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Transformation all the way down? European Union integration and the professional socialisation of municipal health officials in Serbia

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Transformation all the way down? European Union integration and the professional socialization of municipal health officials in Serbia*

Abstract:

This article assesses whether different types of exposure to European Union (EU) modes of socialization are associated with differences in attitudes towards corruption by using Serbia as case study. Drawing on a survey of Serbian municipal healthcare officials, the article complements existing research on the impact of EU conditionality on attitudes at the national level, whilst also contributing to understanding of the impact of domestic variables on Europeanization. Indeed, the article's contribution to the wider literature is to interrogate the premise that in order to deliver substantive reform, attitudes and practices need changing via exposure to EU tutelage and processes. Our data suggest that the *type* of interaction that officials have with the EU and its processes matters. Whilst those involved in EU harmonisation activities were significantly more critical of clientelist behaviours, there is no significant association between attitudes and doing EU-related daily work or attending EU trainings.

Keywords: corruption; socialization; Europeanization; European Union; Serbia.

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Introduction

What is the impact of the European Union (EU) enlargement process on public administration at the local level in candidate countries? Drawing on a survey of municipal healthcare officials in Serbia, the article contributes to understanding the impact of domestic variables and ‘legacies of deep conditions’ (Cirtautas and Schimmelfennig, 2010; Elbasani, 2013). In contrast to existing studies on the Europeanization of public administration in post-communist settings, which typically assess the impact of conditionality at state/country level (Caymar, 2010; Dimitrova, 2005), we focus on municipal-level officials and ask whether exposure to EU processes and training is transforming attitudes to corruption amongst healthcare professionals at the local level.

The article’s contribution to the wider literature on Europeanization is to challenge the premise that in order to deliver substantive reform, attitudes and practices need changing via exposure to EU tutelage and processes. Our findings suggest that the type of interaction that officials have with the EU and its processes matters, thereby questioning the extent to which the persistence of corrupt practices can be simply attributed to a lack of successful socialization or training.

The article proceeds as follows: the first two sections develop a conceptual framework for the study. The first focuses more generally on Europeanization and how the EU has approached bureaucratic reform in candidate countries. The second section describes how corruption can be conceptualised, particularly the distinction between bribery and gift-giving, and summarises EU socialization instruments. This is then followed by a brief background of the case of corruption in the healthcare sector in Serbia. The fourth section will describe the survey data (collected in November 2015) from municipal-level Serbian officials responsible for healthcare decision-making, followed by analyses of these data.

Europeanization and the challenge of corruption

The development of administrative capacity has long been recognised as a key condition for EU membership (Dimitrova, 2002). Yet, despite a broad acknowledgement of the complexities in driving forth behavioural change ‘on the ground’ (Elbasani, 2013), formal institutional change such as the adoption and revision of civil service laws is much emphasised (Dimitrova, 2005). Whilst sceptics point to problems of ‘shallow Europeanization’ due to the failure of enlargement countries to properly implement the new formal rules (Goetz, 2005), or the risk of post-accession backsliding (Fink-Hafner, 2014; Meyer-Sahling, 2011), little attempt has been made to study how and whether interaction with EU rules and processes affects the attitudes and behaviours of officials, particularly at municipal or local levels where policy implementation actually takes place.

Given widely-voiced concerns about levels of corruption across the Western Balkans, and the recognised importance of improving the quality of public bureaucracy as a strategy for combating such corruption (Cardona, 1999; Tanzi, 1998; Treisman, 2000), gauging the impact of Europeanization on local bureaucracies and sub-national authorities is critical. Yet much of the existing literature is still focused on top-down institutions, the implementations of new laws and procedures, and the degree of compliance with new formal rules (Börzel, et al., 2017; Mendelski, 2012). In this article, we offer an alternative perspective for studying bureaucratic reform and anti-corruption that shifts the focus away from the national level to individual-level data from surveys of health officials in Serbian municipalities. We rely on the approach used by Meyer-Sahling et al. (2016), in which differences in attitudes towards ‘good’ (e.g., meritocratic) behaviours conditioned on exposure to EU modes of socialization provides evidence of Europeanization / professionalization.

At first glance, subnational governments have few formal competences related to the EU in member and candidate countries. Yet a considerable scholarly literature has emerged since the 1990s focusing on the impact of Europeanization at the local and regional levels (Barbehön, 2016; Benz and Eberlein, 1999; De Rooij, 2002). However, across EU member countries, there exists considerable variation between proactive and counteractive municipalities (Balme and Le Galès, 1997; Risse, et al., 2001). Moreover, there is little evidence to suggest that as European integration increases, subnational authorities take advantage of the opportunities for transnational networking and uploading of local preferences. Indeed, the financial crisis of 2008 and the decade of austerity seems to have led to a decline of Europeanization at the local level across member states (Guderjan, 2012; Huggins, 2018). Where subnational authorities respond to Europeanization by engaging in transnational networks, this enables access to more specialised and policy-specific knowhow (Huggins, 2018) and can assist socio-economic development (De Rooij, 2002). It thus makes sense, when studying the impact of Europeanization in candidate countries of the Western Balkans, to focus on the socialization and behaviour of local bureaucracies, irrespective of how much power is devolved from the centre.

