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# Credibility, trust, and suspicion: Social relationships put to the test by Covid-19

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## ABSTRACT

The Covid-19 pandemic has generated a broad feeling of uncertainty in social relationships and has had a significant impact on different forms of trust and mistrust. In this contribution, the authors address some central questions: how did the medical emergency challenge interpersonal trust and the trust of citizens in science, politics and media? More generally, what is the destiny of trust in contemporary societies in this Covid-19 epoch and afterwards?

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## 1. Introduction

The Covid-19 epidemic, declared a pandemic by the World Health Organization on March 11, 2020, has been and continues to be a collective tragedy and a major social scourge both globally and in individual countries. Not only has it resulted in many deaths and caused suffering both for individuals and social communities, but it also had an impact that strained social and health protection systems, the economic system, and the overall social fabric of the most affected countries.

Covid-19 has heavily impacted all countries worldwide: countries with different histories, cultures, political systems, and economic conditions. The impact has been so great that it has rightly been called an unprecedented and decisive test of globalization (Eiran 2020; Boccia Artieri and Farci 2021). Authoritarian and democratic political systems have operated differently. And even among democratic regimes, different choices and strategies have been employed to deal with the crisis. While considering this wide variety of situations, it should be noted that the measures taken by most governments have been similar and have influenced people's lives, social relationships, and behaviors in similar ways (Petricone 2020). One trait these choices share is that amid the urgency of the solutions proposed to better control the pandemic and to return quickly to pre-crisis living conditions, concerns about the psychological, relational, and social costs of

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the pandemic turned out to be less central than the need to fight the spread of the virus from a public health standpoint. Less attention was paid to the consequences that government actions might have on socialization, daily experience, individuals' relationships and identities, work practices, and the dynamics of public opinion (Colombo and Rebughini 2021, 14).

Out of all the measures taken to curtail the pandemic, two seemed to be the main priorities: isolation and distancing. The first measure has resulted in people remaining secluded in their homes. Overall, many millions of people worldwide have experienced a relatively long isolation period in their homes: not only unable to travel, but also unable to go to school or work or to experience normal social relations and exchanges of services and benefits within their city or neighborhood. Second, distancing norms have regulated and redefined face-to-face interactions, subverting normal interpersonal distances and proxemic rules of everyday life.

Precisely for this reason, Covid-19 has also been a great sociological 'laboratory' both on the micro-social level of relations and daily practices and on the macro-social level of structures, institutions, and collective cultures. Extreme or pathological relational situations are sometimes useful for illuminating the support structures and persistent dynamics of 'normal' social relationships that are taken for granted. In this sense, the pandemic has revealed many important aspects of relationships that we take for granted. It has laid bare their physiognomy and internal logic.

This essay intends to specifically investigate the topic of credibility-trust in interpersonal and social relationships, as it has been 'revealed' by the social and healthcare emergency of Covid-19. Credibility and trust are in fact primary 'relational goods' (Donati 2019) that promote the well-being of individuals and society as a whole, but they are also fragile resources that must be constantly nourished and supported.

## 2. Credence and trust

Trust is an essential element in each interpersonal and social relationship, from the most immediate and extemporaneous to the most organized and institutionalized. There are two main dimensions of believing and being believed: 'believing' and 'believing in' (de Certeau 2007). 'Believing' means *believing what the other person is saying*; the content of the communication, the truthfulness of the discourse, and the persuasiveness of the argumentation are decisive for this. This is, for example, what happens when we give credence to an expert because 'she knows' and because she takes responsibility for what she says (the dimension of knowledge and competence). 'Believing in', rather, means having confidence in *the speaker*, because in her way of being and acting, she embodies values (that is, conceptions of what is good, desirable, and just) that we also appreciate and consider important (the ethical-valuative dimension) and because we feel a sense of well-being and security in our relationship with her (the affective dimension) (Gili 2005; Belardinelli 2018).

Whatever the predominant element (the cognitive, ethical-valuative, or affective dimension), the credibility-trust relationship always remains an open and problematic relationship which must be constantly renewed and reinforced. Trust is a tool for dealing with people's freedom (Dunn 1988) and as such, it is put in relation with the fact

that others might not live up to our expectations (Gambetta 1988). If, therefore, trust is the fundamental ‘cement’ of social relations, then at the same time the possibility of inconsistency, disappointment, and even betrayal remains ineradicable because trust calls into question individual liberty and the contingency of human relations.

The epidemiological emergency caused by Covid-19 has given rise to a widespread sense of insecurity and has had a significant impact on the forms of credibility-trust. How have these forms of trust been tested by the healthcare emergency? How have they been redefined in the current context? And in what direction?

To respond to these questions, we must consider the fact that trust takes different forms. We can distinguish these forms in relation to the subject toward whom the expectation of trust is directed. In this regard, we can distinguish between specific interpersonal trust, general interpersonal trust, and systemic trust. Within this reflection, particular attention will be paid to trust in experts, policy makers, and the media.

### 3. Specific interpersonal trust

The first form of trust is that which is directed toward *other individual subjects*. We can also speak of ‘focused trust’ (Roniger 1992) or ‘particularistic trust’ (Uslaner 2002). This interpersonal trust ranges from an extreme, a kind of ‘starting point’ that consists of ‘familiarity’, to increasingly abstract, typified, and anonymous forms of relationships.

Borrowing the terminology of Epstein (1969) and Granovetter (1973), we can say that each individual’s set of social relationship networks presents areas characterized by different densities in the sense that they see the coexistence of a more restricted area of strong and closed ties, characterized by familiarity and mutual trust, and another generally larger area of weaker and more open ties. Epstein speaks in this regard of an ‘effective’ and ‘extended’ network.

Familiarity emerges from the maximum combination of: (a) the amount of time that the people dedicate to each other; (b) the emotional intensity of the tie; (c) the level of intimacy and mutual trust; and (d) the consistency of the services, help, and support that the individuals exchange. Familiarity does not only characterize familial relationships, but also close friendships, where the regularity of the relationships reinforces the feeling of mutual friendship (Homans 1950, 33). As Luhmann has observed (1988, 2000), familiarity does not ask any questions about the credibility of the other since the custom of living and the deep bond between the individuals make such a question superfluous. When it needs to be asked, it means that there is a rift in the relationship, and this leads to deep disappointment.

In interpersonal relationships that are characterized by increasing degrees of extra-neousness and anonymity, we see the rise of the problem of credibility-trust in one’s interlocutor. Such relationships are actually riskier by nature and require greater trust exposition on the part of the person ‘giving’ trust. Thus, in these cases the recipient may doubt the credibility of the other and activate mechanisms of caution, risk reduction, and restitution (Goffman 1959, 1969).

The pandemic has certainly tested the closest relationships, in the sense that the situation of isolation and confinement at home has led people in the same nuclear

family to experience a form of coexistence that has presented new characteristics. In many cases, one of the immediate effects of the quarantine was the increase in ‘relational pressure’ due to the convergence and mixing of the family members’ previously distinct routines and practices of family life, work, and school in the same space/time. Thus, smart-working for adults had to be combined with attending online lessons for children and teenagers, and both had to make a (not always easy) ‘adjustment’ with the demands of conducting family life: a situation that has become burdensome, especially for women. Therefore, self-isolation has strongly influenced how people manage domestic work, children, professional lives, and many areas of family life. This has demanded a new development and reconstruction of strong relations, in which there is no shortage of conflicts and crises. The pandemic has had different effects on these relations—effects linked to different family structures and cultures and to the values and norms that govern interpersonal relationships. In many cases, the lockdowns have allowed people to deepen or rediscover the meaning of their bond, further dedicating themselves to one another and finding new reasons for and new ways of being together. However, there has also been no shortage of situations of deep suffering and breakdown of romantic partnerships, as well as an increase in symptoms of depression among adolescents and young people, both of which are linked to home isolation and the drastic reduction of external interpersonal relationships at an important time in their personal growth (Balzarini et al. 2020; Bellani and Vignoli 2020; Liu 2020; Torales et al. 2020; Giuntella et al. 2021).

