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Addendum notice

On page 369, the sentence*: If a difference in fit of these two models is statistically significant (using the Sattora-Bentler test), the assumption of invariance is rejected*, should read: *If a difference in fit of these two models is statistically significant the assumption of invariance is rejected*.

In search of the egalitarian syndrome: cultural inertia in Croatia?

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Abstract

In 1970, Josip Županov presented his Egalitarian Syndrome Theory (EST) to account for the country's suboptimal socioeconomic development. The theory was operationalized only recently (Štulhofer and Burić, 2015), which enabled an assessment of the persistence of egalitarian syndrome, as well as the testing of its hypothesized (negative) association with indicators of social development. Using data from a 2015 national probability survey, this study aimed to provide additional validation of the multidimensional measure of the egalitarian syndrome, including age and gender invariance testing, as well as to explore the hypothesized negative association with county-level development indices. The findings support Županov's theoretical assumptions. Rural vs. urban residence, education and occupation, but not participants' age, were significant predictors of the support for egalitarian syndrome. Significant negative associations were observed between the acceptance of values associated with the egalitarian syndrome and county-level development and competitiveness scores, GDP and early entrepreneurial activity. Although our study was not designed to test the causal relationship between radical egalitarianism and socioeconomic development, the findings suggest that the widespread prevalence of the egalitarian syndrome may be a problem for the country's socio-economic development.

Keywords: Egalitarian syndrome, Županov, scale construction and validation, cultural inertia, socioeconomic development

Values are a long lasting phenomena: they come into being slowly and slowly they disappear.
Županov, 1993:192

1 INTRODUCTION

It seems that Croatian sociologists share the view that the Josip Županov's Egalitarian Syndrome Theory (EST) is the most important theoretical concept to have been locally developed (Fanuko, 2011; Lalić, 2005; Sekulić and Šporer, 2005). Županov developed the EST at the end of the 1960s and then for the next thirty years systematically used it in his analyses of first Yugoslav and then Croatian society.[1] The theory is based on the proposition that Yugoslav society at the end of the 20th century and Croatian society at the beginning of the new millennium inherited a particular socio-cultural pattern of pre-modern peasant societies that prevented effective social and economic development. Županov called this pattern the egalitarian syndrome and conceptualised it as a "cluster of cognitive perspectives, ethical principles, social norms and collective viewpoints" (Županov, 1977:46).

[1] Županov first systematically presented the basic propositions of the EST in the paper "Egalitarizam i industrijalizam" published the journal *Naše teme* (Županov, 1970). He continued to use the theoretical model during his entire scholarly career. See for instance *Sociologija i samoupravljanje* (1977), *Marginalije o društvenoj krizi* (1983), *Poslije potopa* (1995), *Od komunističkog pakla do divljeg kapitalizma* (2002).

This cluster consists of seven dimensions, or rather, seven different manifestations of egalitarian stances, values or perspectives (Županov, 1970). He calls the first dimension of the egalitarian syndrome the *perspective of finite good*. This is the cognitive component of the egalitarian syndrome for it directs national policy toward an egalitarian distribution of social wealth. The second dimension is the *redistributive ethic*, which is derived from the moral obligation characteristic of pre-industrial societies that enjoins the (re)distribution of wealth, for social differences to be as small as possible. Dimension number three is the *norm of egalitarian distribution.* The norm prohibits marked income differences by restricting high earnings. The fourth dimension of the egalitarian syndrome is the *anti-entrepreneurial obsession*. It is expressed in the negative attitude to private entrepreneurship and consists of three sub-dimensions: *the enrichment phobia, the state ownership complex* and *the anti-entrepreneurial sentiment*. The fifth dimension is anti-professionalism. It implies a negative attitude to professional knowledge and autonomous professional standards. Županov calls the sixth dimension of the EST *intellectual levelling*, and it consists of *anti-entrepreneurship, anti-innovativeness* and *anti-creativity*. The seventh and final dimension is *anti-intellectualism* or a negative attitude to intellectual work as such (Županov, 1970; 1977; 1983).

Županov had the idea that the composite of these dimensions slowed down the development of Yugoslav society and/or reduced the scope of modernising changes. Later, in post-socialist Croatian society, it was responsible for a series of transitional problems and deviations in socio-economic development.