Although our research focus is on one country and a particular sector, we believe the findings have considerably wider resonance.

The strongest policy instrument available to the EU is the ‘golden carrot’ of eventual full membership in exchange for fundamental democratic, market-economic, and human rights reforms, yet this conditionality is not a sufficient driver of fundamental reform. The EU also uses an array of instruments designed to harmonise norms and practices through socialization, such as trainings. In tandem, the hope is that such interventions will transform behaviours as well as institutions; deliver new modes of governance as well as policy preferences. Focusing on Serbia, a front-runner in accession terms, but a country still plagued

by allegations of corruption (Zurnić, 2019), provides a powerful optic on the exacting nature of the EU's challenge. Moreover, using municipal healthcare professionals as a case study is particularly illustrative insofar as access to resources is highly prized, there is much scope for discretion, and considerable potential for malfeasance.

The 'new approach' to EU enlargement, started in 2011 before opening accession negotiations in Serbia (and in Montenegro), prioritises accession chapters related to the rule of law, which are open first and closed last during accession negotiations (EC, 2011; Nozar, 2012). The change in approach was in response to unresolved rule-of-law shortcomings and post-accession monitoring related to Romanian and Bulgarian accession. Serbian accession negotiations opened in early 2014. At around the same time, the follow-up to the 2007-2013 EU Instrument for Pre-Accession Assistance (IPA), known as "IPA II", focuses on a set of vital cross-cutting sectors in the Western Balkans and Turkey, one of which is public administration reform.

Crucially, the EU also focuses on tackling corruption and building the rule of law in non-enlargement countries: good governance, the rule of law, and human rights comprise one of the key pillars of the European Neighbourhood Policy designed to establish associations without a membership perspective (EEAS, 2015). The EU also situates itself as a 'global normative actor' that will strive to tackle corruption and other pressing issues further afield (EEAS, 2016).

To explore whether exposure to EU socialization is associated with differences in attitudes towards clientelist behaviour, we focus on the case of local decision-makers in Serbia. Serbia is a particularly interesting case to find evidence for EU socialization. On the one hand, Serbia has a higher level of regulation and technical expertise compared with its Western Balkans neighbours. On the other hand, the recent history of conflict, the legacy of

authoritarianism, and the resulting endemic forms of clientelism and informality potentially provide a challenge for EU instruments of socialization (Subotić, 2010).

Tackling Corruption through Socialization

Counter to the oft-quoted definition of corruption as ‘the abuse of entrusted power for private gain’ (Transparency International, nd), Kurer (2015) proposes a ‘public opinion standard’, since there is cross-national consensus (from survey data) that certain acts are wrong. It is for this reason that relying on scenarios using survey data in the current study is a good way of detecting corruption.

In post-socialist settings, informal payments before and after medical treatment are recognised differently (Stepurko, et al., 2013), with the former seen as unethical (Grødeland, 2013). If the patient initiates an informal payment spontaneously, it is a form of gratitude; if the patient offers payment as a way of manipulating the treatment, it is a form of corruption (Manea, 2015).

To combat corrupt practices, international actors can implement a programme of socialization (Checkel, 2005), necessitating a shift in the agent’s underlying understandings (in, for example, a post-socialist setting) from a logic of consequences to a logic of appropriateness (Checkel, 2005). Applied to Europeanization via enlargement, this means that external incentives driving reforms using conditionality are replaced by processes of social learning (Schimmelfennig and Sedelmeier, 2005). Although the EU employs extensive conditionality, alongside financial and technical assistance, the socialization impact of Europeanization is limited, since moral values are formed at a more formative stage and thus determined domestically rather than through supra-national exposure (Hooghe, 2005). This article focuses on the healthcare sector, which is neither in the most Europeanised ‘inner core’ sectors nor the ‘outermost circle’ (Laffan and O’Mahoney, 2007), but rather in a set of policy areas with intermediate levels of Europeanization (Meyer-Sahling and Van Stolk,

2015), so our results will not under-estimate or over-estimate the differences between local officials exposed and not exposed to EU work. The healthcare sector is also chosen since corruption across the region is particularly salient in this area (Chipman, 2016; Rujevic, 2018).