During the Covid-19 pandemic, relationships between *non-cohabitating* relatives have also expanded and intensified significantly through social media. In the past twenty years, much research at the international level (Christakis and Fowler 2009, Broadbent 2011; Ellison and Boyd 2013) has already shown that relationships created online and on social media, though potentially unlimited, often involve people who know each other well and have a strong connection. In this sense, online relationships appear as an extension and continuation of in-person interpersonal relationships. The different tools and platforms are used in different situations and with different content, but the interlocutors are mostly the same (generally small groups of 5–10 people), and they belong to a small circle of loved ones, family members, relatives, and friends. One can say that this tendency was strongly reinforced during the pandemic when the use of videoconferencing and video-calling platforms (such as Skype, Zoom, Meet, Teams, etc.) was greatly expanded. Such platforms have allowed us to maintain contacts with family (and friends) confined to other domestic spaces or workspaces, allowing us to somewhat rebuild and preserve a ‘sense of home’ even in the absence of a face-to-face relationship (Bonini 2021). For longer or shorter periods of time—weeks or months—these modes have replaced face-to-face relationships and physical contact. In this regard, one can say that such technological opportunities have ‘preserved’ relationships while at the same time losing much of the richness of interpersonal relationships. Although videoconferencing and video-calling platforms are interfaces which create a mediated interaction (Thompson 1995) that has many of the characteristics of face-to-face interaction (using the vocal-auditory and visual-gestural channel), they lose a fundamental dimension of in-person relationships, namely, the physical interaction and the proxemic dimension. Virtual proxemics cannot, in fact, adequately replace ‘real’

proxemics and presence ‘in the flesh’, as we also see in school lessons, professional relationships in smart working, theatrical performances and sporting events, or simply in live conversation.

However, as noted above, strong relationships (in-person and online) do not exhaust the network of relations in which the individual is involved. The ‘extended network’ and the ‘weak ties’ play an equally important role. Our sociality is made up of these relations too. People have expressed a deep sense of unease about the rarefaction or suspension of ‘weak ties’, thus reaffirming the importance of such ties for our social lives. Often considered as purely instrumental, superficial, and impromptu ties, and sometimes denounced as a source of alienation, weak ties (going to the bank, buying a newspaper, ordering a coffee at the bar, greeting neighbors, talking to other children’s mothers, etc.) instead turn out to be indispensable for individuals’ social lives and for their integration into the broader community. Thus, they contribute significantly to social cohesion (Granovetter 1973, 1378).

These ties actually appear ‘open’ in multiple senses. First, because they put us in contact with many different people, whereas strong relations tend to be ‘closed’ in the sense that they mostly put us in contact with people who are closer and more ‘similar’ to us. There is a lot of empirical evidence indicating that the stronger the tie that unites two people, the more these people exhibit similar social traits (with the risks and mixed feelings that this fact creates). Secondly, these weak ties are open in the sense that they can be ‘bridging ties’ (Granovetter 1973, 1376), that is, they can be used to get to know and enter into relation with people who belong to other groups and social circles (for example, one of my neighbors may be part of a group of bicycle tourists or a fan of a musical group and involve me in that group). Finally, these relations are open in the sense that if a person goes to the bank or coffee bar, he or she may stop briefly to talk to the bank employee or barista; if he or she returns several times, then familiarity, confidence and, perhaps, a relationship of congeniality and friendship may develop. The weak tie may therefore strengthen over time and transform from a simple role relation that is purely instrumental, into a more meaningful interpersonal relationship.

The importance of these weak and open ties became very clear during Covid-19—when they were missing. Beyond the sphere of strong or effective relations is indeed not a vacuum, but this vast area of extended relations. And these are not merely instrumental relations. If, to paraphrase Adam Smith in *The Wealth of Nations*, it is not from the benevolence of the brewer or the baker that I get what I need, but the fact that they pursue their interests in interacting with me through the medium of money, nevertheless, this does not exclude the fact that *I talk with* the brewer and the baker and find pleasure and ‘human’ value in this relationship and conversation.

Once the home-isolation phase has passed, social distancing measures represented another social laboratory, again playing on the binomial of strong and weak ties. As has been known since Edward Hall’s pioneering studies on interpersonal distances (Hall 1959, 1966), people activate selective mechanisms to regulate their interpersonal distances. Analyzing the distances of a sample group of Americans, through observations of interactional situations and interviews, Hall showed that people appeared to be surrounded by invisible concentric bubbles or circles, but they all distinctly perceived these bubbles: the first circle or ‘intimate distance’ (up to 50 cm in radius) is the space

where we allow only the people most intimately connected to us; the second circle or ‘personal distance’ (of about 120 cm in radius) is the area where we admit people we know well and with whom we have relationships of friendship and trust; and the third circle or ‘social distance’ (up to three meters and 60 cm), rather, forms the space of professional and business relationships, but also, on the outer edge, relationships with strangers. Hall has also observed that the interpersonal distances vary from culture to culture, so he distinguished between ‘contact cultures’ and ‘noncontact cultures’, but there is no doubt that the logic which governs interpersonal distances (i.e. differentiated access for categories of people) has a universal value, albeit with different forms and measures.

It is immediately apparent that all the provisions and recommendations regarding ‘social distancing’—*at least* one meter—that were repeated throughout the pandemic apply Hall’s typology of interpersonal distances in a public health and preventive sense. The two innermost circles—those of intimate and personal relationships—correspond to strong (and ‘private’) relations and are characterized by the fact that our body is to an extent directly accessible to others. Outside of this radius are the weaker social relationships and ties characterized by greater distances, which distinguish the relationships of the ‘outside world’.

The ‘social distancing’ measures that governments decreed during the pandemic months were aimed at further demarcating and making the boundary between the sphere of strong ties and that of weak ties more ‘impermeable’, even if Covid-19 also challenged the relationships of the intimate sphere (the first circle) with sometimes truly disorienting consequences, such as when healthcare workers or infected people had to live ‘separated at home’ with their own families.

What has emerged in a remarkable way is that Covid-19 has produced a rarefaction, to the point of being a real ‘cancellation’ of weak face-to-face ties, since people belonging to other external social circles might be vehicles of contagion. Relationships with friends, acquaintances, and neighbors have disappeared, as well as that vast area of weak ties linked to the fulfillment of needs and services: from the relationship with the newspaper vendor, to the cashier at the supermarket, the mailman, and the barista. Smart working has then transformed many face-to-face relationships with colleagues or with the public (in the case of front-of-house roles) into relationships mediated by the internet and online platforms.

Finally, let us not forget that the Coronavirus has severely limited those emerging forms of economic and social solidarity, the sharing of goods and services which are generally collected under the label of the ‘sharing economy’, in which collaboration implies and requires physical proximity and cohabitation among people.

To conclude this overview of the challenge that Covid-19 has represented for specific interpersonal trust, we can highlight two very important aspects.

First, the need for socialization (which manifested itself in so many ways during the period of forced isolation) challenged one of the most *en vogue* conventional sociological readings of recent years: the idea that our society is characterized by growing individualism—with its characteristics and expressions of selfishness, narcissism, and consumerism—and that this resulted in a weakening of strong and meaningful ties and increased social atomization (Solito and Sorrentino 2021, 56). Think, for example, of



concepts such as Beck's 'society of singles' (1992, 122) or, referring to networked relationships, of 'individualized networking' and 'networked individualism' proposed by Wellman (2001, 2002, Rainie and Wellman 2012). There is certainly some truth in these analyses. However, as von Wiese highlighted in his time (1959), there is no single 'individuation principle' of the present that entirely and unequivocally describes our era, even the post-Covid era, since what is typical of the present is instead the abundance of contrasting tendencies, which flank and cross each other, and which must be carefully considered without attributing exclusive validity to them.