Accepting Županov's theory as one of medium range, and prompted by criticism that Županov failed to verify his model empirically (cf. Dolenec, 2014), in an earlier paper the authors presented an operationalisation of the EST and offered two versions of a composite indicator of the egalitarian syndrome (Štulhofer and Burić, 2015).[2]

Carried out in a large-scale student sample, the analyses confirmed the possibility of operationalising the egalitarian syndrome as a higher order latent construct. According to the findings, Županov's original model, with its seven dimensions, needed reducing to a 5-dimensional model to achieve a good fit to the data (Štulhofer and Burić, 2015).

Our intention to offer a valid measure of egalitarian syndrome, suitable for use in a wide range of social science projects, required additional research. It was important to validate the two egalitarian syndrome scales (SEMA-27 and SEMA-15) in a population-based sample and to offer some empirical support for Županov's claim of the persistence and effects of the egalitarian syndrome in contemporary Croatian society.

[2] In the paper we provided a longer (27-item) and shorter (15-item) version of the egalitarian syndrome scale (SEMA), a measure to be used in a wide range of social research studies.

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It is well known that the demise of communism did not result in Županov giving up on his theory. Instead, he applied it to an analysis of the process of post-communist transition (Županov, 1995; 2002). Several of his insights of that time seem relevant for the current situation as well. This is the case, for example, with the concept of *political capitalism* (Županov, 2002). In this concept Županov refers to some of the more important aberrations of the transition, such as the connection of political and economic elites (political clientelism) and politically motivated state paternalism, resulting in the state having too great a share in GDP.[3] Some of the propositions of political capitalism, as seen by Županov, largely refer to some of the key problems that Croatian society is currently facing. If his core concept at least partially explains some of the outcomes of transition, then we can probably use it to tackle current phenomena, such as the irrationality of territorial organisation, wide-spread corruption and the "jobs for the boys" system, hypertrophy of state institutions and agencies, excessive dependence of citizens on state transfers (and, consequently, exaggerated government spending) and so on.

There are several other salient places in Županov's engagement with transitional problems that make the EST still relevant or, at least, worthy of a scholarly update. For example, Županov dealt with the topic of flexibility of work and the attitude of citizens of Croatia to the EU and its values (see Županov, 2002). Disputes about the need for the labour market to be more flexible and for corresponding changes in labour legislation have for several years been a component part of the many discussions and analyses of the desirable directions for social development[4]. If we set aside the doubt as to whether the labour market reform described is really necessary, one relevant research question would be the assessment of the extent to which the existing socio-cultural context works as a barrier to the adjustment to the local and global dynamics of labour market and labour relations.

It would also be interesting to verify Županov's proposition that social crisis radicalises egalitarianism (Županov, 1983:60).[5] At the time of writing, it seems as if

[3] Because of the theme and the tone of the many discussions of the dominant Croatian economic problems, it seems that Županov's claim that "in our business organisations there is an inbuilt state orientation" is still relevant (Županov, 1983:66).

[4] We might recall just the volume of debate that in both the public and academic circles in 2014 was set off by the government initiative to introduce outsourcing in state institutions.

[5] Dolenec criticises Županov's theory as an attack on social solidarity and equality (Dolenec, 2014). However, the theory of the egalitarian syndrome is not a general theory of egalitarianism and, accordingly, not a critique of the idea of egalitarianism. It is important to note that from the start Županov clearly distinguished egalitarianism of positions or chances (an equal start in the competition for social positions) from egalitarianism of rewards (Županov, 1970:33), pointing that the latter is the focal point of the egalitarian syndrome. Furthermore, even the egalitarianism of position was not the ideal solution for Županov. Drawing attention to its inherent conservatism, for poverty is often interpreted as a personal failure (Županov, 1970, pp. 35-37), he supported it primarily for its stabilising role – unlike egalitarianism of rewards, which he found radical and theoretically conflictive (pl. 34). For Županov then the egalitarian syndrome is radical egalitarianism (Županov, 1994), comparable with Scanlon's interpretation of *substantial egalitarianism* that assumes equality of "lives and fates" (Scanlon, 1997:1), or Frankfurt's definition of *economic egalitarianism* as "a doctrine according to which it is desirable that everyone has an equal quantity of money and wealth" (Frankfurt, 2015:6). Although he was not concerned with the normative, for he rejected the idea of engaged (prescriptive) sociology, Županov was very sensitive to social inequalities, particularly where the inequalities that arose and grew in the 1990s were concerned (Županov, 1995; 2002; 2011). One can object that the understanding of egali-