What the extant literature also highlights is that the EU has means of influence beyond conditionality, particularly these forms of leverage and linkage. Kartal (2014) finds that EU support for the opposition in candidate countries has a much stronger positive effect on anti-corruption reforms compared with conditionality. However, this leverage is weakened after accession. Moreover, anti-corruption institutions during the accession process are often established and controlled by elites benefitting from state capture (Innes, 2014; Mungiu, 2006). On the other hand, Levitz and Pop-Eleches (2010) find that despite weakened post-accession leverage, channels of linkage, such as travel and migration, are associated positively with control of corruption. These channels of linkage are vital for the current study, particularly the modes of EU socialization outlined above, since this suggests ways that actors in external countries can be socialised *independently* of membership conditionality.

The above suggests that it is not sufficient to focus on institutional design in order to transmit European good practice, but rather a more nuanced understanding of domestic power relations and expectations of actors involved (Belloni and Strazzari, 2014). Putting this together, this article examines whether different *types* of EU exposure ('linkage') trigger differences in attitudes, which in turn affect changes in behaviours following a logic of appropriateness. For Checkel (2005), linkage can trigger socialization via various mechanisms. 'Normative suasion' connotes full internalization, evidenced by closely following norms without intensive intervention ('EU work'). Another mechanism is 'persuasion', whereby the socializer convinces the socialized to change through rational deliberation ('tutelage'). Finally, 'role playing' occurs when following along with

behaviours from the socializer without necessarily internalizing them (Checkel 2005), and is more likely when the engagement with the socializer is sustained ('reception-related activities'). The extant literature also looks at reform through EU conditionality or supporting the opposition ('leverage') posits that local elites change behaviours in response to a rational calculation, that is, a logic of consequences ('strategic calculation' in Checkel [2005]).

We are particularly interested in operationalising the aforementioned types of contact with the EU and Europeanization, and explore how these different types of EU exposure affect local attitudes towards corruption, which are related to changes in local behaviours and norms. Since we are looking at municipal-level officials, previous studies on uploading versus downloading (Börzel, 2002) or reception versus projection (Bulmer and Burch, 2009) are not directly relevant, since local officials in candidate and potential candidate countries have no scope to 'project' or 'upload' policy preferences in candidate and potential countries. Moreover, the fundamental difference between Eastern enlargement and Europeanization amongst existing Member States is that the former involves little uploading even at the national level (Grabbe, 2006; Héritier, 2005). However, the more recent studies on EU accession provide a useful distinction between different strategies for engagement with the EU: pre-accession tutelage ('training') from hands-on intervention (Bomberg, 2007; Fagan and Sircar, 2015; Papadimitriou and Phinnemore, 2004); and 'silent professionalization' through day-to-day engagement with EU policies ('EU work') or through policy harmonisation ('reception') (Meyer-Sahling, et al., 2016). These are the three types of EU exposure that we will explore in the analysis, all of which have been shown to be significantly associated with changing attitudes towards integrity and corruption. However, the aforementioned research does not distinguish whether any of these types of socialization are more effective in triggering attitudinal change.

Drawing on the findings from the extant literature on EU socialization and Europeanization, our two main research hypotheses are:

- *H1: Local municipal officials in enlargement countries tend to condone clientelist behaviours.*
- *H2: EU exposure is associated with attitudes less accepting of clientelist behaviour by municipal officials, with tutelage, EU work, and reception-related modes of socialization all significantly related to attitudes.*

Before proceeding with the analysis, it is instructive to first provide background on corruption in Serbian healthcare.

Corruption in the Healthcare Sector in Serbia

Serbia faces a stern challenge in its fight against corruption, similar to other post-socialist and post-conflict societies (Van Duyne, et al., 2010). Serbian citizens consistently identify corruption as one of the top-three problems plaguing the country, alongside unemployment and poverty (CLDS, 2014; UNDP, 2014; UNODC, 2011). In a 2014 survey, 82 per cent believe that they will be subject to corruption pressure, and more worryingly, 38 per cent condone and 33 per cent would partake in corrupt behaviour (CLDS, 2014).

Citizens personally experience corruption in the healthcare sector on a regular basis. For example, 55 per cent of respondents in a 2011 UN study said that they had paid at least one bribe to their doctor in the last 12 months, with 26 per cent paying at least one bribe to a nurse in the past year (UNODC, 2011). Using Gallup Balkan Monitor data from 2006 and 2010, we see that large majorities of respondents across the region (except in Montenegro) feel governmental corruption is widespread, with more favourable assessments between 2006 and 2010 for Albania and Macedonia, little change in Montenegro, and less positive responses between 2006 and 2010 elsewhere including Serbia (see Table 1).

Corruption in healthcare can take many forms, and is endemic since the risk of being caught is also low (SELDI, 2015), and intentional inefficiency in the public health system has been institutionalised to benefit private interests (Tanjug, 2011). More worryingly, the pressure to make informal payments has a ‘catastrophic and impoverishing effect’ on many Serbian households, particularly in rural areas, for larger families, and for the chronically ill (Arsenijevic, et al., 2013).

