

Citizens' Preferences for Decision-Making Approach in Crisis Situations: An Expectancy-Disconfirmation Perspective*

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Abstract

Crisis decision-making is essential in crisis management. Previous literature has often focused on the roles of decision-makers and their leadership, neglecting the preferences of citizens in the decision-making process. Additionally, it has not adequately addressed the role of citizen participation during crises. This paper utilizes expectancy disconfirmation theory to hypothesize that the “confirmation level” between citizens’ expectations of policies and the actual outcomes will impact their desired involvement in the policy process. This analysis of survey data from Taiwan reveals that in crisis situations, the confirmation level between citizens’ expected policy priorities (e.g., economic or health) and the actual circumstances can affect citizen preference. Citizens who believe that the government is prioritizing economic policies better than they expected are likely to prefer decision-making approaches centered on administration. In contrast, those who feel that health policy is receiving greater emphasis than anticipated tend to favor citizen participation in

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decision-making. Additionally, in times of crisis, higher public satisfaction with the government is associated with a stronger preference for administrative-centered decision-making approaches.

Keywords: expectancy disconfirmation theory, administrative-centered decision approach, citizen-participating decision approach, citizen satisfaction, crisis situation

I. Introduction

Whether public policy decisions should be efficiency-oriented (decision-makers make decisions directly) or democracy-oriented (incorporating public opinion) has always been a difficult dilemma. Those who support the idea of involving citizens more in the decision-making process believe that citizen participation not only enhances the legitimacy of public policy choices but also facilitates their implementation (Bang, 2009; Morrell, 2005). However, during a crisis or state of emergency, this may be a completely different situation (Spector, 2019). In situations with a very limited decision-making timeframe, the formulation process has increasingly drawn attention. Since the Cuban Missile Crisis of the 1960s, crisis decision-making has garnered growing interest. The term “crisis situation” refers to circumstances characterized by high uncertainty, significant threat, and limited time for decision-making (Fink, 2002). Early literature on crisis decision-making primarily focused on organizational perspectives (Allison, 1971), with limited attention paid to individuals involved in the decision-making process. For instance, Smart and Vertinsky (1977, p. 645) noted that “under conditions of crisis-induced stress, there is a tendency for participation in decision-making to be limited to a small number of individuals”. The early development of crisis decision-making emphasized the centralization of power. This approach is based on the assumption that in situations of urgency and uncertainty, political and administrative authority tends to be rapidly concentrated in a central leadership core to enable coordinated action and swift responses (‘t Hart et al., 1993).

However, more recent developments have introduced diverse perspectives and critical reflections (Bendor & Hammond, 1992). For instance, Schneider (1992), in *Public Administration Review*, highlighted tensions between bureaucratic procedures and emergent norms in disaster management. He further elaborated on this issue in his 1995 book, offering a more comprehensive framework for reconciling bureaucratic and emergent approaches. Similarly, ‘t Hart et al. (1993) emphasized the importance of incorporating decentralization into crisis decision-making processes. The high citation counts of these works reflect their growing influence within the field. With increasing emphasis on democratic governance, scholars have

also begun to advocate for the inclusion of citizen input in crisis decision-making (Lenz & Eckhard, 2025; Stark & Taylor, 2014; Värttö, 2025), signaling a shift toward more participatory and inclusive models of crisis management.

The role of individual citizens in crisis decision-making processes has gradually garnered more attention (Sweeny, 2008). Nevertheless, whether citizen participation conflicts with professionalism and efficiency remains relatively underexplored in the literature, with a notable lack of empirical analysis. In other words, while citizen participation can enhance governance legitimacy, it may also reduce the quality of decision-making due to citizens' limited competence and policy knowledge. Furthermore, increased citizen participation often entails additional procedural requirements, which can diminish the efficiency of the crisis decision-making process.

This paper posits that the conflict described above may be mitigated during crisis situations, such as the COVID-19 pandemic. In such contexts, the public tends to prioritize direct and expedient decision-making by government administrators and places less emphasis on the inclusion of civilian opinions in the formulation of epidemic prevention policies. Citizen participation becomes less significant in the decision-making process for anti-epidemic policies, as the public values professional, clear, and swift decisions over policy directions that align with their expectations. The relationship between disconfirmed expectations and consumer satisfaction has garnered significant attention in management (Van Ryzin, 2006). In recent years, expectancy disconfirmation theory (EDT) has also been applied to public policy to analyze citizen attitudes (James, 2009; Park & Hwang, 2010). This article will apply EDT to explore whether citizens are willing to participate in crisis decision-making processes. The main implication of the EDT for public policy is that citizens' attitudes toward policies should be interpreted in relation to their prior expectations. In particular, when performance is not overestimated in areas of low expectation or underestimated in areas of high expectation, there is a risk of biased decision-making.

While previous studies have explored citizen participation during crises, findings remain mixed. Quaranta et al. (2021) found that economic crises can cause political alienation and reduce civic engagement. In contrast, Albrecht (2017) argued

that citizens are less likely to blame the government for natural disasters, leaving political attitudes largely unaffected. Although the impact of crises on participation is not new, there has been little research in the Taiwanese context—despite Taiwan's widely praised handling of COVID-19. Borbáth et al. (2021) showed that varying risk perceptions (e.g., health vs. economic) shape citizens' willingness to engage. Schoon et al. (2025) further noted that the pandemic exposed inequalities, prompting greater participation among those most affected. These studies suggest that how people perceive and experience different dimensions of a crisis significantly influences their attitudes and behaviors.

In response to the above literature, this paper distinguishes several dimensions of recognized priorities under crisis, including income and economic development, health and safety, and freedom and social order, and discusses the impact of perceptions in these three domains on the attitudes toward citizen participation. This is particularly reasonable when differing policy directions are not matters of right or wrong but rather reflect competing social values. In other words, during a crisis, the preference for specific policy directions diminishes in importance, with the public focusing primarily on the urgency of having decisions made promptly. Given the above speculation, this research attempted to answer the following research questions: Q1. In a crisis situation, what factors shape the public's preference for the position or authority of decision-makers? Q2. Does satisfaction impact citizen preferences for an administrative-centered or citizen-participatory decision-making approach when considering policy performance confirmation level?

Taiwan's public policy response to the COVID-19 pandemic was deeply intertwined with public participation and cooperation. This research analyzed survey data collected from 1,110 public respondents through online questionnaires. During May to September 2021, Taiwan's unpredictable pandemic situation significantly impacted citizens' daily lives. Anchored in the analytical framework of EDT, this study provides empirical support for the critical role of citizen participation in crisis decision-making, highlighting its strong connection to both policy prioritization and public satisfaction. There is no doubt that citizen participation in crisis decision-making can enhance the legitimacy of governance; however, this study also recognizes that crisis decision-making that combines expert opinion with citizen

participation may face obstacles, such as differences in administrative structure and culture. Some government agencies are more rigid and less flexible in emergency response. Furthermore, misaligned goals between government and citizens, as well as the dilemma of decentralized decision-making, can lead to information asynchrony and delays, and excessive time wasted on coordination (Kapucu & Garayev, 2011). Based on the theoretical framework and the study's findings, this article also offers several suggestions for institutional design.

