

XVIII INTERNATIONAL CONFERENCE DAYS OF APPLIED PSYCHOLOGY

CURRENT CHALLENGES IN PSYCHOLOGICAL SCIENCE

BOOK OF ABSTRACTS

Niš, Serbia 23rd and 24th September, 2022



Organized by

Department of Psychology, University of Niš



DAYS OF APPLIED PSYCHOLOGY





DOI: https://doi.org/10.46630/abdpp.2022

Department of Psychology, Faculty of Philosophy, University of Niš, Serbia

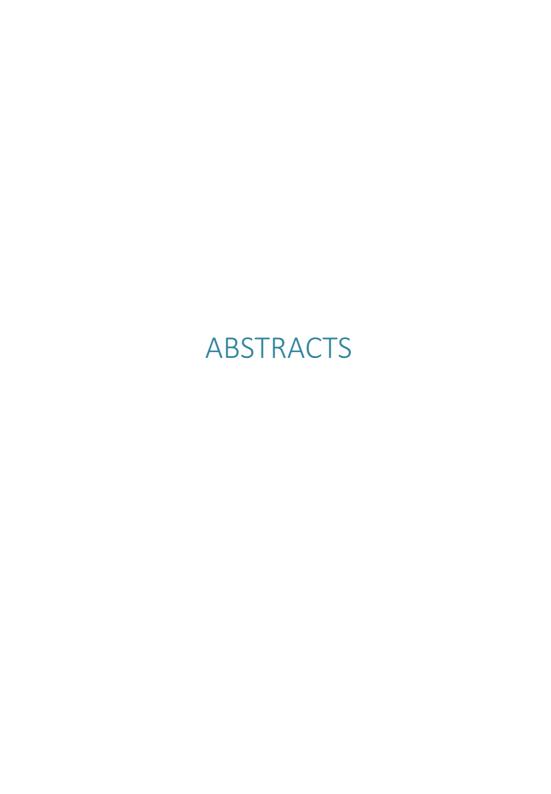
18th International Conference DAYS OF APPLIED PSYCHOLOGY 2022

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Thematic Session Protective Behaviours during the COVID-19 Pandemic

shows that the model is statistically significant ($R^2 = .350$, F(3, 307) = 55.010, p < .01) in the second block when interactive effect of trust in official medicine and trust in the health-care system was introduced ($\beta = .121$, p < .05). The results suggest that with the increase of trust in official medicine the more positive are youths' attitudes toward vaccination ($\beta = .493$, p < .01), yet in people with higher levels of trust in the health-care system this relationship was stronger. In other words, in the conditions of low trust in official medicine the youths' attitudes are steadily negative, no matter the level of trust in the health-care system. Meanwhile, in the conditions of high levels of trust in official medicine the ones who have also higher levels of trust in the health-care system have significantly more positive attitudes than those with lower levels of trust in the health-care system. The theoretical and practical implications of these results will be discussed.

Keywords: institutional trust, trust in health system, trust in official modern medicine, attitudes towards COVID-19 vaccination, youth

INSTITUTIONAL TRUST AS A MODERATOR OF RELATION BETWEEN FEAR OF GETTING INFECTED AND ADHERENCE TO PRECAUTIONARY MEASURES DURING COVID-19 PANDEMIC

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The aim of this research is to test the moderating effect that institutional trust (in government and healthcare system) has in the relationship between fear of getting infected and adherence to precautionary measures during COVID-19 pandemic. In April 2020, 1387 (82.6% female) participants took part in this online-research, with an age ranging from 18 to 85 (M = 37.00, SD = 12.62). All variables were measured on one-item scale. Hierarchical regression analysis indicated that the model was statistically significant in the second block, when interaction between the trust in healthcare system and fear of getting infected was introduced (R^2)

= .067, F(1, 1383) = 5.533, p = .019), while this statistical significance was not registered when the interaction between the trust in government and fear of getting infected was introduced (R^2 = .057, F(1, 1383) = 2.287, p = .131). Significant main effects of fear of getting infected (β = .221, p < .01) and trust in government were registered ($\beta = .071$, p < .01), while their interactive effect was not $(\beta = -.040, p = .131)$. So, the greater the fear of getting infected and the greater the trust in the government, the respondents report greater adherence to precautionary measures. In terms of trust in healthcare system, a significant main effects of trust in the healthcare system (β = .107, p < .01) and fear of getting infected (β = .219, p < .01) were registered, as well as their interactive effect (β = -.062, p < .05). People with low trust in healthcare system in conditions of low fear of getting infected adhere less to measures than persons who have greater trust in the healthcare system. When people fear more, they are increasingly adhering to precautionary measures, regardless of the level of trust in the healthcare system.

Keywords: institutional trust, fear of getting infected, precautionary measures, COVID-19

DAYS OF APPLIED PSYCHOLOGY

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Publisher Faculty of Philosophy, University of Niš

For the publisher Natalija Jovanović PhD, Professor, Dean of the Faculty of Philosophy, University of Niš

The Faculty of Philosophy Publishing Unit Editor-in-chief Sanja Ignjatović, PhD

Fditors

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> Production Faculty of Philosophy Niš

> > Copies 50 CDs

Prepress Darko Jovanović CIP - Каталогизација у публикацији Народна библиотека Србије, Београд

159.9(048)(0.034.2)

INTERNATIONAL Conference Days of Applied Psychology (18; 2022; Niš)

Current challenges in psychological science [Elektron-

ski izvor]: book of abstracts / 18th International Conference Days of Applied Psychology 2022, Niš, Serbia, September 23rd-24th 2022.; [organised by] University of Niš, Faculty of Philosophy, Department of Psychology

of Niš, Faculty of Philosophy, Department of Psychology; [editors Ivana Pedović, Miloš Stojadinović]. - Niš: Faculty of Philosophy, University, 2022 (Niš: Faculty of Philosophy). - 1 elektronski optički disk (CD-ROM); 12 cm

Sistemski zahtevi : Nisu navedeni. - Nasl. sa naslovne strane dokumenta. - Tiraž 50. - Napomene uz apstrakte.

ISBN 978-86-7379-605-5

а) Примењена психологија -- Апстракти

COBISS.SR-ID 75248393