A second trajectory that many observers point out is the strong advancement of the process of *mediation of interpersonal communication* which has been underway for years, but which Covid-19 has undoubtedly amplified and reinforced, as the only form of socialization possible aside from the relationships in the domestic context. Some have spoken in this regard of the gradual 'substitution' of in-person relationships with mediated relationships, to the extent that they say it prefigures a progressive obsolescence of direct face-to-face relationships in favor of mediated ones. Of course, the situation we have experienced has shown that in some way and to a certain extent, online and distance relationships can substitute in-person relationships—but with what effects, advantages, and costs, still needs to be studied. This lack of a single 'individuation principle' for explaining the evolution of today's post-Covid society also applies to the direction and effects of the process of mediation of interpersonal communication. This topic is rich in implications on which we need systematic research and reflection that avoids oversimplified readings, however suggestive.

#### 4. Generalized interpersonal trust

The second form of trust is generalized interpersonal trust: that is, trust in others in general, or in 'people'. We trust, for example, that we will not be attacked in the street, so we are not constantly looking over our shoulders. We do not have too many problems with following the suggestions of a stranger we asked for information. We hope that in times of need, such as after an accident, someone will be able to help us. How does this form of trust develop? If in the course of his or her life, a person has experienced many concrete relationships with people who appeared honest, consistent, agreeable, reliable, unselfish (starting with his or her own family life, then in relationships with the peer group, with business colleagues, etc.), then he or she will find it easier to think that people *in general* are credible and trustworthy. Otherwise, in case of more negative experiences, a worse opinion will prevail along with more pessimism about relationships with others. Various sociological studies also tell us that this type of trust is also strengthened in relation to macro-social factors: for example, in phases of economic development, in countries with a more egalitarian distribution of income, and under democratic and pluralist political regimes (Cook 2001; Mutti 2003). When instead an economic and social crisis—or even a healthcare emergency like the Covid-19 pandemic—leads people to live in an environment marked by greater uncertainty and precariousness, generalized interpersonal trust may recede, and people may become more distrustful of others. They may perceive others as competitors and, perhaps, as enemies.



However, we must also consider another aspect of contemporary social life that affects, we might say in a ‘structural’ way, generalized interpersonal trust. In today’s society, relationships with strangers and people we do not know are greatly increasing. This therefore increases the sense of risk and insecurity in many relationships. In this kind of context, ‘*trust* will be based on a continual need to update personal information on assets and whereabouts’ (McLuhan and Powers 1989, 113). The counterpart of the increased distance and uncertainty in relationships is the intensification of social control in the form of information about the interlocutor: some personal information could be recorded without the knowledge of the person concerned. More often it may be requested to reduce the risk in certain relationships, especially economic relationships. More information will also have to be produced in order to fulfil certain social obligations or to use certain services. At the same time, in the information society, the prevention and detection of abuses of trust are entrusted to increasingly complex technologies: locks and safes have given way to passwords, magnetic stripe badges, and CCTV cameras (O’Neill 2002).

Covid-19 poses a serious challenge to generalized interpersonal trust because it sits at the convergence of these two processes. Partly as a result of the specific regulatory requirements continuously repeated to them by the media, people have been compelled to ‘keep others at a distance’ and to view them with suspicion as potential spreaders of the virus. This fact is not just a form of necessary and useful prudence, but it also has psychological and social implications in the sense that the other—especially if they are unknown—is perceived as a potential threat to one’s own safety.

This growing sense of uncertainty in relationships with others has also been influenced by the monitoring and control policies put into place by different countries’ authorities. Such policies have gone in the exact direction of ‘control through information’ that McLuhan and O’Neill described. Not only in authoritarian regimes, but even in democratic countries, observers have not failed to note the implications and risks posed by the limitation of freedoms connected to such policies. For example, a range of technological and digital tools have frequently been used, including apps that track interactions with others, wristbands that ring when there is ‘wrong’ or imprudent behavior, and other technological devices that monitor and contain the risk of (bad) freedom, such as drones and cameras in streets and public spaces. More recently, when a majority of the population in individual countries has undergone vaccination, they have adopted *green passes* for accessing public places and workplaces. These mechanisms which were conceived to cope with the virus appear ambivalent from a social standpoint since they can, on one hand, lead to the restriction of networks and fiduciary circuits, and on the other, foster networks of more uniform and homogenous relationships that include those who are similar and exclude those who are different.

And yet von Wiese’s observation on the plurality of the effects and directions of social evolution also applies to this case. In many situations and contexts, individuals and social groups have not become more distrustful and closed in on themselves, but they have activated or reshaped pre-existing networks of mutual aid and volunteerism in the face of the new pandemic emergency. Consider the high level of affiliation with volunteer groups who have contributed to the work of vaccination or to coping with situations of need brought about by Covid-19, such as delivering groceries to elderly

people living alone or supporting families in difficult economic conditions by distributing meals and other basic necessities. Moreover, the Catholic Church and other Christian denominations have been on the front lines of this great social work. In this case, individualism or self-referential closure of social groups has not increased, but rather, important networks of solidarity have arisen and grown stronger. Research in Italy clearly attests that—contrary to prior expectations—generalized interpersonal trust grew stronger, not weaker, during the period of Covid-19 (Stanzani 2020).

## 5. Systemic trust

The third form of trust is *systemic trust*. Interpersonal trust (specific or generalized) always refers to personal credibility and therefore to the intentions and motivations of individuals; it therefore involves their dispositions and values. It always has some level of reflexivity, awareness, and risk calculation, and thus always expresses an option between trusting and not trusting.

The functioning of social systems is also—and perhaps especially—based on another type of trust, which Niklas Luhmann (1988, 2000) defines as ‘systemic trust’ or ‘confidence’. This is the trust—the unproblematic, non-reflexive trust—in the ability of a system or social institution—for example, the market, the social-healthcare system, or the justice system—to ‘function’ as expected. The functioning of these systems has an ‘inertial’ character, in that it is essentially trusted to automatic mechanisms and routines that can largely disregard the subjective attitudes and personal motivations of those involved. Thus, we trust without wondering too much about doctors’ abilities to cure us, teachers’ abilities to teach us, or government officials’ abilities to make good decisions. It does not matter who we have in front of us, as long as they fulfill their roles and duties as they are expected to. And if they are not there, there will be someone else who will do more or less the same thing: another teacher, another official, another doctor, or another healthcare worker.

For example, when we get on a bus, we not only trust the driver, whom we do not know, but also the company that manages public transportation, the urban road system, and all the roles connected to the functioning of this complex system. The driver may have the best intentions of getting us to our destination, but to do this he must be able (and us with him) to count on the fact that the bus is working properly, that the managers have assessed the vehicles’ performance, that the technicians have studied the routes in the best way possible, that the mechanics have done maintenance work, that the road system is organized in such a way as to favor the regularity of times, etc. The same thing happens when we go to the hospital or enroll a child in school.

However, systemic trust has been seriously put to the test by the Covid-19 emergency, especially in the first phase of it. In western countries with efficient social and healthcare systems, people expected everything to work as it should, so that there would be swab tests and masks for everyone, ambulances and emergency services would be efficient, there would be enough beds in hospitals and in intensive care in particular, ventilators would work, and doctors and healthcare workers would be competent and would know what to do. And after the vaccines were developed, people expected these vaccines to be available for everyone and that there would be

organizational structures capable of administering them quickly and efficiently. That is, people expected the organizational ‘machine’ to work as expected. In these cases, the most efficient national and regional social-healthcare systems showed great strength compared to countries and regional systems with more precarious and disorganized social-healthcare systems, such as those in different countries of the global south (see Petricone 2020). However, even in the best-organized systems, systemic trust has shown some limits. It has become clear (albeit to a greater or lesser extent depending on the different contexts) that systemic trust works in normal times—it is the ‘trust of normal times’—when everything goes as expected, and the cases that subvert this expectation are exceptional ones (and, precisely because of this, they become the subject of journalistic reporting). But systemic trust seems to work far less in emergencies or times of crisis when systems are under unexpected stress (although, as we have seen, these systems have responded differently to the emergency). There have been several instances of shortages of masks, ventilators, swab tests, and other tests. There were not enough beds, especially in the ICU, during times of peak crisis. And once vaccines were developed, we saw different levels of the vaccines’ availability in different countries around the world. Some countries (such as Israel) acquired vaccines much more quickly and vaccinated large swaths of their population earlier than other countries.