II. Literature Review

A. The background theoretical perspective: The matters of expectancy confirmation versus disconfirmation

Factors influencing citizens' policy satisfaction can be categorized into sociological, psychological, and rational choice considerations (Hwang, 2007, 2009). The sociological approach examines demographic variables such as age, education level, ethnicity, and gender as key determinants. The psychological approach emphasizes the role of party identification and political ideology as independent variables. Meanwhile, the rational choice approach highlights the impact of public policy performance on citizens' satisfaction levels.

Previous studies have explored the correlation between public service outputs and public satisfaction (Kelly, 2003; Oliver, 1980; Roch & Poister, 2006). Firstly, the quantity and quality of public services provided by the government may influence public satisfaction and trust in the government. However, citizens inherently possess diverse subjective perceptions, making it challenging to objectively assess policy quality (Kelly, 2003; Parks, 1984). Additionally, policy performance quality may sometimes be conflated with the reputation of a government official (Liao, 2009). Secondly, individual characteristics, such as gender, race, and income, may shape distinct political attitudes, which in turn affect public satisfaction.

The third explanation arises from social and applied psychology perspectives. EDT, originally developed over two decades ago, has been widely applied to explain public satisfaction with government performance (James, 2009; Petrovsky

et al., 2017; Zhang et al., 2022). EDT posits that individuals evaluate products or services based on their prior expectations regarding the characteristics or benefits of the product or service. Following their experience with the actual performance, these expectations serve as a benchmark for comparison, determining their level of satisfaction. The discrepancy between these prior expectations and the actual performance is referred to as “disconfirmation” (Oliver, 1980; Van Ryzin, 2006).

According to the EDT, expectations reflect consumers' anticipation of a product's or service's performance. These expectations are shaped by prior personal experiences and impressions formed through media reports. When applied to government departments, expectations extend to the perceived competence of the government or its officials in implementing policies. Performance assessment, in this context, involves consumers' or the public's subjective evaluations of a product, service, or public policy based on their recent experiences. Disconfirmation arises from the difference between expectations and performance assessment, which can manifest as either confirmation or disconfirmation, depending on whether the actual performance exceeds or falls short of expectations.

Confirmation arises when the actual performance (assessment) exceeds the anticipated performance (expectation), while *disconfirmation* occurs when the actual performance falls short of the anticipated expectations. Confirmation is positively correlated with satisfaction, whereas disconfirmation is negatively correlated with satisfaction (Van Ryzin, 2006).

EDT has recently been applied in the public sector to explore public satisfaction with government policies and services. Roch and Poister (2006) validated the model's applicability through citizen surveys conducted in the state of Georgia, demonstrating that disconfirmation between expectations and outcomes significantly impacts satisfaction levels. Van Ryzin (2004) corroborated these findings in an analysis of New York City resident survey data, illustrating how the degree of alignment or misalignment between citizens' expectations and the actual performance of public services drives their satisfaction. Further expanding on this, Van Ryzin (2013) used an experimental design to measure interviewees' expectations and performance assessments, confirming that expectancy confirmation—where actual outcomes exceed expectations—leads to increased satisfaction, whereas

disconfirmation results in dissatisfaction. In short, EDT emphasizes the principle of cognitive consistency—the idea that individuals expect reality to align with their rational expectations; when it does not, a psychological gap arises. This interpretation of the “gap between expectation and experience” gives the theory strong predictive value and has made it a widely used framework for assessing satisfaction in both service and product domains. Nonetheless, like many social science theories, EDT has inherent limitations. Non-rational factors, such as emotions, sociocultural influences, and the variability or ambiguity of consumer or citizen expectations—pose significant challenges to the theory’s applicability (Ramasamy et al., 2024).

In the context of COVID-19 policy, public expectations encompass various dimensions, such as the timeliness, effectiveness, and equity of pandemic responses. When government actions surpass these expectations, they foster a perception of competence and reliability, reinforcing trust and satisfaction. Conversely, unmet expectations can erode confidence in governance, leading to dissatisfaction and skepticism about policy efficacy.

Given the heightened stakes during a pandemic, where policy priority of citizens’ health, economic stability, and public safety are critical, the disconfirmation between expectations and actual policy priority becomes even more pronounced. Expectancy confirmation, such as faster-than-expected vaccine rollouts or more comprehensive economic relief measures, may significantly enhance public satisfaction by alleviating anxiety and demonstrating effective governance. Expectancy disconfirmation, on the other hand, such as delayed healthcare responses or perceived inequities in policy implementation, could exacerbate public dissatisfaction.

This paper is interested in how satisfaction with pandemic prevention policies shapes public attitudes toward civic participation during a crisis. Knowing that public involvement in policymaking doesn’t constantly improve policy quality, and can sometimes even hinder it (Irvin & Stansbury, 2004). The primary focus of this paper is to understand how individuals perceive their own role when facing a critical situation. Another reason for focusing on the context of the COVID-19 crisis is that many studies have pointed out that a democratic crisis occurred in many countries

during this emergency situation (Repucci & Slipowitz, 2020). For example, Windholz (2020), in a study on Australia, pointed out that due to the emergence of COVID-19, the functions of parliamentary discussion and deliberation of bills were marginalized, members of parliament became purely executors of orders, and public health experts shifted from being policy advisors to policy decision-makers and simultaneously held both administrative and legislative power, and the freedom of the public was greatly restricted. In addition, the transparency and fairness of elections were also affected, and voter turnout decreased (International Institute for Democracy and Electoral Assistance, 2022). These phenomena have led many studies to begin systematically analyzing the impact of COVID-19 on democratic participation, such as House of Lords (2021), Pantić et al. (2021). In summary, these studies illustrate the importance of this paper and its strong connection to the existing literature.

B. The applications of EDT on citizens' participation in crisis decision-making

Most studies on EDT have focused only on explaining satisfaction as the dependent variable. There is a considerable body of literature in political science examining what attitudes or behaviors citizen satisfaction further influences (Wu et al., 2025), even though this is not the primary focus of EDT. For example, some studies analyze the impact of public satisfaction on political trust (Christensen & Lægreid, 2005; Kampen et al., 2006), while some studies focus on the effect of satisfaction on voting behavior (Grönlund & Setälä, 2007). Among these, the impact of citizen satisfaction on citizens' willingness, attitude, or behavior regarding policy participation has been a topic of great concern in both theory and practice (Grillo et al., 2010; Wu et al., 2025). One reason is that, in democratic societies, the extent of citizen participation not only affects the legitimacy of public policy but is also a crucial factor for policy quality improvement—even during the COVID-19 crisis (Enwereji & Uwizeyimana, 2020; Värttö, 2025).

The literature on crisis decision-making has also highlighted the importance of citizen participation, from the early classic command-and-control approach to centralized power (Allison, 1971; Rosenthal & Kouzmin, 1997) to the current increasing emphasis on citizen participation in crisis decision-making to enhance

governance legitimacy (Lenz & Eckhard, 2025; Mansbridge, 2020; Schneider, 1992, 1995, 2014; Stark & Taylor, 2014; 't Hart et al., 1993; Värttö, 2025). The logical connection among expectancy disconfirmation, satisfaction, and decision-making preferences can be further explained through the mechanism of cognitive evaluation. When citizens perceive that policy outcomes meet or exceed their expectations, (positive) confirmation enhances satisfaction, which in turn strengthens their confidence in administrative decision-making. Conversely, (negative) disconfirmation may lead to dissatisfaction, motivating citizens to seek greater participation as a corrective response to perceived policy shortcomings. This theoretical linkage clarifies how EDT underpins the relationship between citizens' evaluations and their preferred decision approaches during crises. Moreover, regardless of whether satisfaction positively or negatively affects citizen participation, the richness of research on this topic demonstrates its importance and highlights the necessity of continuing empirical investigation until a consensus is reached. In this paper, the dependent variable is *preference of who makes the decision*, an attitude related to the necessity of civic participation. The two ends of the spectrum of this attitude can be seen as ranging from a high perceived necessity of citizen participation to a low perceived necessity. Those who believe citizen participation is essential would prefer the government to invite public involvement in all decisions made during a pandemic. Conversely, those who see citizen participation as less necessary would like the government to make decisions during a pandemic by itself, opting instead to act as free-riders or rationally ignorant individuals.