The situation in the sector has not gone unnoticed by the EU. In assessing the integration process of Serbia, the European Parliament (2012) recognised that ‘corruption in the health sector is a particular concern’. Recent European Commission (EC) Progress Reports have explicitly mentioned health and other critical sectors as ‘particularly vulnerable to corruption’ (EC, 2015; 2016).

Data collection and imputation

The analysis presented below is based on attitudinal questionnaire data collected from Serbian health policy officials at the municipal level. The two types of local officials from which we collected data were Advisors of Patients’ Rights (hereafter ‘Advisors’) based in municipalities, and members of municipal health committees. The former are officials with legal background who advise local citizens regarding their rights related to primary healthcare, whilst the latter participate in the decision-making in the local health committee and may or may not be municipal officials.

We obtained a list of telephone and e-mail contact details from the Serbian Standing Committee for Cities and Municipalities (SKGO) in October 2015. Healthcare committees and Advisors were not established in all Serbian municipalities, but the SKGO list contained all of the municipalities with these officials.¹ The list also included urban municipalities

¹ Personal communication with SKGO official, 21 October 2015.

within Belgrade, but they have different competences and were excluded. The list contained 64 municipality and city administrations, which were not distributed evenly across Serbia. We divided the municipalities by statistical region (excluding Kosovo). Since Belgrade is treated as a separate region, and this would potentially compromise the anonymity of participants, it was combined with Vojvodina to comprise Northern Serbia. The distribution of local health committees and Advisors by region is presented in Table 2.

Of the 64 municipalities with local health committees and advisors, there is a much lower incidence in Southern and Eastern Serbia compared with the two other regions.

The questions were translated into Serbian (Latin script) and administered via web-based questionnaires. We initially contacted officials by sending requests to individual e-mail addresses. After two weeks, an SKGO official sent a mass e-mail message reminding the respondents to complete the questionnaire. In December 2015, we called potential respondents who had not completed the survey. We received 74 complete replies from a possible 128 respondents (an Advisor and health committee member for each of the 64 municipalities/ cities), which is a response rate of 57.8 per cent. Advisors were slightly over-represented in the sample compared with local health committee members (see Appendix 1). However, the regional distribution of the respondents is similar to the incidence of Advisors / local health committees across Serbia (see Table 3).

Since we were interested in examining whether different modes of EU exposure were associated with attitudes towards potentially corrupt behaviour, we asked respondents whether they were participants in EU trainings ('tutelage') or dealt with policy implementation / harmonisation ('silent professionalization'). We distinguished between two types of silent professionalization, either explicitly through the harmonisation of EU policies, versus a more general engagement with EU policy on a day-to-day basis.

In addition to these three binary (yes/no) variables on EU exposure, we also collected the following demographic data: gender; age in years; and education and ethnicity (using Serbian census categories).

We operationalised attitudes towards corruption using existing questions developed by the project 'Anticorruption Policies Revisited: Global Trends and European Responses to the Challenge of Corruption' (ANTICORRP). First, we asked respondents to evaluate their level of agreement with the following statements on a six-point scale, with lower scores indicating disagreement:

- A1: Gift giving creates a bond where people know they will receive better treatment/service next time they visit the clinic/office city / municipality.
- A2: The quality of the services obtained is associated to the patient's/citizen's personal relationship with the service provider.
- A3: Public sector officials who provide services to my community do not act the way they should.

Respondents were also asked to assess the extent to which they agreed with the behaviour of protagonists faced with dilemmas related to corruption in five hypothetical scenarios, which were developed by ANTICORRP (Torsello, 2014). The five scenarios are summarised in Table 4, with the dilemmas relating to the levels of agreement with the protagonist's behaviour. For example, in Scenario A, higher levels of agreement with the protagonist's behaviour connote support for transparency, whilst disagreement suggests support for sociability.

The data related to attitudes towards the behaviour in the scenarios was coded on a six-point scale, with 1 indicating a low level of agreement and 6 denoting a high level of agreement. The outcome variables are analysed as ordinal below, but variables A1-A3 are

treated as continuous for parsimony (Agresti and Finlay, 2014). By disaggregating different types of behaviours that may constitute corruption, we will be able to provide a more nuanced account of the types of conduct condoned by Serbian municipal officials, whether these attitudes are associated, and whether exposure to the EU affects attitudes towards different corrupt behaviours heterogeneously.

Two adjustments were made. First, the ethnicity of the respondents were predominantly Serb, so the categories were collapsed into a binary variable (0='non-Serb'; 1='Serb'). Second, the education levels of the respondents were high (all but two had higher education), so the education variable was thus dropped.

