

Preferences for Attending Social Events: Pre-Analysis Plan

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1 Introduction

This pre-analysis plan describes a stated-preference experiment testing whether differences in social preferences between Catholic and Protestant ancestry individuals manifest in willingness to attend social events under varying conditions. It supplements an observational study of differences in excess mortality during the COVID-19 pandemic by ancestral religious background in Switzerland.

The experiment aims to identify whether ancestral religious background predicts baseline attendance and sensitivity to infection risk or travel costs, using a choice experiment among Swiss participants.

2 Experimental Design

Participants complete a 5–6 minute online survey. After providing informed consent, respondents are screened on being Swiss citizens and report their Heimort (place of origin), which I match to 1850 census data to determine ancestral religious composition. I define ancestral religion as Catholic if the Heimort was majority Catholic in 1850.

The experiment consists of 8 binary choice vignettes across two modules. In the Travel module, participants see 4 vignettes presenting invitations to social events (with acquaintances/colleagues, relatives, or close friends) that vary in travel time (1×, 2×, or 4× their usual travel time to social events). In the Risk module, participants see 4 vignettes presenting similar social event invitations during a hypothetical respiratory disease outbreak, with stated infection probabilities of 5%, 10%, or 20%. Vignette attributes are balanced using a blocked factorial design that avoids dominated choices, and the order of vignettes is randomized within modules.

Within the Risk module, I randomize the source of the infection probability information at the respondent level. Half of respondents see risk information

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attributed to their personal doctor, while the other half see it attributed to the Federal Office of Public Health. This allows exploratory analysis of whether source credibility affects attendance decisions differentially by ancestral background, though I do not have a strong prior hypothesis. Primary analyses pool across both messenger conditions.

Following the choice tasks, participants complete additional survey modules measuring social network size (intimate network, frequency of contact with elderly relatives, association membership), risk preferences (GPS measure), current religious denomination and self-reported religiosity, and demographics (age, gender, and language region are obtained from panel provider; education, subjective health are self-reported).

3 Outcome Variables and Hypotheses

Primary Outcomes The primary outcome is a binary indicator for choosing to attend versus skip each social event. I test two main hypotheses about how Catholic ancestry shapes attendance decisions. First, Catholic-ancestry individuals may exhibit higher baseline willingness to attend social events when costs are held constant (extensive margin). Second, they may be less deterred by infection risk or travel costs (intensive margin). These hypotheses reflect the possibility that Catholic cultural background leads individuals to place greater value on maintaining social connections even when costs are high.

Secondary Outcomes I also conduct exploratory heterogeneity analysis by current religiosity to assess whether effects are driven by active religious practice or transmitted cultural values. Additionally, I explore whether the messenger (personal doctor versus Federal Office of Public Health) affects Catholic-ancestry individuals differently, though this analysis is exploratory without strong prior hypotheses.

Furthermore, I analyze the descriptive statistics of social network measures by ancestral religion. The hypothesis is that Catholic-ancestry individuals have larger and denser social networks, which may mediate the relationship between ancestral religion and attendance decisions.

4 Empirical Strategy

I estimate discrete choice models of attendance decisions separately for the Risk and Travel modules. The primary independent variable is Catholic ancestry, defined as having a Heimatort that was majority Catholic in 1850. For each module, I estimate models that include event-type indicators (relatives, close friends; colleagues as reference), cost variables (infection probability or travel time multiplier), and Catholic ancestry both as a main effect and interacted with cost. This specification allows me to test whether Catholic-ancestry individuals

have different baseline attendance (extensive margin, coefficient λ) and different cost sensitivity (intensive margin, coefficient γ).

The primary specifications uses no controls. I estimate additional specifications with extended controls including education, language region, self-reported health, and elicited risk preferences to assess robustness. I allow for unobserved preference heterogeneity where feasible through random coefficient models (mixed logit), and otherwise use standard logit models. Standard errors are clustered at the respondent level throughout. I report both individual coefficient tests and joint tests of the null hypothesis $H_0 : \lambda = \gamma = 0$ that ancestry has no effect on attendance through either channel.

Exploratory Analyses I estimate heterogeneous effects by current religiosity to distinguish transmitted cultural values from active religious practice. I also explore interactions between Catholic ancestry and the randomly assigned messenger (doctor versus Federal Office of Public Health) in the Risk module, though without strong prior hypotheses about the direction of effects. The descriptive analysis of social network measures by ancestral religion uses t-tests about mean differences.

5 Sample and Data Quality

I recruit 500 Swiss residents through online panel providers with quota sampling to ensure representativeness on gender, language region, and age (excluding Italian-speaking Ticino).

I expect the ancestry to be approximately 40% and 60% Catholic and Protestant, respectively, but this may vary based on the matched Heimort distribution. Robustness to non-matched respondents will be assessed if necessary.

I exclude participants who fail attention checks or complete the survey in under 2 minutes. The final analysis sample includes all respondents who pass quality checks and for whom I can successfully match Heimort to historical census data.