(A) *Policy value/priority disconfirmation*

According to the EDT perspective, the gap between citizens' expectations and their assessment of the facts emerges as influential (Oliver, 1980; Petrovsky et al., 2017; Roch & Poister, 2006; Van Ryzin, 2004, 2006, 2013; Zhang et al., 2022). The COVID-19 pandemic, as an unprecedented crisis, presented governments with unique challenges, with no prior analogous experiences to guide the setting of performance expectations for epidemic policies. In such a scenario, the concept of *disconfirmation*—the discrepancy between anticipated and perceived policy

priority—gains particular significance.

Public values should be pluralistic and simultaneously emerge from society (Galston, 2002; Molina & Spicer, 2004). However, conflicts among these values are inevitable in policymaking. When governments prioritize certain values over others, tensions can arise, generating social conflict and dissatisfaction. According to Nabatchi (2012), policy situations inherently involve competing values, where one policy choice may satisfy one set of values while compromising others. For example, economic development policies might prioritize economic growth, but at the cost of historic preservation, environmental protection, or fair taxation. Similarly, policies aimed at promoting equal opportunity may create trade-offs between values like efficiency, justice, equality, merit, and individual achievement. Environmental policies often balance preservation, social justice, economic growth, and job creation, while crime policies may necessitate trade-offs among liberty, safety, due process, equity, and justice. In crisis situations like the COVID-19 pandemic, value conflicts become more pronounced as governments must make difficult trade-offs under constrained timeframes and heightened public scrutiny. These trade-offs often involve life, freedom, and economic development—core societal values with significant political and economic ramifications (Belle & Cantarelli, 2022; Chorus et al., 2018; Fiske & Tetlock, 1997). For example, policies emphasizing strict lockdowns to preserve public health may clash with values of economic freedom and individual liberty. Conversely, policies prioritizing economic reopening may raise concerns about public safety and health equity.

The emphasis on policy priorities reflects a government's ability to align administrative operations with public preferences for specific values. When the government's decisions are perceived as responsive to public preferences, citizens are more likely to respect and support those decisions, fostering trust in governance. Conversely, when the government appears misaligned with public priorities, distrust and dissatisfaction may increase (Moore, 1995; Spano, 2009). The confirmation level—how well the government's decisions match public expectations regarding value priorities—plays a critical role in shaping preferences for governance approaches.

In the context of the COVID-19 crisis, the public's evaluation of government

performance is likely to hinge on whether their perceived value priorities (e.g., prioritizing health versus economic recovery) align with actual government actions. A high confirmation level—when the government exceeds public expectations in addressing value priorities—leads to a preference for administrators-decide processes. Citizens may view a decisive and professional administrators-decide approach as more effective in resolving value conflicts during a crisis, especially when the government demonstrates responsiveness to public preferences and effectively balances competing societal values.

H1a: The higher the confirmation level between the facts and expectations of values underlying COVID-19 policies, the greater the preference for an administrators-decide decision-making process.

Regarding policy priorities and the underlying value choices, this study identifies three key dimensions that reflect citizens' belief systems during the COVID-19 crisis:

- Income and overall socioeconomic development
- Health and life safety
- Individual freedom versus social order

These dimensions are not only central to policy expectations but also serve as critical predictors for explaining preferences in crisis decision-making structures. In particular, the differentiation between *citizens-decide* and *administrators-decide* models is grounded in the theoretical expectation that citizens' engagement varies depending on the salience of the issue and the perceived adequacy of government response.

In the context of a crisis, the decision-making process requires efficiency and responsiveness to citizen demands (Liu et al., 2021; Prem et al., 2020; Prompetchara et al., 2020). This article further speculates that under crisis circumstances, the primary concern for people is the gap related to their own lives or health. The source of *value disconfirmation* will drive citizens to engage in decision-making. Indeed, the COVID-19 pandemic has emphasized the importance of prioritizing health and safety in public policies. During crisis situations, citizens often face uncertainty and heightened vulnerability, which makes health-related issues more salient. When the government prioritizes policies that directly protect health and life safety, it aligns

with the immediate concerns of the public, fostering trust and a sense of inclusion in the decision-making process. This alignment may lead to a preference for citizen participation in cases where public health outcomes are perceived to depend on collective action and shared responsibility.

The hypothesis assumes that concerns for life and health are universal values that transcend other priorities, such as economic development or individual freedoms, during a crisis. Citizens might feel that their input is critical when health-related decisions require transparency and widespread cooperation, such as decisions about vaccination campaigns, quarantine measures, or healthcare resource allocation. The public may view such participatory processes as necessary to ensure fairness and equity in health outcomes, especially when policy trade-offs involve competing interests or conflicting social values. However, when health and life safety concerns are addressed adequately, citizens are more likely to defer to administrative decision-making for other aspects of crisis management. The hypothesis suggests that the level of perceived health priority acts as a driver for citizen engagement, with higher priority leading to stronger preferences for participatory approaches. The dynamics highlight the situational nature of public expectations and their evolving priorities in times of crisis.

Empirical analysis of survey data can test this hypothesis by examining how a perceived policy priority on health and safety influences citizens' preferences for decision-making processes. Specifically, it can explore whether a greater perceived expectancy confirmation associates with an increased support for citizens-decide approaches compared to administrators-decide processes. Based on these speculations, this study proposes the following hypothesis:

***H1b:** The preference for a citizens-decide decision-making process emerges from a better perception of health and safety policy priorities.*

(B) Citizens' satisfaction and the preferred decision approach

Citizens contribute to the creation of public values through their participation and help address the limitations of representative bureaucracy (Bryson et al., 2014; John, 2009; Yang, 2016). According to Rosenstone and Hansen (1993), the forces driving people to engage in public policy decision-making often stem from the

costs associated with participation. These costs, at the individual level, may include money, time, or policy knowledge required for participatory behavior. The more resources individuals possess in these areas, the more likely they are to engage in public affairs. For example, wealthier individuals, those with freer time, or those with higher levels of education are more inclined to participate in public discussions. Sheng (2016, pp. 459-470) categorizes the factors influencing citizen participation into four groups: individual factors, political factors, social-psychological factors, and institutional factors. Individual factors refer to the resources necessary for public engagement, such as social status, income, and education. Political factors involve external mobilization dynamics, such as political campaigns or calls to action. Social-psychological factors are related to trust in government performance, satisfaction with governance, and perceptions of political efficacy (Lewis & Pattinasarany, 2009; Zhang et al., 2021). Institutional factors pertain to the extent of rights and opportunities granted by the government for public participation.