There was item non-response for many of the answers received. Nearly one quarter of the replies (24 per cent) contained at least one missing variable. This means that using a complete-case analysis for the regression models below, these data would be omitted. We used multiple imputation (Rubin, 1987) as a way of addressing non-ignorable 'missingness'. In this article, the Stata package *mi impute* is used, which employs multiple imputation by chained equations (MICE) (Royston and White, 2011). The advantage of using MICE is that it is designed to handle categorical variables without requiring post-estimation adjustments (Marchenko, 2010). Since our dataset includes categorical variables, MICE should be used. The pattern of missingness is not problematic, and there is less than 10 per cent missing data for all of the variables in this analysis (see Appendix 2).

As Carpenter and Kenward (2013) recommend, we used 100 iterations for the error in estimating p-values to be approximately 0.005. Out-of-range values for A1 were recoded to be between 1 and 6, and missing values for outcome variables were not imputed.

Results and Discussion

The descriptive statistics of the imputed dataset are presented in the Appendix 1. Regarding exposure to the EU, 17.5 per cent of the respondents said that their daily work was affected by the EU, 48.7 per cent said that their work involved transposition / harmonisation of EU policies (with 12.4 per cent answering 'don't know'), and 47.8 per cent said that they have taken part in EU trainings.

For the attitudinal questions on gift-giving, the link between personal relationships and quality of service, and general trust towards public officials in the local community (items A1-A3 in the questionnaire), respondents tended to disagree slightly on average.

Serbian municipal officials' attitudes towards the behaviour of the protagonists was generally not associated between scenarios. The only exception is between Scenarios D and E (Spearman's $\rho=0.6936$), which is unsurprising. Both Scenarios D and E involve the protagonist seeking a local patron for unfair advantage involving local and international tenders, respectively. The responses to the scenarios in the current study are summarised in Table 5.

In Scenario B, agreeing with the behaviour in the scenario is to stick by an acquaintance who has been jailed for corruption. ANTICORRP found that Turkish respondents tended to agree, because of loyalty or distrust in the police (Acar and Yağci, 2014). By contrast, respondents in Kosovo opted to dissociate with corrupt individuals (Duli-Sefaj, 2014). It is thus unclear whether respondents see the scenario as demonstrating the actual guilt of an acquaintance or politically motivated accusation. For this reason, the regression analysis below only examines the four other scenarios, which provide a clearer dilemma along one dimension.

To see whether the variation in attitudes reflected in the scenarios were associated with various factors, particularly exposure to the EU, we fit a series of ordinal logistic regression models.

** $p < 0.05$; ** $p < 0.01$; *** $p < 0.001$*

The results of the regression analysis are displayed in Table 6. Higher levels of agreement with the protagonists' behaviour connote different things in the scenarios. In Scenario A, higher levels of agreement with the behaviour of the protagonist means that respondents are willing to sacrifice sociability in order to resist pressures to partake in corruption. Scenario C examines levels of agreement with the family which chooses to leave the area instead of being co-opted into local corrupt practices related to development of real estate. In Scenario D, higher levels of agreement mean that respondents support the protagonist's search for a local patron (unfairly by-passing competition for future tenders). Finally, in Scenario E, high levels of agreement mean that the respondent finding a local patron to increase the likelihood of international project funding.

Across the scenarios, there was no significant association between ethnicity and attitudes towards clientelist behaviour. Minority groups may seek protection through patronage, but this was not the case in any of the vignettes. Previous studies have also shown that there is a negative relationship between condoning corrupt behaviour and age (Torgler and Valev, 2006), but we only find a significant relationship in one of the scenarios. In Scenario D, for an increase of 10 years of age, the odds of having higher levels of agreement with the protagonist's decision to seek local patronage to secure a local tender decreases by 57.7 percent.

Previous studies have established that on average, males condone corrupt practices more than females (Dollar, et al., 2001; Swamy, et al., 2001). This expected association was

only present in one of the scenarios. In Scenario C, the odds of a female having higher levels of agreement with the family's decision to exit a corrupt locality is 6.417 times that for males. Perhaps one reason is that, if females tend to be more "nurturing" as posited in some of the psychology literature (Hoffman, 1977), so the protection of the family may be more important to female than male respondents.

The socioeconomic context is also important in affecting individuals' likelihood to condone corrupt or clientelist behaviour, whereby poorer locations tend to have higher acceptance (or resignation) towards corruption (Treisman, 2000). There are substantial regional disparities between relatively wealthy North Serbia and deprived Southern and Eastern Serbia. However, again, the expected association is not present across scenarios, but only in one of the vignettes. The odds of higher levels of agreement with the protagonist's choice in Scenario A to isolate himself rather than exposure to corruption is significantly lower (71.7 percent lower) in the wealthier North compared with the deprived South and East. There is no similar association between the two less wealthy regions in Serbia. In other words, the levels of agreement with the protagonist are higher in deprived parts of Serbia, and perhaps represent the respondents' strategy for avoiding corruption in such challenging settings.