In a similar context, it turned out that systemic trust alone is not enough. We must necessarily go back to relying on interpersonal trust, on the ‘extra’ efforts of doctors and nurses who, as has often been said, went beyond what was humanly possible. The human factor, with human beings’ subjective motives and values, has therefore made a powerful return to the forefront. People’s ‘sacrifices’ are back at the center. The two aspects of interpersonal trust and systemic trust are therefore interwoven into the specific factors of people’s daily lives and situations, as the Covid-19 crisis has clearly revealed. Systemic trust in the working of functionally differentiated ‘organizational machines’ (such as the social-healthcare system) can never be separated from personal trust in the work of *that* doctor, *that* nurse, *that* teacher, *that* judge, or *that* specific person who performs *that* particular role. For systemic trust to work ‘it is both necessary that personal trust continues to be replicated and that various systems are capable of repaying our trust’ (Belardinelli 1997, 106, our translation). Times of crisis require an increase in personal and social ‘reflexivity’ (Donati 2011). For this reason, the solution to the crisis of trust lies in refocusing attention and public debate around the individual and collective ‘reasons’ for giving and receiving trust and on the aims and fundamental values of social action.

## **6. Trust in experts, politicians, and the media**

In the pandemic crisis, three figures/roles have been placed at the center of the trust-distrust processes, generating hopes and expectations, but also controversy and criticism: medical researchers and experts, political leaders, and information professionals.

### **6.1. Trust/distrust of experts**

An important form of stabilizing credibility-trust in complex and critical situations is through trust in experts and specialists. Faced with an unexpected and difficult-to-

understand event like Covid-19, individuals and small groups could not rely on their own cognitive resources or those available in the sphere of everyday relationships. They therefore had to place their trust in the wisdom of scientists and experts in the medical and healthcare fields.

The concept of ‘trust in science’ is in fact too undifferentiated, since the ‘science world’ has many different levels. In the specific case of Covid-19 we can speak of trust in science as a form of knowledge that is endowed with particular characteristics and methods and is embodied by particular institutions. We can also speak of trust in individual scientists or in specific groups of scientists that act in specific areas (medicine, food, environment, economy, etc.), and of trust in national or supranational organizations that preside over and regulate different sectors of science, especially applied science, in relation to public health (e.g. the World Health Organization - WHO, the U.S. Food and Drug Administration - FDA, the European Medicines Agency – EMA, etc.). This concept therefore ends up linking (often indistinctly) science, technology, politics, medicine, industry, consumption, law, ethics, culture, and social representations: all factors that intervene when people need to evaluate the professionals and institutions involved (Harbers 2004).

Second, people’s perceptions of and the representations of the Covid-19 threat and of the ‘responses’ of science and public institutions find themselves in a cultural climate that has not arisen suddenly but has been forming over the past few decades, from the 1970s to the present. This climate is characterized by deep ambivalence. On one hand, there is a widespread perception that we cannot do without medical science and its discoveries, as evidenced by the daily behavior of many millions of people who—activating unreflexive systemic trust—have few problems taking pills to control their blood pressure or diabetes. On the other hand, there is an ambivalent attitude toward healthcare researchers, especially those funded by the pharmaceutical industry or who have connections with it. This conditional trust does not seem irrational and baseless if one considers that the vast majority of funded research of top-selling drugs is sponsored by pharmaceutical industries, and even articles in scientific journals are often part of these companies’ marketing strategies (Eyal 2019, 44–53). Trust in national regulatory agencies also appears to be on the decline in recent decades (ibid, 50–53). Therefore, while it is not easy to measure ‘public trust in science’ there are many signs of an attitude that we might describe as one of simultaneous trust-distrust.

One particular area that is having a decisive impact on the outcomes of the fight against Covid-19 is population adherence to vaccination campaigns. For many people, the Covid vaccine is part of what we have called systemic trust in healthcare institutions and is an action that does not seem especially problematic, since it is part of a mental habitus that has been established for decades in a large part of the population. However, one cannot ignore an event that took place about twenty years ago, which has left its mark on the public perceptions of vaccine campaigns. In 1998, the prestigious journal *The Lancet* published a scientific article on the results of research conducted by the doctor and researcher Andrew Wakefield and other authors, which showed a link between the measles, mumps, and rubella vaccine and the onset of autism. Much later research revealed the erroneous and fraudulent nature of Wakefield’s study, which was financed by lawyers who dealt with cases related to alleged vaccine

damages. As a result, *The Lancet* withdrew the study and Wakefield was removed from the medical register in the U.K. This case is considered one of the biggest scandals in the field of biomedical research and one of the most serious examples of fake news ever created; but even after the official details about the reliability of the research, fear and distrust in vaccines have not been abated, vaccination rates have declined, and measles is once again a threat. However, what interests us in a reflection on trust is what emerged from an interesting sociological study conducted a few years later among parents with children of vaccination age in Great Britain (Brownlie and Howson 2005). Parents who feared vaccinating their children were not anti-vax fanatics but expressed concerns about making a responsible and prudent choice, arguing that even if there was ‘a very, very small percentage of risk’, they could not forgive themselves for having caused serious harm to their children. This type of argument burst back to the forefront regarding Covid-19 and the appropriateness of vaccination.

Faced with the objective complexity of the ‘medical’ problem of Covid-19 and the strategies to combat it, how have the national healthcare systems with their expert and scientific knowledge behaved? And how have regulatory agencies at the national and international level behaved? Have they fostered the formation of ‘rational’ policies of trust on the part of individuals, or have they left extensive room for vagueness and indecision?

Unfortunately, it has been observed that even at the highest institutional levels, committees of experts have frequently appeared to disagree with each other in their analyses of problems, risks, and possible solutions. At times they have also appeared to be at odds with themselves, radically changing their opinion on the strategies with which to confront the virus. Many of the errors and delays in dealing with the epidemiological crisis during the first ‘waves’ arose from the fact that the experts put forward completely different diagnoses and intervention strategies, going from a complete underestimation of the danger to an absolutely anxiety-inducing view that paralyzed every activity and social relation. There were also contradictory indications in the debate about the need to vaccinate twice with the same vaccine or about the possibility of using the ‘heterologous’ strategy. In this context, the choice between different and sometimes contradictory ‘expert opinions’ could not be based on any conclusive evidence. As a result, people often resorted to the realm of beliefs, preferences, or personalism. The often-well-founded suspicion towards the official narratives put forward by governments, institutions, and the media has not just involved minorities swept up in conspiracy culture or denial about the effectiveness and usefulness of vaccines, but has also extended to many who are usually willing to grant their trust without too many problems. Specifically, rather than strengthening trust in science—think of the extraordinary results of the research that led to the development of Covid vaccines in an extremely short amount of time compared to similar events in the past—the pandemic has also led to a lot of distrust because of the exhibition of the ‘backstage’ of scientific research, the ‘experts’ kitchen’, from which sometimes emerged inaccuracy, a lack of independence, collusion with political interests and governments, or strategies aimed at telling and not telling, revealing and hiding (Rebughini 2021, 120–121). On the other hand, the risk of ‘politicization of science’ in the public sphere is not a recent discovery (Gauchat 2012).

In terms of credibility, the relation between experts and laypersons is a complementary one, in the sense that one pole of the relation, the experts, is better equipped with resources (in this case, specialized knowledge) compared to the other pole, the large public body of ‘laypersons’. The credibility of the former arises precisely from the difference in cognitive resources. However, as many studies of social psychology have shown, this complementarity should not be polarized too much, because excessive distance creates rejection and resistance (McGuire 1985), and so it must be ‘corrected’ with elements of symmetry and reciprocity. In this case, the goal is a sharing of knowledge, a growth of generalized competence in citizens which can help bridge the gap between experts and laypersons (Hendriks, Kienhues, and Bromme 2016; Eyal 2019). However, this form of ‘translation’ cannot be entrusted to the individual and extemporaneous communication of particular experts but to an effective institutional communication of science that has often been lacking (Mangone 2021, 311).