Previous findings are inconclusive regarding whether citizen satisfaction positively or negatively influences the willingness or behavior of citizen participation. Some studies in this topic find that the higher the satisfaction with public policy, the more willing citizens are to participate in the policy decision-making (e.g., Kim et al., 2022). However, some studies view non-participation as a sign that citizens are satisfied with the current situation (Kostelka & Blais, 2018), which means the more satisfied people are, the less likely they think it is necessary to engage in the policy decision-making process. The reasoning is that citizens believe the government has already handled things well, so they do not need to spend additional time or resources on participation to improve policy quality.

It is evident that citizens' perceptions of public affairs, such as satisfaction with current policies or alignment between policy direction and their preferences, significantly influence their preference for participatory approaches over administrative-centered decision-making. This article does not attempt to explore the nuances of different types of citizen (dis)satisfaction (Christensen, 2016; Lewis & Pattinasarany, 2009; Lyons & Lowery, 1989). Instead, it focuses on Taiwanese citizens' preferences regarding anti-COVID-19 policy decision-making processes (Hsieh et al., 2021) as an outcome of satisfaction or dissatisfaction. According

to Bowler et al. (2007), in their study of 16 democracies, citizens' expectations for *greater citizen participation* are heightened by distrust in government or disagreement with policy decisions, alongside a belief in the duty of individuals to monitor governmental performance. Conversely, when people are satisfied with public policy performance and trust the government, they tend to adopt more supportive policy actions (Robinson et al., 2021) and are more likely to favor an administrators-decide decision-making process.

In other words, when satisfaction with government behavior is high, citizens are less likely to question the legitimacy of administrative decisions and more likely to support streamlined decision-making processes that exclude direct public involvement. This trend is particularly relevant in crisis contexts, where the urgency of decision-making further diminishes the feasibility and desirability of extensive citizen participation. In such scenarios, citizens tend to prioritize efficiency and professional expertise over participatory governance.

Building on these insights, this study examines the relationship between citizen satisfaction and preferences for decision-making processes, proposing the following hypothesis:

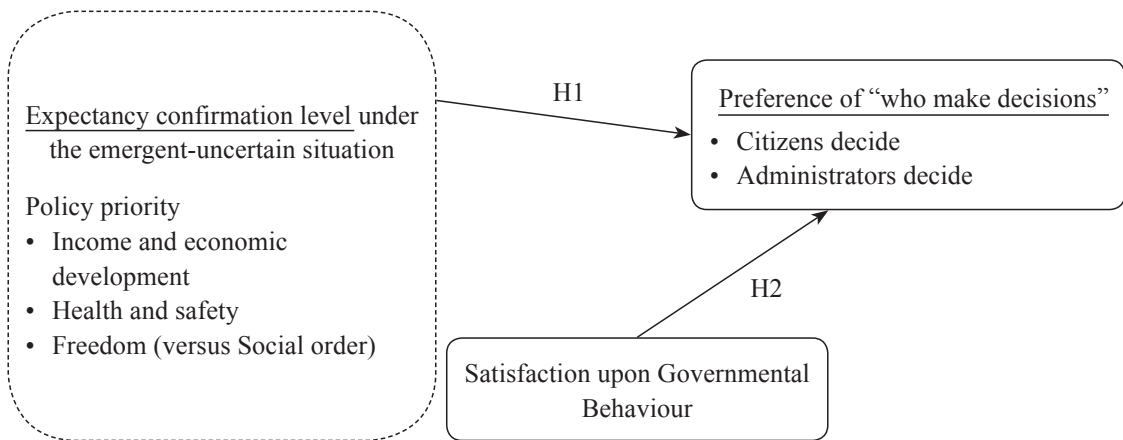
H2: *Higher satisfaction with governmental behavior leads to a stronger preference for an administrators-decide decision-making process.*

This hypothesis is grounded in the idea that satisfaction fosters trust and confidence in administrative capabilities, reducing the perceived need for citizen participation while enhancing support for centralized, expert-led governance. This relationship is particularly pronounced during crises, where effective and rapid decision-making becomes a societal priority. This study further includes a set of control variables to account for individual-level characteristics that may influence decision-making preferences during crises. Specifically, gender, age, education level, political party preference, perceived risks, information awareness, and political attentiveness are controlled for in the analysis. These variables have been identified in previous literature (Delli Carpini & Keeter, 1996; Lerner et al., 2003; Slovic, 1987; Zaller, 1992; Zukin et al., 2006), as relevant factors affecting citizens' attitudes toward public decision-making and crisis governance. Such as, women and older individuals may show stronger support for protective and centralized

crisis responses, while higher education levels are associated with more informed and critical evaluations of policy options. Political party preference shapes trust in government and the perception of institutional responses, influencing whether individuals favor bureaucratic or participatory decision-making. Perceived risks may heighten support for swift and authoritative actions, while information awareness and political attentiveness enhance one's capacity to engage with crisis-related decisions, shaping preferences for either expert-led or citizens-driven approaches. The inclusion of these variables helps to isolate the effects of the key explanatory factors and improve the robustness of the empirical results. Based on the theoretical hypotheses outlined above, this study presents the conceptual framework illustrated in Figure 1 below.

Figure 1

Conceptual Framework



Control variables: gender, age, education, political party preference, perceived risks, information awareness, political attentiveness

Source: Compiled by the authors.

The EDT, which was originally developed to examine customer satisfaction, has been extended to explore citizens' policy satisfaction. Numerous public administration studies have explored this theory, culminating in Zhang et al. (2022) conducting a meta-analysis based on an extensive body of literature. EDT has been favored by many scholars in the field of public administration because it offers a psychological perspective that deepens the theoretical understanding of citizens'

satisfaction with government. As a result, it is regarded as the dominant model for studying citizen satisfaction (Chen et al., 2022; Zhang et al., 2022).

Although most studies on EDT have focused only on explaining satisfaction as the dependent variable, there is a considerable body of literature in political science examining what attitudes or behaviors citizen satisfaction further influences (Wu et al., 2025), even though this is not the primary focus of EDT. For example, some studies analyze the impact of public satisfaction on political trust (Christensen & Læg Reid, 2005; Kampen et al., 2006), while some studies focus on the effect of satisfaction on voting behavior (Grönlund & Setälä, 2007). Among these, the impact of citizen satisfaction on citizens' willingness, attitude, or behavior regarding policy participation has been a topic of great concern in both theory and practice (Grillo et al., 2010; Wu et al., 2025). One reason is that, in democratic societies, the extent of citizen participation not only affects the legitimacy of public policy but is also a crucial factor for policy quality improvement—even during the COVID-19 crisis (Enwereji & Uwizeyimana, 2020; Värttö, 2025). Unfortunately, previous findings are inconclusive regarding whether citizen satisfaction positively or negatively influences the willingness or behavior of citizen participation. Some studies in this topic find that the higher the satisfaction with public policy, the more willing citizens are to participate in the policy decision-making (e.g., Kim et al., 2022). However, some studies view non-participation as a sign that citizens are satisfied with the current situation (Kostelka & Blais, 2018), which means the more satisfied people are, the less likely they think it is necessary to engage in the policy decision-making process. The reasoning is that citizens believe the government has already handled things well, so they do not need to spend additional time or resources on participation to improve policy quality.