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Croatia is beginning to emerge from the several years of crisis that was manifested in a deterioration of most social indicators, as well as by an increase in social inequality.[6] Are the effects of the social crisis and a high level of social openness – enhanced by membership in the EU – reflected in the strengthening of egalitarian values? The answer to this question is closely connected to the fundamental proposition of the EST, according to which value systems can work as barriers to or generators of social development.

Acceding to Županov's paradigmatic point of departure in the consideration of social development, compatible to Swidler's (1986) interpretation of culture as a toolbox for individual and collective action[7], we would like to encourage (and assist) future assessments of the role of culture in Croatian socio-economic development.

1.1 STUDY AIMS AND HYPOTHESES

This paper has two interlinked objectives. As we have already mentioned, the first objective is to provide further validation of the complex measure of the egalitarian syndrome. Building upon the validation presented in our previous paper (cf. Štulhofer and Burić, 2015), here we use a probability-based general population sample to replicate confirmatory factor analysis carried out in a student sample. We also analyse age and gender invariance of the model.[8]

The second goal relates to the analysis of the possible persistence of the egalitarian syndrome in contemporary Croatian society. Taking our departure from Županov's theses about the persistence (i.e., resistance to change) of the egalitarian system in the post-socialist period (Županov, 1993; 2011), we test out in the paper the two following hypotheses: (1) the cultural inertia or persistence of the

tarianism in contemporary moral philosophy has gone far beyond the simple dichotomy that Županov used; for example, the concept of egalitarianism in the works of Rawls (1971), Scanlon (1997), Walzer (1983), Sen (1992) or Dworkin (1981a, 1981b) differ substantially. This pluralism of ideas about egalitarianism, as well as Županov's strong criticism of rising social inequalities during post-communist transition, points to the erroneousness of dismissing the EST as egalitarianism's executioner. Egalitarianisms, like roses, have different scents. Or sometimes have none. The pluralism of the conceptualization of egalitarianism leads to the following question: what does SEMA actually measure? At first glance, the question is trivial as, strictly methodologically speaking, the measure indicates the five dimensions shown in figures 1 and 2. However, in a practical sense (i.e., thinking of possible social consequences of the egalitarian syndrome), the questions seem highly relevant. Taking into account the findings related to internal and external validity of the SEMA subdimensions the core values of the egalitarian syndrome are primarily the norm of egalitarian distribution and the anti-entrepreneurial sentiment.

[6] According to the 2007 CBS data, Gini coefficient of income inequality was 0.28 and the relative risk of poverty gap was 24.9%. At the end of the crisis, in 2014, the Gini coefficient had risen to 0.30 and the relative risk of poverty gap to 27.9%/(cf. http://www.dzs.hr/Hrv_Eng/publication/2015/14-01-01_01_2015.htm and http://www.dzs.hr/hrv/publication/2009/14-1-2_1h2009.htm).

[7] This seems to be indicated by Fanuko when he argues that in his later works Županov seemed to be forging a more general sociological paradigm. Fanuko says that Županov "abandoned the relatively firm framework of industrial sociology and set out on the adventure of analysing the global social system from the standpoint of cultural sociology. According to his own admission, he abandoned the Marxist analysis that stressed change and social conflict for the sake of theorising about a society based on a continuity of the cultural tradition" (Fanuko, 2011:132).

[8] It should be noted that without confirming model invariance, the second study aim can not be achieved. Without the empirical confirmation that the measure developed is equally good in measuring the phenomenon (the egalitarian syndrome) in different age groups, the assessment of cultural persistence of the phenomenon, which involves comparisons among different age cohorts, would be impossible to carry out.

egalitarian syndrome hypothesis, and (2) the hypothesis about negative consequences of the egalitarian syndrome.