Finally, it is necessary to highlight the essential role of family doctors or general practitioners, that is, the ones people rely on in their daily lives as essential ‘intermediaries’ and ‘dispensers’ of trust in the healthcare field. As is clear from the already-cited research of Brownlie and Howson (2005), faced with many people’s (even legitimate) resistance and fear, the role of those who can be defined as—to borrow a term from Katz and Lazarsfeld (1955)— ‘molecular’ or ‘horizontal opinion leaders’, seems relevant. Compared to the inevitable distance and distrust of ‘vertical opinion leaders’, that is, experts or policymakers who speak on television and in newspapers and whom people perceive as strangers or as distant, these doctors are instead able to perform a necessary mediation by virtue of their personal knowledge and daily practice with their patients. In this case too, the interpersonal trust relation appears decisive.

## **6.2. Trust/distrust of political leaders**

The credibility-trust relation, as seen in the first paragraph, is based on three roots or anchors that operate both in daily life and in political relations. The first root is knowledge and competence. The second is linked to the values one professes and concretely practices in one’s political activity. The third consists of attachment and affective bonding, which in politics is especially pronounced in the bond between leaders and followers (Gili and Panarari 2020).

The first root of credibility is competence. One believes someone because she knows and because of what she knows. As we have seen, this is typically the credibility of the *expert*, that is, someone who has a well-founded knowledge of the facts and problems and can therefore speak, as they say, ‘with full knowledge of the facts’. In addition to knowledge, expertise also includes *know-how*, that is, the ability to *apply* knowledge and take effective action. The superiority of experts compared to non-experts lies not so much in the amount of knowledge they possess, as in their ability to use it effectively. Even in policy, *knowing* and *knowing how* are crucial. However, the knowledge and skills required of politicians and experts are very different. In modern society, experts are characterized by their narrow, sector-specific competence. This is due to the growing division of labor and developments in science and technology that have led to increasingly narrow fields of expertise. Politicians generally lack this specialized



knowledge, and not even the most capable and educated political leaders can master all the historical, geographical, economic, legal, and medical knowledge that would be useful. Nonetheless, a political leader must be able to embrace and integrate information derived from the most diverse areas of knowledge. Compared to the expert, the policymaker may not have as much in-depth competence in various specific fields, but his or her competence must be more *generalized* and, above all, *capable of synthesis*. There is also a second important aspect: the difference between *knowing* and *deciding*. The expert can act as an ‘advisor to the prince’, but the expert is not called upon to decide. The political leader, on the other hand, is the one who is called upon to decide and take responsibility. Indeed, this is the main characteristic of his or her role: the one who is called upon to make decisions—including for others—and, not infrequently, in the presence of opposition and resistance from others (Nichols 2017).

Throughout the pandemic, there has been a complex dialectic in the relationship between politicians and experts. Sometimes politicians (such as Trump or Bolsonaro) have chosen to decide ‘despite’ and regardless of the experts’ advice. In other cases, politicians have given the impression that they do not know how to decide, hiding behind the experts. Nevertheless, although experts can (and should) say how the virus should be handled from a medical standpoint, they cannot say whether to keep schools or factories open, which social and productive categories are more fragile and should be supported, which policies or strategies should be put in place to deal with the social and economic crisis caused by the pandemic, or how to respond to people’s growing anxieties and maintain an acceptable level of social cohesion. In this case, many other factors are involved—economic, psychological, sociological, and cultural factors—which is why it is up to policymakers to evaluate the whole set of these factors, assuming the risk and responsibility of their choices.

But the credibility of politicians is also affected by the values that they profess and demonstrate with their behavior: political values, but also personal values (the second root of credibility). During the pandemic, a central personal value has been that of sincerity. Sincerity is closely related to moral honesty and has to do with the person’s *intentions*. Since, however, it is difficult to know people’s intentions as they are primarily manifested in their effects, people at least perceive as credible those who remain consistent with the idea of themselves that they have given to others (that is, those who offer others an image that corresponds to the expectations they have created over time with their behaviors) (Luhmann 2000). Being sincere also means holding fast to the commitments one has made and taking responsibility for the actions that such commitments imply. The word ‘responsibility’ can take on different meanings, but here we are mainly using it in the sense that Derrida describes. For the French philosopher, responsible action is only possible when one has to choose between two alternatives that one considers equal in value or interest. When the alternatives are clearly unbalanced, it is all too easy to choose one. No responsibility is in play. Responsibility is in play, rather, when there is a *sacrifice* and a trade-off, where one must sacrifice an alternative in which one still recognizes a good and an advantage (Derrida 2002). From this standpoint, a political leader appears credible when, for example, he makes a decision or launches programs that he knows could be unpopular and that could be costly in terms of approval, an alternative that is surely of great value to him, but which he



decides to forgo (at least for the moment) to pursue a goal or project that he considers more important. The opposite of sincerity (and of responsibility) consists of ‘opportunistic’ strategies (Bacharach and Gambetta 2001), which are often used in politics and which we have seen again during the Covid-19 emergency. Insincerity manifests itself first and foremost in the strategy of ‘doublespeak’ (Lutz 1989), that is, the use of language that dodges or denies responsibility on the part of the speaker. Consider, for example, the use of linguistic formulas in which the real subject of action disappears, so that certain events—especially negative ones—seem to happen by a spontaneous, mechanical, or fateful process, in which there is no specific responsibility. Finally, the last form of doublespeak is to use vague formulas or pure statements of principle to conceal decisions that citizens would not fully understand, or to say different things to different audiences. The impression that a politician is lying or not doing all that he or she is expected to do may be punished very harshly. In the recent U.S. election, Trump had a definite advantage because of the results of his economic and international policies, but, according to all observers, he paid for his handling of the first wave of the pandemic, which the majority of voters felt was reckless and inadequate. Even with values centered on personal freedom and self-determination, as is the case of the U.S. (Rothstein 2020), one cannot underestimate people’s sense of insecurity and fear for their own lives and the lives of their loved ones.

The third root of credibility is the affective root that links leaders to their followers. In emergencies and times of crisis, this root is manifested when politicians ‘get on the ground’, are among the people, and sympathetically participate in the suffering and struggle of their constituents. In addition to the effectiveness of the measures taken, a fundamental trait of a leader’s credibility is whether the people perceive their leaders as not shirking or just saving themselves, but as committing and risking themselves. They show a genuine concern for people and are committed to defending and protecting them.

These considerations lead us to wonder: when is the credibility of public figures most decisive? Undoubtedly, the credibility of a leader or a political group is especially challenged in certain situations. First of all, as Aristotle had already pointed out, a speaker’s credibility is particularly decisive when the recipient is (for objective or subjective reasons) not in a position to evaluate which action or strategy is more appropriate and expedient. The pandemic is one of those situations in which the citizens are rarely able to assess who is right and what should be done. Of course, this is not an invitation to follow politicians blindly and passively, since citizens should always seek to elevate their level of competence in the various topics about which they are called upon to make judgments and express their opinions. An incompetent citizenry is a danger to democracy, but it is also true that people are normally engaged in their professional activities and daily lives and thus have less time and energy to devote to public issues. They therefore rely on representatives by virtue of political support based on trust.

Secondly, credibility turns out to be more decisive when there is little time to decide. There are circumstances—such as the Covid-19 pandemic—in which immediate decisions must be made and the population must be mobilized: conditions for which the people must trust those who govern them. The dramatic and rapid spread of the pandemic has created a unique emergency framework that fostered a kind of ‘state of

exception’, or rather, the idea that the situation could not be handled with ordinary rules and timeframes but required rapid and exceptional rules and interventions. Even the governments of countries that underestimated the severity of the situation by endorsing (with the support of some in the media and in contrast to the opinions of scientists) falsely optimistic narratives about the pandemic, especially during the first wave (Hamilton and Safford 2020a, 2020b)—including the United States, Great Britain, and Brazil—have had to bitterly reconsider.