As outlined above, at the local level, there are two different roles related to local health governance. The Advisor has a legal background and works within the municipal administration as a defender of patients' rights. The members of the consultative local health committees, by contrast, may be municipality employees or from other professions (such as a local doctor). As such, Advisors and committee members have different responsibilities and perhaps different preferences / attitudes regarding clientelist behaviour. There is no consistent pattern related to the role and attitudes towards the actions in the vignettes, and there is only a significant difference in Scenario C. The odds of higher levels of agreement with the family's

decision to leave the corrupt locality decrease by 78.5 percent for Advisors compared with local health committee members. Perhaps Advisors who are within the municipal administration and have a law background trust the ability of the rule of law to insulate individuals from corruption, thus not requiring exiting the locality.

None of the explanatory variables related to existing attitudes (A1-A3) are consistently associated with condoning the actions of the protagonists which are corrupt or expose them to corruption. We found no association between trust in public officials (A3) and levels of agreement with the protagonists' actions in any of the scenarios. On the other hand, the odds of agreeing with the protagonist's decision to shut himself away to avoid corruption (Scenario A) increase by 87.9 percent for an increase of one point in belief of link between personal connections and quality of service. This may reflect a belief that if the protagonist has personal links (A2) with service providers, he can cut himself off from the community without suffering too much. There was also a significant link between A2 and agreeing with Lucy's search for a local patron to facilitate international donor funding (Scenario E); an increase of one point in A2, *ceteris paribus*, is associated with an increase of 61.9 percent in the odds of higher levels of agreement with Lucy's actions. Beliefs regarding personal links are not associated with agreement with the protagonists' behaviours for the two other scenarios. Gift-giving in exchange for better service (A1) is only associated with condoning the protagonist's actions in one of the vignettes (Scenario D). An increase of one point in A2 is associated with increasing the odds of higher levels of agreement with Peter's search for a local patron (for unfair access to a local tender) by 72.5 percent.

We now turn to the focus of this study, the different types of exposure to EU socialization. Interestingly, attending EU training is not partially associated in any of the scenarios, despite the EU emphasis on modes of tutelage as a means of socialization. Nor was 'EU daily work' related to the EU linked with differences in attitudes towards the

protagonists in the vignettes. Thus, the only form of EU exposure that was associated with differences in attitudes was EU harmonisation, where there was a significant partial relationship in three of the four scenarios. In Scenario C, the odds of higher levels of agreement with the family's choice to exit the corrupt locality increase by a factor of 5.789 for respondents involved in EU transposition. In Scenario E, the odds of higher levels of agreement with Lucy (who sought local patrons to secure international funding) for a municipal official involved in EU transposition decreases by 75.3 percent, holding the other explanatory variables constant. Interestingly, there is a significant partial association for those unsure whether they were involved in EU transposition in Scenario D, where Peter sought a local patron to facilitate obtaining a local tender. If we re-run the model with 'yes' as the baseline (not shown), we find no significant difference between 'don't know' and 'yes'. If we combine these two categories, we find that the odds of higher levels of agreement with the statement are reduced by 68.6 percent compared with those not involved in EU transposition.

Putting these results together, across the scenarios, role and demographic characteristics were not consistently significant. Nor were pre-existing attitudes related to gratitude, personal links, or trust in public officials. Turning to the focus of the study, the effect of EU exposure was only observed in certain contexts. Across the scenarios, daily exposure to EU policies or EU training did not have a significant partial association with attitudes towards the protagonists' actions in the scenarios. By contrast, there is evidence that EU exposure through EU harmonisation at the municipal level is associated with positive anti-corruption behaviour related to unfair access to local and international funding (Scenario E), exiting unfavourable contexts instead of being co-opted into corrupt practices (Scenario C), and evidence that not being involved in harmonisation is associated with attitudes towards

local clientelism (Scenario D). However, there was no evidence that attitudes opting for integrity at the expense of sociability (Scenario A).

Interestingly, though Scenarios D and E are similar, gift-giving is associated with agreement with the protagonist only in the former. This is maybe because the protagonist will be using personal resources for the 'gift' (bribe) in Scenario D, whereas it is a redistribution of spoils from international donors in Scenario E. It is unclear whether the lack of a direct link to gift-giving has to do with the difference between bribery and redistribution, or whether respondents read Lucy as being active and well-established but lacking personal contacts. Moreover, age was significantly associated when local patronage was sought to secure local (Scenario D) rather than international tenders (Scenario E), but it is unclear why this is the case. In further research, it would be useful to improve the ANTICORRP vignettes by setting up a survey experiment randomly changing aspects of the scenarios to obtain clearer estimations of mean effects and the mechanisms involved.