We can define cultural inertia or the persistence of inherited cultural patterns (values, standards, collective habits, etc.) as long-lasting effects of a specific cultural pattern (Zarate, Shaw, Marquez and Biagas, 2012). Such resistance to change is usually counter-productive, for the inherited cultural tools often perform sub-optimally in new circumstances. Županov considered the complex of values he called the egalitarian syndrome an inherited and persisting cultural barrier to social and economic development.

(1) *The cultural inertia or persistence of the egalitarian syndrome hypothesis.* In absence of longitudinal data, the hypothesis can only (and with serious limitations) be tested by treating respondents of different ages as representing different generations (ignoring the distinction between age and cohort effects). Positive correlation between age and the egalitarian syndrome scale scores would indicate the presence of cultural inertia. Since the educational and income structures of the population have changed considerably since 1970, testing of the above correlation requires controlling for education and income levels. Considering the greater personal benefit to be obtained from the acceptance of egalitarian norms, a higher acceptance of values associated with the egalitarian syndrome should be expected among participants with lower socio-economic status.

(2) *Possible consequences of the egalitarian syndrome hypothesis.* In accordance with Županov's understanding of the negative consequences of the egalitarian syndrome, we expect a negative correlation between county development indicators and the average acceptance of the egalitarian syndrome at county level.

2 METHOD

2.1 SAMPLE AND PROCEDURE

The analyses presented in this paper were carried out using a national probability-based sample of 1,000 respondents aged 15-88 years. The survey was the standard monthly omnibus research conducted by the *Ipsos* market research and public opinion agency. Two-stage stratified sampling design was used. At stage one, stratification by six regions, defined as sets of counties[9], was employed. At the second stage, the sample was stratified by settlement size.[10] In choice of settlement in which the research was carried out, the primary sampling units of choice, in each stratum the probability proportional to size sampling method was used,

[9] The following regions were defined: Zagreb and surrounds (Zagreb City and Zagrebačka County), Northern Croatia (Krapinsko-zagorska, Varaždinska, Koprivničko-križevačka, Bjelovarsko-bilogorska, Virovitičko-podravska and Međimurska counties), Slavonia (Požeško-slavonska, Brodsko-posavska, Osječko-baranjska and Vukovarsko-srijemska counties) Lika and Banovina (Sisačko-moslavačka, Karlovačka and Ličko-senjska counties), Istria, Hrvatsko primorje and Gorski kotar (Istarska and Primorsko-goranska counties), Dalmatia (Zadarsko-kninska, Šibenska, Splitsko-dalmatinska and Dubrovačko-neretvanska counties).

[10] Four categories were constructed: settlements with populations up to 2,000; from 2,001 to 10,000; from 10,001 to 100,000 and populations of over 100,000.

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meaning that the likelihood of the choice of a unit (an individual settlement) corresponded to its size (population above the age of 15). Household selection was based on random selection of addresses using the random starting point method, followed by random selection of households relative to the chosen address (the random walk method).

Post-hoc weighting was applied to correct for differences in core sociodemographic characteristics (age, education, and the proportion of urban vs. rural inhabitants) between the sample and national population. Taking into account the sampling design and the size of county-level sub-samples[11], our sample can be considered representative of the national but not county populations.

Women constituted a slight majority in the sample (52%). Participants older than 50 were the largest age group (44%), followed by men and women between 30 and 40 years of age (32%). About a quarter of the sample (24%) were participants below the age of 30. With respect to education, participants with a secondary school constituted a majority (54%). Somewhat fewer than a third of participants (30%) reported partial or completed primary education, while 17% had a college or university education. Comparable proportions of the surveyed individuals were living in small (up to 2,000 inhabitants) and medium-sized settlements (2,000-10,000 inhabitants), 39% and 35% of the sample, respectively. In total, 64% of participants were residing in urban settlements.

2.2 MEASURES

According to the operationalisation presented in our earlier study (cf. appendix in Štulhofer and Burić, 2015), measurement of the egalitarian syndrome included 27 items that cover the seven original dimensions (Županov, 1970).

