trust is based on emotions. Similarly, Valentini (2021) identified two macro forms while reviewing literature on trust; these are *trust as action* and *trust as a condition* (Valentini 2021). When trust is conceived as an action, it refers to an individual's rational assessment of the trustor's behaviour. It is a rational assessment in that the trustee is involved in a cognitive appraisal of certain qualities or attributes of the trustor and the costs

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versus the benefits obtained in offering confidence. In the second form, trust as a condition, trust is grounded in emotional bonds between trustor and trustee. Here trust has an affective orientation and is characterised by a psychological predisposition, or willingness to be open, vulnerable and confident (Valentini 2021). Dispositional trust, also known as predisposition to trust, is an example of trust as a condition, since this type of trust is a person's psychological predisposition and refers to a personality trait, an attitude that affects an individual's likelihood to trust another person. This form of trust is influenced by salient values, such as honesty, integrity, goodwill, benevolence, and familiarity (Valentini 2020). For some, family relationships early in life can influence trust formation (Uslaner 2002), however some of the exposed values can also be learned outside the family context. As a matter of fact, institutions such as schools, churches, etc. play a big role in nourishing these values at an individual level and they can thus influence a person's salient values and his/her propensity to trust.

Predisposition to trust is a clear antecedent for developing interpersonal trust, but even in individuals with no dispositional trust, interpersonal trust can develop. Typically, trust is built gradually as a result of previous positive experiences with the trustee, or simply through a "trust spilling over" effect, that is, when a person trusts another based on the positive experience with the trustee of individuals from his/her own group. In risk and crisis situations this can be trust in how you can turn to other citizens for help. The impact of trust on people's adherence with what they are informed to do is also higher among those with a higher dispositional trust (Lucassen and Schraagen 2011). Communities with high dispositional trust show generally higher levels of interpersonal trust, meaning they have confidence that a fellow citizen will act according to shared norms. Widespread levels of interpersonal trust also reinforce institutional trust, which manifests with trust in relevant groupings during a health crisis or pandemic such as public authorities, government, politicians etc. These two contribute to the formation and maintenance of societal trust, that is, trust in generalised others (Robinson and Jackson 2001). High levels of societal trust can be a crucial asset in dealing with crises, thus providing the grounds for societal resilience. Therefore, some scholars (Devine *et al.* 2021) suggest that in countries with high levels of interpersonal trust, governments have managed the disease through emphasis on individual

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responsibility of citizens, based on mutual trust between citizens and the state, rather than imposing more restrictive measures. Furthermore, empirical evidence on the COVID-19 pandemic and trust across twenty-three countries worldwide shows that the more people endorsed moral principles of fairness and care (vs. loyalty and authority), which are core in trust, the more they were inclined to report trust in science, which, in turn, statistically predicted prescribed and discretionary behavioural intentions (Pagliaro *et al.* 2021).

Meso: Trust in organizations and institutions

At the meso level, the trustee is an organization or institution. The benefits of trust within organizational settings are numerous, for example trust has been shown to impact cooperative behaviours, organizational citizenship behaviours, organizational commitment, and employee loyalty (Kramer and Tyler 1996, Paliszkievicz 2011). It also affects investment decisions (Lorenz 1988, Baldvinsdottir *et al.* 2011), supports economic exchanges (Arrow 1974), and the negotiation of conflicts (Kelman 2005). Trust is mentioned as a key component for risk responses and can amplify or accentuate public risk responses (e.g., Earle and Cvetkovich 1995, Renn 1998). Various forms of trust based on organizations and institutions have been studied. Of particular interest in the context of pandemics are two forms: categorization-based trust and role-based trust. Categorisation-based trust occurs when confidence is based on the premises of a shared membership in a social or organizational category. Here trust is thus depersonalised, not related to a specific individual. According to Brewer (1996), this type of trust defines “the boundaries of low-risk interpersonal trust that bypasses the need for personal knowledge and the costs of negotiating reciprocity” when interacting with other members of that category (p. 356).