Conclusion

The study sought to unpack whether exposure to different instruments of EU socialization is associated with attitudes towards potentially corrupt behaviours amongst municipal healthcare decision-makers in Serbia. One interesting insight from the data is that, contra H1 and irrespective of EU exposure, respondents' attitudes tended to disagree quite strongly with hypothetical corrupt behaviours or co-optation into corruption. This questions one of the underlying principles behind EU efforts for developing instruments to socialise decision-makers' attitudes to converge with European thinking. Whilst there may well be a selection effect whereby morally upstanding citizens become decision-makers in these municipal institutions, our data challenges the notion that there are malevolent local officials in Serbia driving corruption. It also counters the underlying rationale of EU socialization that to

converge with EU norms, the divergent attitudes and practices of local officials need challenging via training and silent professionalization.

Turning to the central investigation of the study, we found that H2 is partially confirmed. Counter to studies focusing on the national level, there is little evidence that day-to-day engagement with EU policies or participation in EU training was associated with higher than expected levels of acceptance for non-corrupt behaviours. The 'silent professionalization' through 'reception' activities advocated by Meyer-Sahling et al. (2016) seems to have beneficial association with attitudes related to corruption in most scenarios but not related to the dilemma between transparency and sociability. Extant work underlining the importance of linkage mechanisms (Levitz and Pop-Eleches, 2010; Noutcheva, 2016) do not focus on how different types of linkage are associated with attitudinal change in a uniform way. By looking at the different forms of EU exposure, we see that when there is a difference, but only when the type of exposure is a more intensive, structured, and sustained engagement with the EU, that is, through harmonisation activities. In other words, there is evidence of socialization through 'role playing', but not 'persuasion' or 'normative suasion'. Returning to the aforementioned socialization framework, Johnston (2005) proposes mechanisms by which international socialization is attenuated by domestic socialization: symbolic primacy; intensity; and internal policing. What is interesting is that these domestic factors affect the three modes of EU socialization heterogeneously. Perhaps it is the *intensity* of EU efforts requiring municipal 'role playing' that counterbalances the *intensity* of domestic socialization.

The current and previous studies are not able to provide evidence on the causal direction of the relationship between EU exposure and meritocratic attitudes. EU exposure is not randomly assigned, so it is unclear whether exposure aids in socialising to EU norms, or whether morally upstanding officials are more like to be put forward or volunteer for forms

of EU socialization. In other words, there may be a selection effect. To properly test a causal link between EU socialization and norms in future research, it is necessary to have longitudinal data not available at present, both at local and national levels. Whichever the causal direction, it would be expected that those exposed to some level of EU socialization would have higher average antipathy towards corrupt behaviour for all scenarios, but this is not the case in our findings.

What are the broader implications of our study, beyond the case of Serbia? The success of Europeanization via enlargement is seen to rest on the harmonization of laws and creation of new institutions, but also on socialization of domestic actors in order to socialization trigger normative convergence. The starting premise is that attitudes and practices need changing via exposure to EU tutelage and processes. Our contribution to the wider literature on Europeanization is to shift the focus to the local / municipal level, where procurement and the provision of services actually occur. Our empirical data suggests that the type of interaction that officials have with the EU and its processes matters. More importantly, the implicit suggestion that the occurrence of corrupt practices reflects the lack of successful socialization and the persistence of 'old' attitudes is directly challenged. Our findings show that normative convergence *can* take place without a corresponding positive outcome. In other words, local officials may know the right course of action, but face pressures from local power-brokers. This would suggest that the normative power of the EU is contingent on better understandings of informal exchange as well as revealing hidden power relations at the local level to properly create the conditions for normative change, not only in candidate countries, but also in its Eastern Neighbourhood, the Southern and Eastern Mediterranean, and further afield.

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Table 1: Is corruption widespread throughout the government in [COUNTRY], or not? (% Yes)

	2006	2009	2010
Federation (BiH)	90	96	93
Republika Srpska (BiH)	68	79	71
Kosovo	84	83	91
Croatia	77	87	89
Serbia	71	84	81
Macedonia	74	69	70
Albania	73	73	69
Montenegro	49	50	50

Source: Gallup (2010). The two entities in Bosnia-Herzegovina (BiH) are reported separately.