To explore convergent validity of the two versions of the egalitarian syndrome scale (SEMA-27 and SEMA-15) we used a short version of the risk aversion scale developed by Carter and Yeqing (2005). The scale had satisfactory reliability in this study (Cronbach's $\alpha = 0.83$).

The analyses included the following sociodemographic indicators: gender, age, place of residence (rural, settlements up to 2,000 inhabitants, vs. urban, settlements with more than 2,000 inhabitants), occupation,[12] educational level (ranging from partial primary education to post-graduate degrees) and personal income in the preceding month (from no earnings to 12,000 kn or more). Because of negative

[11] The size of county sub-samples ranged from 18 (Ličko-senjska County) to 182 participants (Zagreb City). The average sample size at the county level was 30 (SD = 15.1).

[12] The occupation indicator consisted of the following eight categories: 1 – independent professionals (private practice lawyers, dentists and physicians with private practices, freelance artists, etc.); 2 – experts and intellectuals (teachers, engineers, state-employed physicians, etc.); 3 – senior management, senior supervisors, directors (public or private sector); 4 – middle management (public or private sector); 5 – clerks; 6 – skilled manual workers; 7 – unskilled and low-skilled workers; 8 – farmers and fishermen. For analytical purposes, we collapsed categories 1-3, 4 and 5, and 7 and 8. Category 6 (skilled manual workers), the most populous one, was reference category.

skew and multimodality, education and income were transformed into categorical variables (education was categorized into terciles and income into quartiles).

To assess possible consequences of the egalitarian syndrome we calculated the average SEMA-27 score by county. For the indicators of regional development, we used county GDP, 2000-2013 difference in county GDP, the Development Index (DI) and the Index of Regional Competitiveness (IRC). To assess the development of local and regional self-governments, the DI was developed by the Ministry of Regional Development and EU Funds.[13] The composite indicator is calculated as the weighted average of several fundamental social and economic indicators. Based on a conceptualisation of the World Economic Forum, which defines competitiveness as a set of institutions, policies and factors that determine the level of productivity in a given country, as well as on the EU definition of regional competitiveness as the ability to create an attractive and sustainable living and business environment[14], the IRC was constructed by the National Competitiveness Council. The IRC scores, expressed in the form of rankings, are available at county level. Finally, we used the TEA (total early-stage entrepreneurial activity) indicator developed by the Global Entrepreneurship Monitor (GEM) project, in which Croatia participates since 2002 (Singer, Šarlija, Pfeifer and Oberman Peterka, 2016).[15] The TEA measures early entrepreneurial activity expressed as the proportion of novice entrepreneurs (defined as individuals who started their business not more than three months before the survey) and new entrepreneurs (those who have been paying out salaries and wages for more than three but fewer than 42 months) in the population of 18-64 year-olds. In the analyses presented here, we used the 2014 and 2015 TEA county-level scores.

2.3 STATISTICAL ANALYSIS

The multidimensional model of egalitarian syndrome, developed using a student sample (Štulhofer and Burić, 2015), is replicated here using the identical approach (confirmatory factor analysis with maximum likelihood (ML) estimator). The strength of confirmatory factor analysis lies in its ability to fit a theoretically defined model to empirical data by taking into account measurement error (Byrne, 2009; Hair, Black, Babin and Anderson, 2009; Milas, 2009).

In line with advances in the interpretation of goodness of fit indicators in structural equation modelling (Byrne, 2009; Hair et al., 2009; Hu and Benter, 1999), we use the following criteria, recommended by Kline (2010), when assessing model fit:

(1) SMRM (Standardized root mean square residual) value, a measure of absolute fit, should be equal to or less than 0.05;

[13] See: https://razvoj.gov.hr/o-ministarstvu/regionalni-razvoj/indeks-razvijenosti/112 (February 25, 2016). The DI county scores are available at: https://goo.gl/wWvbsr.
[14] More methodological details can be found at: http://www.konkurentnost.hr/Default.aspx?sec=93.
[15] See: http://www.gemhrvatska.org/.

(2) RMSEA (Root mean square error of approximation) value, a measure of parsimoniousness, should be equal to or less than 0.05;
(3) CFI (comparative fit index) value, a measure of incremental fit (the model of interest is usually compared with the independence model, in which latent variables are unrelated), should be as close as possible to or greater than 0.95.