III. Data Collection and Measurement

In August 2021, a consultation was held with several Taiwan government officials and scholars. Based on the advice gathered during the consultation, a questionnaire was designed and revised to survey Taiwanese citizens aged 18 and above. The sample size of 1,110 observations met the requirement for a 95%

confidence level and a 3% confidence interval, given a population of 19,898,067 (with a minimum required sample size of >1,067). The online survey was conducted through a random selection of respondents' Line IDs and email addresses, with the questionnaire link distributed between September 10 and 28, 2021. A goodness-of-fit test was performed on the samples (chi-square value = 0.08867; p -value = 0.999879), with sample weighting applied to match the gender and age distribution of the population. OLS regression models were employed using the weighted equation.

To address concerns regarding potential selection bias, the sampling approach was based on the selection from a commercially maintained database of LINE IDs and email addresses, which are widely used across demographic groups in Taiwan. Platforms such as PTT, Dcard, and Facebook were considered during the design phase but ultimately excluded due to their tendency to overrepresent younger, politically active, or issue-specific users. Inclusion of these platforms could have introduced self-selection bias and compromised the representativeness of the sample. The chosen sampling frame was intended to enhance demographic balance and reduce platform-specific distortions. In addition, post-stratification weighting was applied to further align the sample with the national gender and age distribution, thereby improving population-level representation.

Timing of the survey: The respondents' perception of the seriousness of the crisis situation significantly influenced their answers, highlighting the importance of considering the timing of the survey before conducting statistical analysis. On a ten-point scale measuring perceived seriousness, the average scores were 7.15/10 for future uncertainty about the crisis, 7.11/10 for seriousness in terms of social consequences, and 6.89/10 for social chaos resulting from the COVID-19 crisis. These findings indicate that the survey was conducted during a perceived crisis situation in which respondents were experiencing pandemic-related panic.

The variables included in this study, aligned with the conceptual framework, are as follows: (expectancy) confirmation level on policy priorities (*incomes and economic development, health and safety, and freedom versus social order*), satisfaction with government behavior, and the preference for decision-making approaches (*citizens decide and administrators decide*). Table 1 summarizes the operationalized measurements derived from the questionnaire items and the data coding of main variables used in this research.

Table 1

Measurement of Main Variables¹

Variable: (Expectancy) confirmation level on policy priority: Incomes and economic development = Q1-5(1)-Q1-3(1)	
Questions	Code
(Policy expectation)	Priority ranking from the 1st to the fifth ¹
Q1-3. Given the high level of internal and global uncertainty of epidemics, in your opinion, which objective should the government take on as the top priority when they encounter COVID-19?	5= the first priority 4= the second priority 3= the third priority 2= the fourth priority 1= the fifth priority
(1) Personal income and economic development	
(Fact/assessment)	Priority ranking from the 1st to the fifth
Q1-5. In accordance with your observation of the government, which objectives do the government actually put as the priority of their anti-epidemic policy?	5= the first priority 4= the second priority 3= the third priority 2= the fourth priority 1= the fifth priority
(1) Personal income and economic development	
Variable: (Expectancy) confirmation level on policy priority: Health and safety =Q1-5(3)-Q1-3(3)	
Questions	Code
(Policy expectation)	Priority ranking from the 1st to the fifth
Q1-3. Given the high level of internal and global uncertainty of epidemics, in your opinion, which objective should the government take on as the top priority when they encounter COVID-19?	5= the first priority 4= the second priority 3= the third priority 2= the fourth priority 1= the fifth priority
(3) Personal health and life safety	

¹ The scale was designed to reflect both ordinal ranking and an approximately equal distance between adjacent points, thereby supporting the treatment of the data as interval-level for analytic purposes. This design assumes that the cognitive distance between each ranked position is perceived by respondents as relatively uniform, an assumption that is common and accepted in similar studies involving Likert-type or priority rating scales. Nonetheless, the possibility of unequal intervals is acknowledged as a methodological limitation, suggesting that future research may consider alternative measurement strategies—such as paired comparisons or probabilistic ranking models—to further assess the robustness of disconfirmation-based constructs.

Table 1 (continued)

(Fact/assessment)	Priority ranking from the 1st to the fifth
Q1-5. In accordance with your observation of the government, which objectives do the government actually put as the priority of their anti-epidemic policy?	5= the first priority 4= the second priority 3= the third priority 2= the fourth priority 1= the fifth priority
(3) Personal health and life safety	
Variable: (Expectancy) confirmation level on freedom (versus social order) =(Q3-3)-(Q3-2)	
Questions	Code
(Policy expectation)	1=Freedom
Q3-2. Given the rapid and severe epidemic breakout of COVID-19 in Taiwan since May, 2021, which principle do you think the government should obey when they face the epidemic scenario?	<input checked="" type="checkbox"/> Q3-2(1) ONLY focus on freedom and choice of citizens <input checked="" type="checkbox"/> Q3-2(2) Should focus on freedom and choice of citizens MORE THAN the general order of the society 0=Social order <input checked="" type="checkbox"/> Q3-2(3) ONLY focus on general social order of society <input checked="" type="checkbox"/> Q3-2(4) Should focus on the general order of society MORE THAN freedom and choice of citizens
(Fact/assessment)	1=Freedom
Q3-3. In accordance with your observation, does the government actually put the emphasis on the freedom of citizens or social anti-epidemic order regarding the success of their anti-epidemic policy?	<input checked="" type="checkbox"/> Q3-3(1) ONLY focus on freedom and choice of citizens <input checked="" type="checkbox"/> Q3-3(2) Should focus on freedom and choice of citizens MORE THAN the general order of the society 0=Social order <input checked="" type="checkbox"/> Q3-3(3) ONLY focus on general social order of society

Table 1 (continued)

	<div style="border: 1px solid black; display: inline-block; padding: 2px;">Checked</div> Q3-3(4) Should focus on the general order of the society MORE THAN freedom and choice of citizens
Variable: Satisfaction upon government behavior =factor analysis (method: principal component) from Q9, Q10 and Q11	
Questions	Code
(Satisfaction with the central government)	1-10 marks (higher mark= more satisfied)
Q9. Are you satisfied with the current actions and policies of the central government against COVID-19?	
(Satisfaction with the local government)	1-10 marks (higher mark= more satisfied)
Q10. Are you satisfied with the current actions and policies of your local government against COVID-19?	
(General satisfaction)	1-10 marks (higher mark= more satisfied)
Q11. In general, are you satisfied with the performance of Taiwan's government against COVID-19?	
Variable: Preference of "Who make decisions"² = Q2-3(1) and (3)	
Questions	Code
(Citizens decide)	1-5 marks (higher mark=more important)
Q2-3. Given the high level of domestic and global uncertainty of epidemics, in your opinion, whose advice should the government listen to most?	
(3)The general public	

² This measurement strategy was selected to ensure clarity, contextual relevance, and respondent accessibility, especially under the scenario-based framing of public health uncertainty. Rather than relying on abstract ideological constructs, the items were intentionally designed to elicit intuitive judgments grounded in a concrete decision-making scenario. It is acknowledged, however, that these items have not undergone psychometric scale validation or internal consistency testing, and that the two concepts were measured separately rather than as components of a latent construct. Future studies are encouraged to adopt validated multi-item scales and conduct reliability and factor analyses to better capture the complexity and structure of governance preference constructs.

Table 1 (continued)

(Administrators decide)	1-5 marks (higher mark=more important)
Q2-3. Given the high level of domestic and global uncertainty of epidemics, in your opinion, whose advice should be the most important to the government?	
(1) Government officers	

Source: Compiled by the authors.

