

As Predicted: "Beliefs, Information and anti-corruption durin COVID-19" (#60725)

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1) Have any data been collected for this study already?

No, no data have been collected for this study yet.

2) What's the main question being asked or hypothesis being tested in this study?

We will conduct an online experiment involving 2000 Indian men. Our research questions are:

- 1) Do beliefs about others' willingness to act against corruption matter for individuals' decision to act? Does correcting misaligned beliefs affect one's decision to act?
- 2) Does providing information about corruption in the health sector during COVID19 increase individuals' willingness to act?
- 3) Do beliefs about others and information about corruption complement or substitute each other in the decision to act against corruption ?
- 4) Given that different anti-corruption actions have different individual costs, what action is more likely to be taken up? Signing a petition (high visibility cost), making a donation (monetary cost), or information gathering (high time cost)?
- 5) Is it better to give individuals a choice between different anti-corruption actions, or just ask them to take part in one given action?

3) Describe the key dependent variable(s) specifying how they will be measured.

The primary output variable is the decision to "act" (following the completion of the survey) by either signing a petition, making a donation or watching an information video.

4) How many and which conditions will participants be assigned to?

We will have 4 between-subject treatment conditions, with sample sizes in parentheses. In particular:

- 1) Baseline (400): Survey, followed by decision to act;
- 2) T2: Information (400): Survey, inclusive of an informational video about corruption in health, followed by decision to act;
- 3) T3: Belief correction (400): Survey, inclusive of information about others' willingness to act against corruption, followed by decision to act;
- 4) T4: Information + Belief correction (400): Survey, inclusive of information about corruption and others' willingness to act, followed by decision to act.

Within each treatment, we will also have 4 sub-treatments, varying the type of anti-corruption action subjects could engage in at the end of the survey: a) petition (400); b) donation (400); c) video (400); 4) Choice between petition, donation, and video (400). We will recruit 1600 participants in total. A different set of 400 men will participate in a survey prior to the main study, to generate the data that we will use to incentivize the elicitation of beliefs in our main study.

5) Specify exactly which analyses you will conduct to examine the main question/hypothesis.

We will use linear regression analysis. We will start by regressing the dependent variable on three treatment dummies (T2, T3 and T4), with T1 being the excluded benchmark condition. We will control for demographics, individual preferences related to risk-taking, trust and retaliatory behavior. We will then add: i) individual experiences of corruption in the health sector during COVID, ii) information about and attitudes toward such corruption, iii) past activism and civic engagement. We will start by examining each "action" (petition, donation, video) separately. We will then pool the data and include dummy variables for the petition, donation and video conditions, with the condition given subjects a choice being the excluded category. Our most comprehensive analysis will include interactions between our main treatments (T2, T3 and T4) and our action choices (petition,

donation, video).

6) Describe exactly how outliers will be defined and handled, and your precise rule(s) for excluding observations.

We have included comprehension questions to check whether subjects kept focus for the duration of the survey. We anticipate conducting robustness checks excluding subjects who failed the comprehension questions or who attempted them multiple times.

7) How many observations will be collected or what will determine sample size?

No need to justify decision, but be precise about exactly how the number will be determined.

1600 Indian men recruited through Qualtrics. Due to the novelty of our research question and the setting under study, we were unable to conduct power calculations. Due to budget constraints, we cannot include more than 1600 participants in the study.

8) Anything else you would like to pre-register?

(e.g., secondary analyses, variables collected for exploratory purposes, unusual analyses planned?)

We will conduct explanatory analyses of heterogeneous treatment effects. We will look at survey measures of: wealth, baseline activism, baseline attitudes toward corruption, baseline information about corruption in health, baseline individual preferences.

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