Further, through categorization-based trust people ascribe positive values such as honesty, cooperativeness, and trustworthiness to other ingroup members (Brewer 1996), thus reinforcing the perception of trust. An example of categorization-based trust is medical doctors. Individuals do not need to have an interpersonal relationship with a medical doctor to trust he/she will perform the best treatment. Knowing that doctors belong to a specific professional category with a particular code of conduct is a

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sufficient mechanism to offer confidence. Literature also indicates that high levels of categorization-based trust among individuals in a community enhance societal trust (Muethel and Bond 2013, Roumeliotou and Rontos 2009, Williams 2001). That said there are challenges to this form of trust and particularly to some professions and professional groups. The real issue is that many professions are untrusted by the general population, and this is of specific relevance to advisors from the field of communications as there is a decline for those in business related professions which includes communicators (Nuremberg Institute for Market Decisions 2019).

The other form of trust that is highly relevant in an organizational context is role-based trust. Like for categorisation-based trust this is a form of presumptive trust since trust is depersonalised. Trust is granted on the basis of knowing that a person occupies a particular role in an organization, rather than knowing the person's capabilities, dispositions, motives, and intentions. The assumption here is that if someone holds a specific role in an organization, he/she must be capable of carrying out the tasks and will fulfil the expectations related to his/her role (Barber 1983). Essentially, this type of trust reduces the risks related to knowing the trustee as a trustor can adopt a sort of presumptive trust based upon knowledge of role relations, even in the absence of personalised knowledge or history of prior interaction. The police as a type of institution is an illustrative example of this form of trust. People trust police men and women and as extension the institution of the police, based on the presumption that those working in the police have the competencies to fulfil the police duties since they occupy a specific role in this institution.

Recent studies on pandemics and institutional trust show that where there is a high level of trust in the institutions that are in charge of the health crisis there are higher levels of compliance with recommendations (Han *et al.* 2020, Olsen and Hjorth 2020) and lower mortality rates (Oksanen *et al.* 2020). A positive evaluation of the competence of authorities, perceived accuracy and honesty and a general benign view of government agencies can increase compliance with recommendations in risk and crisis situations (Prati *et al.* 2011). Interestingly, when there is an absence of trust in conjunction with low self-concern regarding the virus, trust in government significantly reduced compliance among Italians and French (Lalot *et al.* 2020). High levels of institutional trust may have unintended consequences too.

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People can trust the authorities to the extent that they underestimate the risks and do not take the necessary action (Wong and Jensen 2020), or underestimate the consequences of a pandemic (Wollebæk *et al.* 2020). Yet, recent research on COVID-19 seems to indicate an increased ‘rally-round-the-flag’ effect due to the pandemic, with trust in political institutions and actors increasing to varying degrees in many national contexts (Jennings 2020). Looking at this phenomenon in the specific context of Europe it is interesting to consider one of the key decisions taken by governments across the continent during the pandemic which was the lockdown of citizens in their homes, away from public places as well as their places of work. According to Bol *et al.* (2021) the implementation of lockdown measures has been shown to increase trust in government in European countries. Clearly one of the key outcomes of trust that has relevance during global pandemics is its effects on voluntary deference, which is essentially an individual’s acceptance and compliance with decisions without consciously questioning the authority’s intentions. As such trust has been repeatedly found to reinforce voluntary deference, which in turn helps authorities in focusing on the management of a crisis without having to continuously explain and justify their actions and their management capabilities (Kramer 1999).

Furthermore, by enhancing voluntary deference, trust influences people’s attitude towards contested and conflictual issues and makes individuals more likely to accept any outcome (Tyler 1994). Yet, a healthy level of trust towards authorities, allowing for some criticism, has been considered essential to avoid the situation whereby voluntary deference turns into public blindness towards political actors’ misbehaving.

Importantly, trust is negotiated. It is not something that is constant or a feeling that an organization or institution can decide that their stakeholders will share. Through language, the communicator attempts to trigger “the audience’s projection of authority and trustworthiness” onto him or herself (Baumlin and Baumlin 1994, p. 99). Yet, people tend to question the trustworthiness of authorities when they have a social relationship with them (Kramer and Tyler 1995). So, to gain or reinforce trustworthiness, authorities need to demonstrate competence, virtue and goodwill towards individuals (McCroskey and Teven 1999). Furthermore, transparency is frequently mentioned as key for building

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trust, particularly in situations characterised by uncertainty, for instance regarding possible side effects (van der Bles *et al.* 2020) and is often considered a core principle of public sector communications (Luoma-aho and Canel 2020).