The model's gender and age invariance is tested using two multi-group analyses that enable a comparison between the model in which all relations among the included variables are fixed across groups (men/women; younger/older participants) and the model that in which relations among variables are determined by collected data. If a difference in fit of these two models is statistically significant ~~(using the Sattora-Bentler test),~~ the assumption of invariance is rejected.

Convergent validity of the egalitarian syndrome scale is tested by correlating the scale scores with the composite indicator of risk aversion (Carter and Yeqing, 2005). In the assessment of the cultural inertia hypothesis, multivariate linear regression analysis was used. Possible consequences of the egalitarian syndrome were explored by zero-order and rank-order correlation analyses.

All analyses were carried out using the IBM-SPSS 22 and AMOS 22 statistical software packages.

3 RESULTS

3.1 CONFIRMATORY TESTING OF THE EGALITARIAN SYNDROME

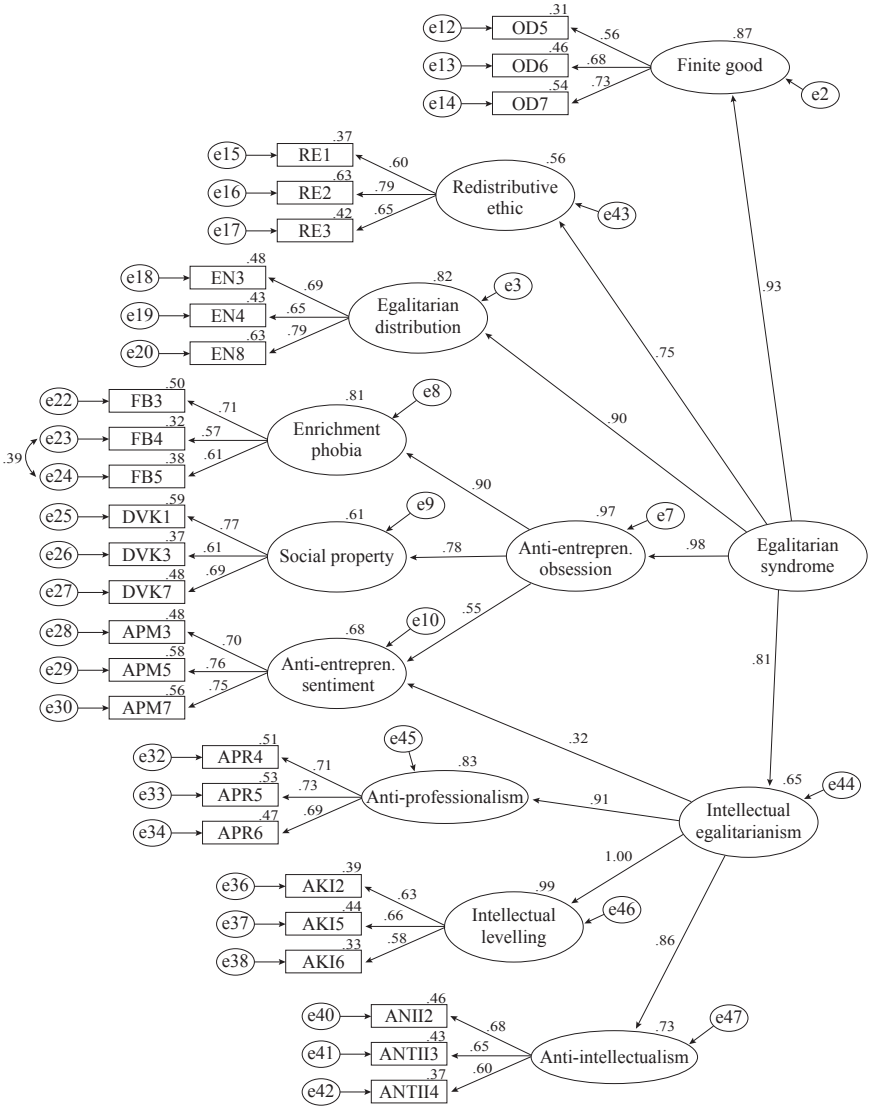
An attempt to replicate the 27-item version of multilevel egalitarian syndrome model (Model A; cf. figure 1) resulted in an acceptable fit to data (Hooper, Coughlan and Mullen, 2008.): $\chi^2_{(311)} = 1190$; SRMR = 0.05; RMSEA = 0.05 (90% CI /confidence interval/ = 0.05 – 0.06); CFI = 0.92. In comparison with the testing of the same model in a student sample (Štulhofer and Burić, 2015), the saturations of five lower-order latent dimensions with a higher-order latent dimension (the egalitarian syndrome) are markedly higher in this general population sample and range from 0.75 to 0.98.