To mitigate the risk of common method bias (CMB), this study incorporated gender, age, education, and political party preference as control variables in the regression models. Harman's single-factor test was then conducted to detect any potential issues with common method variance. The test results (explained variance in Factor 1 = 39.60%, which is below the 50% threshold) indicated that the overall risk of common source bias was low compared to a purely survey-based study, suggesting that CMB did not significantly impact the data used in the modeling.

IV. Statistical Analysis

A. Descriptive statistics

The explanatory variables in this study include (expectancy) confirmation level in an emergent-uncertain situation and satisfaction with government behavior (SAT), each of which encompasses several distinct dimensions. The confirmation level variables measure the gaps between policy priority expectations and actual perceptions regarding: (a) income and economic development, (b) health and safety, and (c) freedom versus social order.

The confirmation level was calculated using the formula: confirmation level = (fact/assessment) - (policy expectation). This follows the logic of the expectancy-disconfirmation model, where a negative value indicates that actual perceptions fall short of prior expectations, signaling unmet expectations or disconfirmation. A mean confirmation level close to zero suggests alignment between expectation and perception, while greater deviations (positive or negative) reveal perceptual gaps. Standard deviations further indicate how dispersed these perceptions are across

respondents. This approach allows for a more nuanced understanding of how gaps between what citizens expected and what they perceived influence their satisfaction and decision-making preferences during crises. These descriptive statistics not only provide foundational insights into public attitudes but also establish a basis for the subsequent regression analysis.

On a 5-point Likert scale, the mean confirmation level for policy priority on income and economic development is -0.10 ($SD=1.23$), suggesting a small negative gap, while health and safety have a larger negative gap with a mean of -0.43 ($SD=1.29$), indicating higher unmet expectations. For the value emphasis on individual freedom versus social order, the mean confirmation level is -0.03 ($SD=0.54$), reflecting near-neutral perceptions. These results highlight that unmet expectations are more pronounced in health and safety policy priorities, which may reflect the heightened public sensitivity to health-related issues during the COVID-19 crisis.

Satisfaction with government behavior (SAT) is assessed through three levels of analysis: (a) satisfaction with the central government, (b) satisfaction with the local government, and (c) general satisfaction. This multi-level approach is critical for understanding the nuances of public satisfaction during a crisis, as it captures varying perceptions of governmental performance across different tiers of governance. On a 10-point scale, respondents reported a mean score of 5.73 ($SD=2.74$) for central government satisfaction, 6.33 ($SD=2.38$) for local government satisfaction, and 6.08 ($SD=2.57$) for overall performance in Taiwan. These findings suggest that local governments were perceived slightly more favorably than the central government during the COVID-19 pandemic, which may reflect their closer proximity to citizens and their role in implementing localized pandemic measures.

The dependent variables focus on the preferences regarding who should make decisions and willingness for citizen participation during emergencies. For decision-making responsibility, the mean score for citizens taking responsibility is 3.90 ($SD=1.21$), whereas the mean score for administrators making decisions is 2.72 ($SD=1.41$). This indicates a stronger inclination toward citizen involvement in the decision-making process, even in the context of a crisis. However, the relatively lower score for administrators suggests some skepticism about administrative decision-making or a preference for shared responsibility.

Table 2*Descriptive Statistics*

	Mean	Std. Dev.	Min.	Max.
confirmation level on policy priority -income and economic development	-0.10	1.23	-4	4
confirmation level on policy priority -Health and safety	-0.43	1.29	-4	4
confirmation level on freedom versus social order	-0.03	0.54	-1	1
Satisfaction with central government	5.73	2.74	1	10
Satisfaction with local government	6.33	2.38	1	10
General satisfaction	6.08	2.57	1	10
Preference for “citizens decide”	3.90	1.21	1	5
Preference for “administrators decide”	2.72	1.41	1	5

Source: Compiled by the authors.

B. Effects from the explanatory variables

Table 3 showed that the confirmation level of health and safety value generated a positive and significant effect (coefficient=0.07*) on preferring that citizens be responsible for decision-making, when including SAT (satisfaction with governmental behavior) as an explanatory variable (see Model 1).³ This result indicates that, when accounting for satisfaction with government behavior, a positive confirmation level (the fact > the expected value) of governmental emphasis on health and safety strengthens individual preference for citizens-decide decision-making. It is worth to notice that, citizens, as key stakeholders in public health, are more inclined to demand active involvement in decision-making processes on issues directly related to their lives and safety. In crisis situations, this preference highlights the perception that health-related matters are personal and require the

³ Low R^2 values are not uncommon in social science research involving subjective attitudes and complex individual behaviors, where numerous unobserved factors may contribute to decision-making. Despite limited variance explained, statistically significant coefficients offer empirical support for the hypothesized relationships.

participation of those most affected, namely the public.

In Model 2, the preference for administrators deciding COVID-19 policies was significantly influenced by positive confirmation level of income and economic development policy priority (coefficient=0.08*) while accounting for the strong effect of SAT (coefficient=0.18***). This finding suggests that when citizens perceive the government's focus on economic development as a policy priority, their trust in the administrative systems are reinforced. This increased satisfaction translates into a greater preference for an administrators-decide decision-making approach, where efficiency and expertise take precedence.

To further assess the stability of the findings, a robustness check (King & Roberts, 2015; Kuo et al., 2025; Young & Holsteen, 2017) has been conducted using both *generalized linear models* (GLM) and *ordered probit regression*. Results across these alternative specifications remain consistent with the main findings and lending additional confidence to the model's validity.

This divergence in effects between the two value domains—health/safety versus income/economic development—underscores the situational logic underlying citizens' governance preferences. When the confirmation level of health and safety is high, individuals may interpret this alignment as a cue that government recognizes the personal relevance and urgency of health issues. Consequently, citizens may feel empowered and legitimized to participate in related decision-making processes, aligning with theories of deliberative and participatory governance that emphasize the inclusion of affected stakeholders in high-salience policy domains. In contrast, the positive effect of economic development confirmation on preferences for *administrators-decide* decision-making reflects the technocratic logic often associated with economic governance. Citizens may perceive economic policy as requiring expert knowledge, long-term planning, and centralized coordination. Hence, when economic priorities are confirmed, individuals tend to rely more on institutional competence and delegate decision authority to public administrators. This pattern also aligns with findings which suggest that under economic uncertainty, citizens may prioritize stability and efficiency over participatory deliberation. These findings highlight that confirmation of different policy value domains triggers distinct normative expectations regarding who should lead decision-making—

Table 3
Preference for “Who Makes Decisions”: The (expectancy) confirmation level and SAT Effect