Public health authorities are advised to engage in “expectation management” concerning priorities, to express cautious optimism and to let trusted local healthcare personnel administer the vaccine (Warren and Lofstedt 2021). Active communication of transparency and an expert position independent of political needs is recommended (Offerdal *et al.* 2021). Furthermore, a trusted, expert position can be preserved by cultivating a position within a larger institutional field of experts and (social) media networks of expertise (Kjeldsen *et al.* in press).

Macro: Trust in society

At the macro level, trust is often referred to as public or societal trust. This trust can vary country by country and among members of different cultural groups (Zaheer and Zaheer 2006). Societal trust is essentially a combination of three forms of trust: dispositional trust (Robinson and Jackson 2001), rule-based trust, that is, a generalised confidence in the rules of a society as a result of socialisation into the structure of rules (March and Olson 1989), and categorisation-based trust (Kramer 1999). Different studies have pointed out the benefits generated from widespread societal trust for communities, organizations and individuals as well as for economic, political and social purposes. Societal trust is typically seen as a form of social capital (Coleman 1990, Field 2002, Putnam 2001) and portrayed as an asset for society. Social capital often describes the resources of a community and the degree of shared values and trust within it which, for instance, facilitates collective action. Looking explicitly in Europe, in the Nordic countries, the levels of trust and social capital have been described as the Nordic Gold (Rothstein and Holmberg 2020) (see also the chapters on the Nordic countries). Country-level indicators of social capital can be in fact measured by the degree to which people within a country demonstrate general trust in others and trust their structure of rules (Bjornskov 2010, Knack and Keefer 1997). Societal trust has been found to be an important predictor for international business performance (Muethel

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and Bond 2013). It has been shown to have explicit health, safety and environmental consequences – and is a precondition for citizens to feel safe and secure (Spadaro *et al.* 2020). Norms of trust and the belief in the solidarity of others, is what helps society avoid the tragedy of the commons (Rothstein 2000).

Trust is also seen as a social mechanism that reduces complexity and uncertainty (Luhmann 1979, 1993, Renn 2008). Without trust, societies would be characterised by chaos and paralysing fears (Luhmann 1979, Valentini and Kruckeberg 2011). In this sense, trust can help develop solidarity in society and reinforce social order (Misztal 1996). When thinking about global pandemics, such as COVID-19, the level of uncertainty was high among the general population in Europe and across the world. For many months, it was not clear when, where and how the disease originated and not much was known about how to cure it. Governments and international organizations across the globe had to change their strategy and recommendations for reducing the spread of this new infectious disease as more knowledge about it emerged. Many countries faced challenging public health situations and without public trust, many societies would have ended up in total chaos. While differences in the management of the pandemic are visible, as studies from different countries and regions in this book demonstrate, some were more successful than others with time, and a general public trust was established in most countries and this has helped authorities and international organizations to avoid total paralysis.

Yet, societal trust does not come from nowhere. Through their communication actions, strategic communicators can promote solidarity, a sense of trust, and generally reinforce those values that are at the basis of a trusting society, and by doing so they can strengthen the diverse systems interactions and help them function (Heath 2018, Valentini and Kruckeberg 2011). During pandemics certain roles such as that of the strategic communicator can be critical to mediate between the different stakeholders (subjects of trust) and the focal organization (object of trust) (Bentele 1994). But why is this important to foster societal trust? As Putnam (1993) observed, ‘The greater the level of trust within a community, the greater the likelihood of cooperation. And cooperation itself breeds trust’ (p. 171). High levels of trust are indicative of resilient societies that can “resist, absorb, accommodate to and recover from the effects of a hazard in a timely and efficient manner, including through the preservation and restoration of its essential

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basic structures and functions” (United Nations Office of Disaster Risk Reduction [UNISDR] 2009, p. 24).

Communication has a huge role to play to help foster resilience (Norris *et al.* 2008). Longstaff and Yang (2008) studied health pandemic crisis situations and highlighted that a society is more likely to recover from the disaster if they have access to trusted information and are subsequently more resilient. Societal trust predicts the extent to which citizens will trust that others will act according to the norms and rules of the society and subsequently this will affect the citizens’ own behaviours. Putting it differently, if social distancing and wearing a mask have become a social norm during the COVID-19 pandemic, citizens of a community with high public trust are most likely going to conform to these preventive norms without government imposition and will trust others to do the same. A study on Swedish citizens’ level of interpersonal trust during the first year of the COVID-19 pandemic shows not only do citizens demonstrate their trust, but that the coronavirus crisis has even increased trust in other people, meaning Swedes have increased their dispositional trust, which is one important component of societal trust (Esaiasson *et al.* 2020).