Thirdly, the credibility of leaders and management teams is crucial when verification of the soundness of their claims and promises cannot be conducted immediately but is only possible at a later date or under very different conditions from the present ones. This is typically the case when policies are implemented in the healthcare, economic, and social fields, the positive results of which will only be seen in the future. In the same way, a great deal of credibility is required when paths are designed or sacrifices are demanded to achieve a goal or benefit that will only accrue after a long time or, indeed, will affect future generations. From this standpoint, political action always contains (to a greater or lesser extent) a dimension of gamble and risk: the *gamble* that the premises posed by the action one is engaged in *today* can mature with a full and positive development; the *risk* associated with the fact that all this will take place at a time and due to circumstances that cannot be fully foreseen or calculated.

Finally, we must remember that a fundamental requirement of trust is its character of *reciprocity*. The credibility of any leader, government, or political institution will take on a concrete and specific form depending on the particular composition and balance of the three roots of credibility we have mentioned. It will be a unique composition that will depend on the different personal backgrounds, the different political traditions and cultures, and the different historical-social contexts in which these individual and collective subjects are called to act (in our case: the pandemic crisis). But there is also a fundamental condition of credibility and recognition—highlighted by Axel Honneth (1992), Honneth and Fraser (2003)—which takes on a much greater meaning and value today than it did in the past. Recognition cannot be *unilateral* and *asymmetrical*, from the base to the top and from the periphery to the center, but it must take on a character of *reciprocity*. The recognition that the political leader asks of citizens must be accompanied by the leader’s and government’s capacity to recognize the requests, demands, and needs of those who have placed their trust in them. This is a matter of fostering and cultivating processes of listening, feedback, and participation at all levels. In this case, it becomes even more evident that credibility-trust is a relation that only works if it goes in both directions. In the months of the pandemic, a sense of the reciprocity of the trust relation may have been lacking. The politicians had asked their citizens to trust them, but they did not always seem to be willing to give trust (Belardinelli and Gili 2020). And this, in the long run, may have weakened their credibility.

### **6.3. Trust/distrust of the media**

News about the pandemic has certainly changed position in the minds of millions of people. In the span of just a few weeks, such news went from the ‘peripheral route’ of

public attention (referring to something distant and ‘exotic’ that concerned a far-away region of China and that ‘would never have reached us’) to the ‘central route’ when this phenomenon and its consequences started to closely concern us (Petty and Cacioppo 1986). The news about the pandemic even ended up saturating the information world. In recent months we have witnessed a veritable flood of communication which, to borrow a concept from Rothkopf (2003), the World Health Organization has defined as an ‘infodemic’: ‘an overabundance of information – some accurate and some not – that makes it hard for people to find trustworthy sources and reliable guidance when they need it. ‘Infodemic’ refers to a large increase in the volume of information associated with a specific topic and whose growth can occur exponentially in a short period of time due to a specific incident, such as the current pandemic. In this situation, misinformation and rumors appear on the scene, along with manipulation of information with doubtful intent. In the information age, this phenomenon is amplified through social networks, spreading farther and faster like a virus’ (PAHO 2020).

This phenomenon was already seen twenty years ago (Rothkopf originally relates it to the SARS epidemic) and has fully unfolded with the Covid-19 pandemic, revealing three characteristics: (1) a phenomenon originally confined to one area of the planet enters the sphere of global communication; (2) it becomes the object of a discussion involving the traditional media, the internet, and—through social media—a huge mass of users, who are simultaneously recipients, producers, and reproducers of news; (3) this process leads to a series of global effects, primarily in the communicative sphere, but also in the economic, social, political, etc. spheres.

The concept of the infodemic has two layers of meaning. The first, more properly denotative, indicates an intense and accelerated circulation of information mainly thanks to the flow generated by billions of users connected to digital platforms. The second level, which is connotative, contains negative meaning related to the social and cultural damage that this phenomenon causes, since this magmatic flow circulates a lot of unverified and fake news (Colombo 2022). These include the pieces of news published by proponents of conspiracy theories who see the action of occult powers that operate in secret for world domination behind all the negative phenomena that afflict humanity (Imhoff and Bruder 2014; Pummerer et al. 2020).

In this sense, the emergence of the pandemic and infodemic has extended and exacerbated some structural features of the global communicative environment highlighted by Roger Silverstone (2007, ch. 1). The media environment is above all a ‘field of tensions’ in which large economic, political, and editorial groups clash and oppose one another, fighting to win over consumers and voters, and where extremists and violent positions also carve out their own space. The second characteristic is that this environment increasingly appears as a ‘space of cacophony’: an open space, but one that is also increasingly chaotic and fragmented and is subject to the greatest confusion.

Two main factors have contributed to shaping this cacophonous and conflict-ridden environment. The first is the disintermediation process that has been taking place in the field of communication for at least two decades. The internet and social media have offered all users—organized and disorganized, good and bad, presentable or unpresentable—the possibility of actively acting as broadcasters, opinion leaders, or influencers with more or less broad audiences or, simply, acting as a sounding board

for news, ideas, opinions, and judgments with the most diverse origins and natures (Maddalena and Gili 2020, 74–82). This therefore creates an enormous communicative flow that seems to defy any possibility of control (Meikle 2016; Larson 2020; Brennen et al. 2020; González Gaitano 2021).

However, a second aspect should also be considered. The infodemic is not only the result of the spontaneous and uncontrolled flow generated by the millions of networked users, but also of a cacophony of institutional voices and contradictory and sensational journalistic narratives that have ended up increasing public confusion rather than counteracting it (Lovari 2020; Pedroni 2020; González Gaitano 2021). At the very moment when there was the greatest need for clear information and reliable sources, institutional and mainstream media information proved inadequate, undermining citizens' trust in public institutions and the media (Giglietto et al. 2019).

In the face of such a situation, the pandemic has shown the urgent need, on the one hand, for accountability on the part of the large digital services (such as Google, Facebook, and Twitter) and on the other hand, for a greater capacity of public institutions and the mainstream media to propose serious and reliable 'public service' information (Colombo 2022; Lovari and Righetti 2021). Never has it been as true as it is now that the media are 'heavy artillery'—and so they must be handled carefully and responsibly.

## 7. Conclusion

People may be more or less trusting or suspicious. At the extremes of the trust-suspicion continuum we can identify the two opposite pathologies of credibility: *credulity*, which is unquestioning and unable to discern the credibility of an interlocutor or a source of communication in any way and, on the opposite end, that paranoid form of *generalized suspicion* that considers all communicative sources unsafe and unreliable. As we have seen, the pandemic emergency is certainly a borderline situation, and as such it can have significant effects on trust relations in one sense or another. In a situation as difficult to decipher as the one brought about by the pandemic, trust and distrust can be two equally rational strategies for dealing with uncertainty (Luhmann 1988, 2000). Moreover, they are two inseparable facets of the same attitude (Mollering 2006, 115–117; Eyal 2019, 58–60).

And yet we should not forget that trust is an indispensable resource because it is the spool that ceaselessly weaves the fabric of social life and, at the same time is a delicate and fragile resource, which spreads and strengthens if it is cultivated, but perishes if it is not defended and supported (Dasgupta 1988). From the relationships we have with those closest to us to the relationships we have with those most distant, or even with the most impersonal realities such as healthcare or political institutions, in the end, it is always a matter of trust. One can say, without fear of contradiction, that the quality of our social life (Donati and Maspero 2021) and the cohesion of our democratic society (Ankersmit and Te Velte 2004) largely depend on trust. Precisely for this reason it is important to know it, to cultivate it, and to be concerned when it is in short supply. Knowing it means above all being aware that it is not a resource that can be produced, so to speak, on demand. Trust is not the result of actions aimed directly at producing

trust; rather, it is a sort of valuable side effect of successful actions that have their specific purpose elsewhere. For example, love, friendship, a job done well and with passion, and efficient public institutions all create trust, but in a proper sense nobody will say that trust is their primary end. However, none of these relationships, as Covid-19 has revealed with extreme clarity, could work if (along with these specific ends) a good dose of mutual trust were not put into circulation between family members, friends, doctors and patients, providers and users of services, policymakers and citizens, and the media and the public. Trust is a resource that grows where relationships between people and relationships between people and institutions generally function well, while also making this good functioning possible, *even in crisis situations*.