Variables	Model 1		Robustness Check		Model 2		Robustness Check	
	Citizens decide		GLM	Ordered Probit	Administrators decide		GLM	Ordered Probit
	Coefficient	(s.e.)			Coefficient	(s.e.)		
confirmation level on policy priority	-0.04	(0.03)	-0.04	-0.03	0.08*	(0.04)	0.08*	0.06*
-income and economic development	0.07*	(0.03)	0.07*	0.06*	0.04	(0.03)	0.04	0.03
confirmation level on policy priority -Health and safety	-0.01	(0.07)	-0.01	-0.01	0.13	(0.08)	0.13	0.10
confirmation level on freedom versus social order	-0.07	(0.04)	-0.07	-0.06	0.18***	(0.05)	0.18***	0.14***
Satisfaction with government behavior	-0.12	(0.07)	-0.12	-0.11	0.28**	(0.09)	0.28**	0.22**
Female	-0.00	(0.00)	-0.00	-0.00	0.00	(0.00)	0.00	0.00
Age	-0.11**	(0.04)	-0.11**	-0.12***	0.08	(0.04)	0.08	0.07*
Education	-0.12	(0.10)	-0.12	-0.13	-0.04	(0.12)	-0.04	-0.03
Political party preference-DPP	(0.10)	(0.09)	(0.10)	(0.09)	(0.12)	(0.09)	(0.12)	(0.09)

Table 3 (continued)

Variables	Model 1		Robustness Check		Model 2		Robustness Check	
	Citizens decide		GLM	Ordered Probit	Administrators decide		GLM	Ordered Probit
	Coefficient	(s.e.)	Coefficient		Coefficient		Coefficient	
Perceived risks	0.04*	(0.02)	0.04*	0.03*	-0.04*	(0.02)	-0.04*	(0.01)
Information awareness	0.01	(0.01)	0.01	0.01	0.04*	(0.02)	0.04*	(0.01)
Political attentiveness	-0.01	(0.01)	-0.01	-0.02	0.03*	(0.02)	0.03*	(0.01)
Intercept / Cutpoint	4.35***	(0.28)	4.35***	Cut1-2.21(0.27)	1.66***	(0.34)	1.66***	Cut1-0.31(0.26)
			(0.28)	Cut2-1.55(0.26)	(0.34)		(0.34)	Cut2-0.82(0.26)
				Cut3-1.09(0.26)				Cut3-1.23(0.26)
				Cut4-0.34(0.26)				Cut4-1.93(0.26)
Number of observations	1110		1110	1110	1110		1110	1110
F value	F(11, 1098) = 2.80**		-	-	F(11, 1098) = 6.82***		-	-
R-squared	0.03		-	-	0.06		-	-

Note. * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

Source: Compiled by the authors.

citizens themselves in value-laden, personal domains like health, and administrators in technical domains like economic policy. This causal logic supports the two-model structure and reflects differentiated citizen reasoning about governance during crises.

V. Findings and Discussions

A. Citizens' prioritization of different values influences their preferences for crisis decision-making process approaches.

The findings underscore a critical point: when citizens perceive that their health and safety concerns are prioritized beyond expectations, they express a stronger preference for a *citizens-centered* process. Unlike other policy priorities, such as economic development, health issues evoke a personal sense of urgency, responsibility, and ownership. Therefore, citizens may feel compelled to participate in decisions that directly affect their physical well-being, especially during a crisis like COVID-19. Additionally, these results demonstrate that even in a context where satisfaction with government behavior is factored in, individuals are not passive actors. Rather, they assert their voices and express a preference for a *citizens-decide* approach when the government's emphasis on health exceeds their expectations. This dynamic suggests that government overperformance in protecting public health does not necessarily reduce citizen interest in participation; instead, it encourages a sense of co-ownership and collective responsibility for decision-making. This finding also calls for crisis decision-making to take citizens' demands into consideration even when time is in urgency (Liu et al., 2021; Prem et al., 2020; Prompetchara et al., 2020).

The result highlights an important trade-off during crisis situations. Unlike health-related matters, economic policies require a degree of technical expertise and centralized decision-making to ensure swift and effective responses. When citizens perceive the government as exceeding their expectations regarding economic priorities, they are more likely to view administrators as competent and efficient decision-makers. This outcome underscores the importance of trust: A greater trust

in government strengthens public willingness to cede decision-making authority to administrators, especially in areas perceived as requiring professional expertise.

B. Satisfaction matters. Higher satisfaction leads citizens to a stronger preference for an administrators- decide decision-making process.

Satisfaction with government behavior (SAT) consistently emerged as a strong explanatory variable, positively influencing preferences for *administrators-decide* processes. This finding suggests that satisfaction plays a stabilizing role during crises. When citizens are satisfied with governmental performance, they perceive administrative processes as more reliable and efficient, reducing the perceived need for citizen participation. Satisfaction thus fosters a preference for centralized decision-making, particularly in areas requiring rapid, coordinated responses. This finding responds to EDT's argument that citizens' expectancy disconfirmation affects their trust in effectiveness of the government (Lewis & Pattinasarany, 2009; Petrovsky et al., 2017; Van Ryzin, 2004, 2006, 2013; Zhang et al., 2021). More importantly, the findings of this study further fill the research gap in EDT, pointing out that citizens' expectations and satisfaction also have an impact on preferences for government decision-making approaches.

These results carry significant implications for crisis governance. Governments must navigate a delicate balance between fostering satisfaction through effective policies and accommodating citizens' desire for involvement in issues they care about most. Health crises, in particular, require governments to engage citizens as active stakeholders while simultaneously demonstrating professionalism and competence in areas like economic recovery.

The results from Table 3 contribute to an understanding of citizen-government dynamics during crises. Positive confirmation level of health and safety values encourages citizen involvement, while positive confirmation level of economic development priorities fosters trust in administrators' decision approach. These findings suggest that governments must recognize and respond to value-driven citizen expectations to enhance legitimacy, trust, and crisis management effectiveness.

VI. Conclusion

In many Hollywood movies, the hero is often depicted as jumping into action and single-handedly resolving crises. However, in real-life crises, such as recent disasters where uncertainty is high and time is limited, decisions are typically made by experts. Yet, the outcomes of expert-led crisis decisions do not always mirror the idealized heroics seen in movies. While the value of democratic participation in decision-making has been widely recognized in the literature, the issue of whether citizens are willing to participate in crisis decision-making processes remains a hot topic of discussion.

During Taiwan COVID-19 pandemic from 2020 to 2021, critical issues such as mask allocation, vaccine prioritization, and economic relief subsidies drew the authors' attention to whether citizens were willing or able to engage in the crisis decision-making process. This study's timeframe coincides with the relatively severe COVID-19 pandemic situation in Taiwan in 2021, making the collected data highly valuable. The findings reflect citizens' genuine perceptions and attitudes during a crisis.

When evaluating preferences for decision-making models—whether citizens should decide or administrators should decide—we found that confirmation of economic development policy priorities, along with higher citizen satisfaction, aligns with a preference for an administrative-centered decision-making model. In contrast, for those who prioritize health and safety, a citizen-participation model is favored. This preference reflects the fundamental need for safety in Maslow's hierarchy of needs. This finding also reminds government decision-makers that when crisis decisions involve life safety issues, they must consider more citizen opinions to improve the legitimacy of their decisions.

Crisis decision-making is essential in crisis management. Previous literature has often focused on the roles of decision-makers and their leadership, neglecting the preferences of citizens in the decision-making process. Additionally, it has not adequately addressed the role of citizen participation during crises. This paper utilizes expectancy disconfirmation theory to hypothesize that the *confirmation level* between citizens' expectations of policies and the actual outcomes will impact their

desired involvement in the policy process. This analysis of survey data from Taiwan reveals that in crisis situations, the confirmation level between citizens' expected policy priorities (economic or health) and the actual circumstances can affect citizen preference. However, due to the limitations of the survey items and online data collection platform, the interpretations of these findings should be made with caution. Despite these constraints, this study makes a significant contribution by extending expectancy disconfirmation theory to the context of crisis governance and by highlighting how citizens' policy-specific expectations shape their democratic preferences—an area largely overlooked in previous research.