An example of trust at the macro level is also trust in the body of science as a collective or institution in society. Descriptions of a “post-truth society” are floated (e.g., Block 2018, McIntyre 2018, Waisbord 2018) frequently pointing to how politicisation of issues reframes scientific utterings as opinions or politicised narratives. Right-wing attitudes in particular have been associated with lower trust in science, medical expertise and institutions (Baumgartner *et al.* 2018, Larson 2020). Of late, this polarization has also been noted in the COVID-19 debate, concerning measures, as well as vaccination (Lin *et al.* 2021).

Conclusion

This chapter has set the scene within the book about some of the debates and concepts relating to trust and the contextualising of these discussions within the challenging backdrop of health communication during national and international pandemics, initially from European experiences but

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clearly with an eye to how these principles play out in all contexts. What is clear from the discussion is that trust clearly impacts behaviour in times of crisis. This leads to considerations of the sources of trust which are crucial in health pandemics as citizens are instructed to and relied upon to follow public health rules and guidelines as COVID-19 has clearly demonstrated with core messages of hygiene, social distancing and, eventually, adherence to vaccination procedures. The chapter discusses trust at three levels, the individual (micro), the organizational and institutional (meso) and societal (macro), to understand and explore how citizens both theoretically and practically have engaged with trust and trusting during the worldwide COVID-19 pandemic. It shows how trust formation is a rather complex, multi-layered mechanism which cannot be reduced to one form or type, particularly during pandemics, when different actors are involved and communicate at the same time.

Three learnings can be deducted. First, as societal resilience has been shown to help in critical situations, building trust in and outside organizations should be a strategic communication priority for any kind of organization oriented towards a stakeholder relationship governance (Falconi 2014). It takes time to build a trusting relationship, and during pandemics communication professionals have limited resources and time to focus on building trust, but they can, on the other hand, leverage it through authentic and transparent communications, if they have previously developed some form of trusting relations. Communication scholarship has a plethora of insights on offer in this regard (see e.g., Ihlen *et al.* 2021).

Second, messages by the authorities do not always reach all population groups no matter if the messages are spread through traditional means of communications or social media. Because of the enormous consequences produced by failing to reach out to some public groups – as we have seen in respect to reaching out to some groups, like for example immigrants, at least at the beginning of the pandemic – authorities must reach all different publics, even those who do not want to be reached. A way to do so is leveraging trust between these publics and those they trust the most. Engaging different kinds of stakeholders in risk communications, for instance, by asking them to become the intermediaries of communications about infectious disease preventive measures can enhance public reception and

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acceptance of regulations and governmental measures. A case in point, some countries, for instance Italy and Finland, have engaged social media and celebrity influencers in their emergency communication plans so as to be able to reach out to the youth (Heikkila 2020, Reuters 2020). More of this kind of intermediary engagement is needed during emergencies.

Third, increasing dispositional trust, which essentially leads to an increase in generalised trust in others, means increasing the likelihood that individuals will exercise self-control during an infectious disease spreading period. This can be done by working on sustaining other forms of trust, for instance role- and rule-based trust. Stronger role- and rule-based trust support the development of societal norms and values around values such as transparency, equality, confidence, respect, cooperation, etc. Such values can eventually institutionalise into communities and pay off during pandemics and other emergencies which often require collective actions to mitigate the spread of disease. Communication professionals can be central in building and weaving networks of social relations with different societal actors willing to lead by positive behaviours where the values at the core of trust are not just communicated but lived and practiced daily. This is particularly important, as actions speak louder than words.

With these theoretical and practical insights in mind, this chapter has highlighted the most important discussions – within the limits of a chapter length – on trust dynamics that can inform future research on risk and crisis communication and calls for new research avenues exploring the interplay between the three levels (micro, meso, and macro). Trust is a key factor in risk and crisis management but a full understanding of the role of strategic communication is still the missing piece of the puzzle that we hope colleagues will take on.

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