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## References

- Ankersmit, F.R. and H. Te Velte, eds. 2004. *Trust: Cement of Democracy?* Leuven: Peeters.
- Bacharach, M., and D. Gambetta. 2001. "Trust in Signs." In *Trust in Society*, edited by K. S. Cook, 148–184. New York: Russell Sage.
- Balzarini, R. N., A. Muise, G. Zoppolat, A. Di Bartolomeo, D. L. Rodrigues, M. Alonso-Ferres, B. Urganci, et al. 2020. "Love in the Time of Covid: Perceived Partner Responsiveness Buffers People from Lover Relationship Quality Associated with Covid-Related Stressors." *PsyArXiv* May 16. doi:[10.31234/osf.io/e3fh4](https://doi.org/10.31234/osf.io/e3fh4).
- Beck, U. 1992. *Risk Society: Towards a New Modernity*. London: SAGE.
- Belardinelli, S. 1997. "La cultura della società civile." In *La società civile in Italia*, edited by P. Donati, 95–122. Milano: Mondadori.
- Belardinelli, S. 2018. *L'ordine di Babele. Le culture tra pluralismo e identità*. Soveria Mannelli (CZ): Rubbettino.

- Belardinelli, S., and G. Gili. 2020. "Fidarsi. Cinque forme di fiducia alla prova del Covid-19." *Mediascapes Journal* 15: 80–98.
- Bellani, D., and D. Vignoli. 2020. 'Does Love Laugh at Locksmiths? Partnership Quality During the Lockdown in Italy, France and Spain. Some Descriptive Findings'. *Cambio. Rivista delle trasformazioni sociali*. OpenLab on Covid-19, <http://oaj.fupress.net/index.php/cambio/openlab/art19>.
- Boccia Artieri, G. and M. Farci, eds. 2021. *Shockdown. Media, cultura, comunicazione e ricerca nella pandemia*. Milano: Meltemi.
- Bonini, T. 2021. "L'immaginazione sociologica e le conseguenze del Covid-19." In *Shockdown. Media, cultura, comunicazione e ricerca nella pandemia*, edited by G. Boccia Artieri and M. Farci, 69–84. Milano: Meltemi.
- Brennen, J. S., F. Simon, P. N. Howard, and R. K. Nielsen. 2020. "Types, Sources, and Claims of Covid-19 Misinformation." Reuters Institute. [Reutersinstitute.politics.ox.ac.uk/types-sources-and-claims-covid-19-misinformation](https://reutersinstitute.politics.ox.ac.uk/types-sources-and-claims-covid-19-misinformation).
- Broadbent, S. 2011. *L'intimité au travail. La vie privée et les communications personnelles dans l'entreprise*. Limoges: FYP Éditions.
- Brownlie, Julie, and Alexandra Howson. 2005. "Leaps of Faith and MMR: An Empirical Study of Trust." *Sociology* 39 (2): 221–239. doi:10.1177/0038038505050536.
- Christakis, N. A., and J. H. Fowler. 2009. *Connected: The Surprising Power of Our Social Networks and How They Shape Our Lives*. New York: Little, Brown & Co.
- Colombo, E., and P. Rebughini, eds. 2021. *Acrobati del presente. La vita quotidiana alla prova del lockdown*. Roma: Carocci.
- Colombo, F. 2022. "An Ecological Approach: The Infodemic, Pandemic, and Covid-19." In *The Covid-19 Pandemic as a Challenge for Media and Communication Studies*, edited by K. Kopecka-Piech and B. Lodzki, London: Routledge.
- Cook, K.S., ed. 2001. *Trust in Society*. New York: Russell Sage.
- Dasgupta, P. 1988. "Trust as a Commodity." In *Trust: Making and Breaking Cooperative Relations*, edited by D. Gambetta. Oxford: Blackwell.
- de Certeau, M. 2007. *La pratica del credere*. Milano: Medusa.
- Derrida, J. 2002. *The Gift of Death*. Chicago: University of Chicago Press.
- Donati, P. 2011. *Sociologia della riflessività. Come si entra nel dopo-moderno*. Bologna: Il Mulino.
- Donati, P. 2019. "Discovering the Relational Goods: Their Nature, Genesis and Effects." *International Review of Sociology* 29 (2): 238–259. doi:10.1080/03906701.2019.1619952.
- Donati, P., and G. Maspero. 2021. *Dopo la pandemia. Rigenerare la società con le relazioni*. Roma: Città Nuova.
- Dunn, J. 1988. "Trust and Political Agency." In *Trust: Making and Breaking Cooperative Relations* edited by Diego Gambetta. Oxford: Blackwell.
- Eiran, E. 2020. 'Coronavirus Outbreak: An Important Test for Globalization'. [www.ispionline.it/publicazione/coronavirus-outbreak-important-test-globalization-25372](http://www.ispionline.it/publicazione/coronavirus-outbreak-important-test-globalization-25372).
- Ellison, N. B., and d Boyd. 2013. "Sociality through Social Network Sites." In *The Oxford Handbook of Internet Studies*, edited by W. H. Dutton, 151–172. Oxford: Oxford University Press.
- Epstein, A. 1969. "The Network of Urban Social Organization." In *Social Networks in Urban Situations*, edited by J. C. Mitchell, 77–111. Manchester: Manchester University Press.
- Eyal, G. 2019. *The Crisis of Expertise*. Cambridge: Polity Press.
- Gambetta, D. 1988. "Can We Trust Trust?." In *Trust: Making and Breaking Cooperative Relations*, edited by D. Gambetta. Oxford: Blackwell.
- Gauchat, G. 2012. "Politicization of Science in the Public Sphere: A Study of Public Trust in the United States, 1974–2010." *American Sociological Review* 77 (2): 167–187. doi:10.1177/0003122412438225.
- Giglietto, Fabio, Laura Iannelli, Augusto Valeriani, and Luca Rossi. 2019. "Fake News is the Invention of a Liar: How False Information Circulates within the Hybrid News System." *Current Sociology* 67 (4): 625–642. doi:10.1177/0011392119837536.