Table 2: Incidence of Advisors / local health committees by region

	Local health Advisors / committees?		
	yes	no	Total
Northern Serbia	23	23	46
%	50.00	50.00	100.00
Šumadija and Western Serbia	27	25	52
%	51.92	48.08	100
Southern and Eastern Serbia	14	33	47
%	29.79	70.21	100
Total	64	81	145
	44.14	55.86	100

Table 3: Distribution of respondents, by region

	Frequency	Percent
Northern Serbia	26	35.14
Šumadija and Western Serbia	33	44.59
Southern and Eastern Serbia	15	20.27
Total	74	100

Table 4: Summary of ANTICORRP scenarios

	Description	Dilemma
A	In the district council, a new person has recently been appointed. This person is very hardworking and loves to do things transparently. He would never accept any fees or gifts from citizens to sort out problems. Because of this, he avoids people and lives a lonely life all by himself, so that he will not be put under pressure for demands of favours. Thus, the local people avoid him.	Sociability vs transparency
B	Mario is a very resourceful person; he does what he can to help his friends and relatives and he knows a lot of people. When he needs a favour, he always finds someone to turn to, because he has always helped out. Unfortunately, last week, he was jailed for fraud and corruption. Most of the people who know him, however, still esteem and care for him.	Favour-granting vs transparency
C	A family has plans to build a new house in another village. They have asked what the official procedure is, and are ready to follow it carefully. After some months, everything starts to become difficult and they realize they will not be able to resolve it without paying some fee to the right person. They decide to leave the village and look for another where things go according to the rules.	Institutional performance vs exit
D	Peter has a small business preparing sandwiches, which he sells to local schools. Last year, he was successful in winning a tender and gained a contract with one local primary school. Unfortunately, the school head changed this year, and his contract expired. Before applying for the next tender, he is looking for an influential person who will introduce him to the new school head.	Seeking a patron within local authority vs integrity
E	Lucy runs a local NGO for human rights protection. She is very active and well established in the region, but she also has a lot of competitors. There was a large bid by an international donor last year, so she applied, being one of the most successful in that field. In the end, she failed, because she was not aware that some politicians wanted a share of the money in order to approve the projects. Next time, she will secure the proper agreements with them first.	Sharing spoils of international funding vs integrity

Table 5: Responses by scenario for Serbian municipal officials (sample size in parentheses)

	Scenario A (74)	Scenario B (74)	Scenario C (73)	Scenario D (73)	Scenario E (74)
strongly disagree	21.62	25.68	13.70	39.73	50.00
disagree	21.62	25.68	10.96	30.14	29.73
disagree slightly	12.16	12.16	5.48	4.11	5.41
agree slightly	22.97	21.62	15.07	13.70	10.81
agree	13.51	12.16	26.03	10.96	1.35
agree strongly	8.11	2.70	28.77	1.37	2.70

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Table 6: Ordinal regression models of responses to scenarios

	(1) scen. A b/se	(2) scen. C b/se	(3) scen. D b/se	(4) scen. E b/se
Gift-giving (A1)	-0.114 (0.149)	0.217 (0.164)	0.545** (0.173)	0.195 (0.174)
Personal links (A2)	0.631*** (0.182)	-0.131 (0.187)	0.218 (0.204)	0.482* (0.224)
Trust in officials (A3)	0.004 (0.190)	0.410 (0.211)	0.419 (0.215)	0.307 (0.222)
Age (in years)	-0.021 (0.027)	-0.032 (0.031)	-0.086** (0.032)	-0.037 (0.031)
<u>Ethnicity</u>				
Serb	0.101 (0.646)	0.293 (0.724)	-1.252 (0.705)	-0.564 (0.734)
<u>Region</u>				
Northern Serbia	-1.264* (0.644)	-0.043 (0.681)	-0.084 (0.778)	-0.332 (0.810)
Sumadija and Western Serbia	-0.433 (0.564)	0.463 (0.643)	-0.424 (0.706)	0.012 (0.747)
<u>Role</u>				
Defender of Patients' Rights	-0.157 (0.521)	-1.538** (0.597)	-0.976 (0.575)	-0.010 (0.612)
<u>Gender</u>				
female	0.120 (0.472)	1.859*** (0.560)	0.401 (0.550)	-0.360 (0.553)
<u>Daily EU work</u>				
yes	-0.420 (0.704)	-1.296 (0.758)	-0.464 (0.840)	1.359 (0.873)
<u>EU transposition</u>				
yes	0.171 (0.579)	1.756** (0.660)	-0.794 (0.634)	-1.401* (0.693)
DK	0.016 (0.709)	-0.305 (0.821)	-1.942* (0.878)	-0.914 (0.809)
<u>EU training</u>				
yes	0.192 (0.515)	-0.600 (0.586)	1.186 (0.624)	-0.390 (0.641)
<u>cut1</u>				
Constant	-1.492 (1.644)	-1.263 (1.802)	-2.990 (1.767)	-0.460 (1.741)

cut2 Constant	-0.303 (1.629)	-0.313 (1.798)	-1.067 (1.725)	1.384 (1.766)
cut3 Constant	0.285 (1.637)	0.053 (1.800)	-0.762 (1.721)	1.869 (1.781)
cut4 Constant	1.555 (1.673)	0.963 (1.806)	0.574 (1.714)	3.656* (1.837)
cut5 Constant	2.815 (1.720)	2.426 (1.828)	3.401 (1.996)	4.151* (1.873)
Observations	74	73	73	74

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