Implications for Crisis Decision-Making Theory: This study has two key implications for the theory and practice of crisis decision-making. (a) Citizen Satisfaction Matters: Governments must pay attention to citizens' satisfaction with crisis management processes to enhance the effectiveness of their decisions. Satisfaction is particularly critical for building trust and legitimacy during uncertain and high-pressure scenarios. (b) Health and Safety Considerations: On issues related to public safety and health, governments should appropriately incorporate citizens' opinions rather than making decisions solely based on administrative or expert judgment. It is emphasized that the study does not seek to advance any normative claims or favor any political position. Rather, it aims to offer an empirical account of how perceptual variables—controlling political identity—contribute to crisis-related governance preferences. Future research is encouraged to examine the mediating role of media consumption, information environments, and affective polarization to further disentangle the effects of partisan bias.

Practical Recommendations: Given the time constraints inherent in crisis situations and the need for citizen involvement, developing simplified mechanisms for citizen discussion or deliberation may be a feasible and effective solution. Kiaei and Daneshfard (2016) identify four mechanisms to facilitate citizen participation in public policy making: cultural, political, social, and technological. A notable practical example is the *Camden Health and Care Citizens' Assembly* in the UK in 2020, where participants acted as *citizen scientists*, studying the pandemic's local impact before deliberation. This empowered them to contribute expert-like knowledge and helped generate more locally relevant responses. The case also

shows that design factors—like time, location, and digital tools—can affect the effectiveness and inclusiveness of deliberation. Technology-enabled formats, such as online or hybrid meetings, can streamline participation and reduce resource burdens (Värttö, 2025). Therefore, we consider that culturally, education and media should build citizens' crisis literacy and sense of responsibility, such as through simulation drills and civic education. Politically, institutionalized consultation mechanisms—like local advisory councils—can enable stakeholders to voice concerns and influence crisis-related policies. Socially, community organizations, citizen media, and expert groups can serve as intermediaries to communicate information, gather needs, and coordinate resources. Technologically, digital tools including feedback apps and real-time reporting platforms can collect public input and improve decision-making through data analysis. These interconnected strategies create a more inclusive and adaptive governance model in times of crisis.

Compared to several other democratic countries (Värttö, 2025), citizen participation in crisis decision-making in Taiwan during the COVID-19 pandemic was relatively limited. This study seeks to underscore the importance of citizen involvement in such processes, drawing on both theoretical developments and lessons from key practical experiences. The findings of this study directly address the existing literature gap that often neglects citizens' preferences and willingness to engage, focusing instead on leadership roles. We did not aim to argue that citizen participation is universally *better*, but rather to empirically examine how pre-existing expectations (economic versus health priorities) shape democratic preferences during a crisis. By applying EDT, this study demonstrates that these perceptual variables significantly contribute to crisis governance preferences. Specifically, our results feed back into the literature by illustrating that citizen preference is not monolithic: The desire for administrative efficiency versus participatory input is highly contingent on whether the policy outcome confirms or disconfirms their core priorities. This nuanced understanding of citizens' conditional desire for involvement provides a critical empirical account for the theory and practice of inclusive crisis governance.

Limitations: It is important to acknowledge the inherent limitations of using the COVID-19 pandemic as a case study. The COVID-19 crisis is distinct from typical

rapid-onset events, such as natural disasters, due to its nature as a prolonged, slow-onset, and globally extensive crisis characterized by high scientific uncertainty. The unique challenge of simultaneously managing intertwined public health and severe economic crises meant that policy responses directly caused economic fallout. These specific dynamics likely shaped citizen expectations and satisfaction differently than in localized, short-duration emergencies. Consequently, the findings of this study may not be fully generalizable to crises with fundamentally different characteristics. Although this study adopts a simplified measure of policy expectations using a single item on specific policy priorities, this approach aligns with the theoretical focus of expectation-disconfirmation theory, which emphasizes the subjective comparison between expected and perceived policy conditions. Besides, under the crisis contexts, where expertise, legitimacy, and efficiency should also be considered in the mixed responses, this is also an important research direction that has not been addressed in this study but will be addressed in the future. By focusing on concrete and bounded expectations within a defined policy domain, this measure enhances clarity and allows for direct calculation of disconfirmation scores. Nevertheless, we acknowledge that citizens' expectations are often shaped by a range of social, political, and informational factors, and that such expectations may be multidimensional. Future studies could build on our framework by incorporating more nuanced measurement tools—such as multi-item scales or qualitative components—to capture the layered and dynamic nature of expectation formation. Doing so would help refine the operationalization of policy expectations and further test the robustness of the EDT framework in public administration contexts. Finally, this study currently only analyzes quantitative data. If qualitative data is available in the future, it will further enrich the research analysis and discussion related to this topic. A key limitation of this study lies in the use of a subjective 5-point priority scale that assumes approximately equal intervals between response categories. Although this assumption follows common practice in public administration research, the study did not include empirical testing to verify that respondents perceive these intervals as equidistant. Consequently, potential measurement bias cannot be entirely ruled out, which may have affected the precision of the estimated relationships. Future research could address this limitation by conducting pretests to

assess scale perception, applying nonparametric techniques, or adopting probabilistic ranking models to test the robustness and validity of this measurement approach.

This study focuses on the independent effect of expectancy disconfirmation while omitting potential interaction effects to preserve analytical clarity. Although this approach allows for a straightforward examination of main relationships, it inevitably limits the theoretical rigor of EDT, which fundamentally emphasizes the interaction between expectations and perceived performance. The absence of interaction terms—such as those involving satisfaction, risk perception, or political orientation—may overlook important moderating dynamics that shape citizens' decision-making preferences. Future research should consider testing or conceptually addressing these interaction effects to enhance the theoretical coherence and explanatory depth of the EDT framework.

This study briefly refers to cross-national contexts to situate the analysis within broader democratic governance discussions. However, the theoretical and methodological justification for cross-country comparison remains limited. The reference to other democratic countries serves primarily as contextual background rather than a structured comparative framework. Future studies should incorporate more explicit theoretical reasoning and comparative methods to strengthen the generalizability of findings across political systems.

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危機情況下公民偏好的決策模式： 期望失驗觀點的應用*

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摘要

「危機決策」係為危機管理的關鍵，過往的研究文獻常聚焦討論於決策者的角色及領導力，而忽略了公民偏好在決策過程的重要性，且未適當闡明公民參與在危機中的角色功能。本文基於期望失驗理論的觀點，指出公民對政策的期待及對實際成果的滿足程度，會影響他們參與決策過程的意願。本研究以在危機情況期間進行的民意調查資料進行分析，研究發現，在危機情況下，公民所期待的政策優先性（經濟政策優先或是健康政策優先）與實際情況的落差，會影響決策模式偏好，公民認為政府在經濟政策的實際重視程度高於民衆所期待者，較偏好官僚中心決策途徑；相對而言，認為政府在健康政策的實際重視程度高於所期待者，則偏好公民參與決策途徑。除此之外，在危急情況下，民衆對政府的滿意度愈高則愈偏好官僚中心決策途徑。

關鍵詞：期望失驗理論、官僚中心決策途徑、公民參與決策途徑、公民滿意度、危機情況

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