- Gili, G. 2005. *La credibilità. Quando e perché la comunicazione ha successo*. Soveria Mannelli (CZ): Rubbettino.
- Gili, G., and M. Panarari. 2020. *La credibilità politica. Radici, forme, prospettive di un concetto inattuale*. Venezia: Marsilio.
- Giuntella, O., K. Hyde, S. Saccardo, and S. Sadoff. 2021. "Lifestyles and Mental Health Disruptions during Covid-19." *Proceedings of the National Academy of Sciences* 118 (9): e2016632118. doi:10.1073/pnas.2016632118.
- Goffman, E. 1959. *The Presentation of Self in Everyday Life*. New York: Doubleday Anchor Books.
- Goffman, E. 1969. *Strategic Interaction*. Philadelphia: University of Pennsylvania Press.
- González Gaitano, N. 2021. "How Is Covid Being Broadcasted to Us? Some Insights from Our Point of View." *Family and Media*, 19 January. Accessed 15 July 2021. <https://familyandmedia.eu/en/media-education/how-is-covid-being-broadcasted-to-us-some-insights-from-our-point-of-view/>
- Granovetter, M. 1973. "The Strength of Weak Ties." *American Journal of Sociology* 78 (6): 1360–1380. doi:10.1086/225469.
- Hall, E. 1959. *The Silent Language*. Garden City NY: Doubleday.
- Hall, E. 1966. *The Hidden Dimension*. Garden City NY: Doubleday.
- Hamilton, L. C., and T. G. Safford. 2020a. *Ideology Affects Trust in Science Agencies during a Pandemic*. Durham NH: Carsey School of Public Policy. <http://scholars.unh.edu/carsey/391>.
- Hamilton, L. C., and T. G. Safford. 2020b. *Trusting Scientists more than the Government: New Hampshire Perception of the Pandemic*. Durham NH: Carsey School of Public Policy. <http://scholars.unh.edu/carsey/401>.
- Harbers, H. 2004. "Trust in Politics, Science and Technology: Breaching of the Modernist Constitution." In *Trust: Cement of Democracy?* edited by F. R. Ankersmit and H. Te Velte. Leuven: Peeters.
- Hendriks, F., D. Kienhues, and R. Bromme. 2016. "Trust in Science and the Science of Trust." In *Trust and Communication in a Digitized World*, edited by B. Blobaum. Switzerland: Springer International Publishing.
- Homans, G. 1950. *The Human Group*. New York: Harcourt Brace & World.
- Honneth, A. 1992. *Kampf und Anerkennung*. Frankfurt am Main: Suhrkamp.
- Honneth, A., and N. Fraser. 2003. *Umverteilung oder Anerkennung*. Frankfurt am Main: Suhrkamp.
- Imhoff, R., and M. Bruder. 2014. "Speaking (Un-)Truth to Power: Conspiracy Mentality as a Generalized Political Attitude." *European Journal of Personality* 28 (1): 25–43. doi:10.1002/per.1930.
- Katz, E., and P. Lazarsfeld. 1955. *Personal Influence*. Glencoe IL: The Free Press.
- Larson, H. J. 2020. "Blocking Information on Covid-19 Can Fuel the Spread of Misinformation." *Nature* 580 (7803): 306–306. doi:10.1038/d41586-020-00920-w.
- Liu, Y.-L. 2020. "Is Covid-19 Changing Our Relationships?" *BBC Future*, 5 June. <https://www.bbc.com/future/article/20200601-how-is-covid-19-is-affecting-relationships>.
- Lovari, A. 2020. "Spreading (Dis)Trust. Covid-19 Misinformation and Government Intervention in Italy." *Media and Communication* 8 (2): 458–461. doi:10.17645/mac.v8i2.3219.
- Lovari, A., and N. Righetti. 2021. "La comunicazione pubblica della salute alla sfida dell'infodemia e delle fake news." In *Shockdown. Media, cultura, comunicazione e ricerca nella pandemia*, edited by G. Boccia Artieri and M. Farci, 321–341. Milano: Meltemi.
- Luhmann, N. 1988. "Familiarity, Confidence, Trust. Problems and Alternatives." In *Trust: Making and Breaking Cooperative Relations*, edited by D. Gambetta. Oxford: Blackwell.
- Luhmann, N. 2000. *Vertrauen. Ein Mechanismus der Reduktion sozialer Komplexität*. Stuttgart: Lucius & Lucius.
- Lutz, W. 1989. *Doublespeak*. New York: Harper & Row.
- Maddalena, G., and G. Gili. 2020. *The History and Theory of Post-Truth Communication*. London: Palgrave Macmillan.



- Mangone, E. 2021. "Le strategie della comunicazione del rischio di fronte alla pandemia da Covid-19." In *Shockdown. Media, cultura, comunicazione e ricerca nella pandemia*, edited by G. Boccia Artieri and M. Farci, 301–315. Milano: Meltemi
- McGuire, W. J. 1985. "Attitude and Attitude Change." In *Handbook of Social Psychology*, edited by G. Lindzey and E. Aronson, Vol.2, 233–246. New York: Random House.
- McLuhan, M., and B. R. Powers. 1989. *The Global Village*. New York-Oxford: Oxford University Press.
- Meikle, G. 2016. *Social Media. Communication, Sharing and Visibility*. London: Routledge.
- Mollering, G. 2006. *Trust: Reason, Routine, Reflexivity*. Amsterdam: Elsevier.
- Mutti, A. 2003. "La teoria della fiducia nelle ricerche sul capitale sociale." *Rassegna Italiana di Sociologia* 4: 515–536.
- Nichols, T. 2017. *The Death of Expertise*. New York: Oxford University Press.
- O'Neill, O. 2002. *A Question of Trust*. Cambridge: Cambridge University Press.
- PAHO – Pan American Health Organization. 2020. "Understanding the Infodemic and Disinformation in the Fight against Covid-19." Pan American Health Organization. World Health Organization. Factsheet N. 5. [https://iris.paho.org/bitstream/handle/10665.2/52052/Factsheet-infodemic\\_eng.pdf](https://iris.paho.org/bitstream/handle/10665.2/52052/Factsheet-infodemic_eng.pdf).
- Pedroni, M. 2020. "Narrazioni virali. Decostruire (e ricostruire) il racconto dell'emergenza Coronavirus." *Mediascapes Journal* 15: 24–43. <https://rosa.uniroma1.it/rosa03/mediascapes/article/view/16765>.
- Petricone, F. 2020. *Mind the queue! Esperienze di Coronavirus nel mondo nella prima fase della pandemia*. Milano: Mimesis.
- Petty, R. E., and J. T. Cacioppo. 1986. *Communication and Persuasion*. New York: Springer.
- Pummerer, L., R. Böhm, L. Lilleholt, K. Winter, I. Zettler, and K. Sassenberg. 2020. "Conspiracy Theories and Their Societal Effects during the COVID-19 Pandemic." *PsyArXiv* April 14. doi:10.31234/osf.io/y5grn.
- Rainie, L., and B. Wellman. 2012. *Networked. The New Social Operating System*. Cambridge, MA: MIT Press.
- Rebughini, P. 2021. "Natura-cultura: Narrazione della crisi ambientale durante la pandemia." In *Acrobati del presente. La vita quotidiana alla prova del lockdown*, edited by F. Colombo and P. Rebughini, 117–137. Roma: Carocci.
- Roniger, L. 1992. *La fiducia nelle società moderne: un approccio comparativo*. Soveria Mannelli (CZ): Rubbettino.
- Rothkopf, D. J. 2003. "When the Buzz Bites Back." *Washington Post*, May 11. Retrieved from <https://www.washingtonpost.com/archive/opinions/2003/05/11/when-the-buzz-bites-back/bc8cd84f-cab6-4648-bf58-0277261af6cd/>
- Rothstein, M. A. 2020. "The Coronavirus Pandemic: Public Health and American Values." *The Journal of Law, Medicine & Ethics* 48 (2): 354–359. doi:10.1177/1073110520935350.
- Silverstone, R. 2007. *Media and Morality: On the Rise of the Mediapolis*. London: Polity Press.
- Solito, L., and C. Sorrentino. 2021. "Dalla distanza sociale alle relazioni orizzontali. Appunti per un domani ormai alle porte." In *Shockdown. Media, cultura, comunicazione e ricerca nella pandemia*, edited by G. Boccia Artieri and M. Farci, 51–68. Milano: Meltemi
- Stanzani, S. 2020. "Trust and Civic Engagement in the Italian Covid-19 Lockdown." *Italian Sociological Review* 10 (3S): 917–935. doi:10.13136/isr.v10i3s.405.
- Torales, J., M. O'Higgins, J. M. Castaldelli-Maia, and A. Ventriglio. 2020. "The Outbreak of Covid-19 Coronavirus and Its Impact on Global Mental Health." *International Journal of Social Psychiatry* 66 (4): 317–320. doi:10.1177/0020764915212.
- Thompson, J. B. 1995. *The Media and Modernity. A Social Theory of the Media*. Cambridge: Polity Press.
- Uslaner, E. M. 2002. *The Moral Foundations of Trust*. Cambridge: Cambridge University Press.
- von Wiese, L. 1959. *Philosophie und Soziologie*. Berlin: Duncker & Humbolt.
- Wellman, B. 2001. "The Rise of Networked Individualism." In *Community Network Online*, edited by L. Keeble. London: Taylor & Francis.

- Wellman, B. 2002. "Little Boxes, Glocalization and Networked Individualism." In *Digital Cities II: Computational and Sociological Approaches*, edited by M. Tanabe, P. van den Besselaar and T. Ishida, 10–25. Berlin: Springer.
- World Health Organization. "Managing the COVID-19 Infodemic: Promoting Healthy Behaviours and Mitigating the Harm from Misinformation and Disinformation.: Joint statement by WHO, UN, Unicef, UNDP, UNESCO, UNAIDS, ITU, UN Global Pulse. I. F. R. C." Accessed 2020. <https://www.who.int/news/item/23-09-2020-managing-the-covid-19-info-demic-promoting-healthy-behaviours-and-mitigating-the-harm-from-misinformation-and-disinformation>.