In an effort to develop a shorter composite scale of the egalitarian syndrome scale, next we tested the re-specified model (Model B) with only 15 items (figure 2). As in the previous case, this reduced model also indicated an acceptable fit: $\chi^2_{(84)} = 395$; SRMR = 0.04; RMSEA = 0.06 (90% IP = 0.06 – 0.07); CFI = 0.94. Saturations of the first-order constructs with the second-order construct were comparable with those observed in model A.

In the next step, we carried out two multi-group confirmatory analyses of the 15-item model (Model B) to test gender and age invariance. No significant gender differences were found either in the measurement ($\Delta\chi^2 = 6.3$; $\Delta df = 11$; $p > 0.85$) or in the structural part of the model ($\Delta\chi^2 = 12.3$; $\Delta df = 16$; $p > 0.72$).

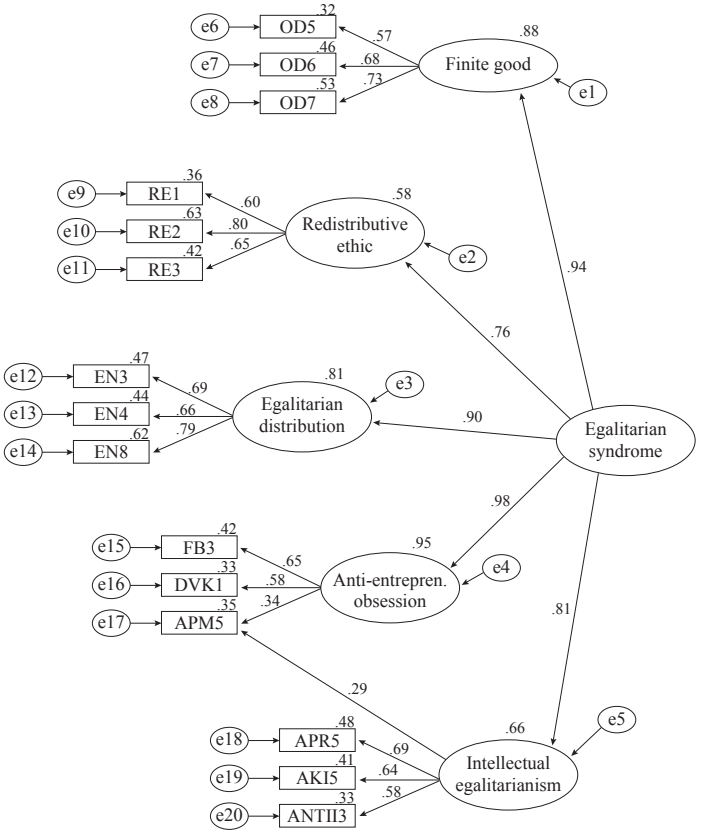
Figure 1

Confirmatory model of the egalitarian syndrome (Model A)



Age invariance was tested by dividing the sample in two large groups that were socialized in different political and economic systems (socialist and centrally-planned system vs. democratic and market-oriented system). The first group consisted of persons aged 60 years and older, while the second group included participants who were born after the collapse of the socialist system (1989), i.e., individuals aged 15-27 years. Again, the group comparison analysis did not ascertain statistically significant differences either in the measurement ($\Delta\chi^2 = 9.9$; $\Delta df = 11$; $p > 0.53$) or the structural part of the model ($\Delta\chi^2 = 16.1$; $\Delta df = 16$; $p > 0.44$), confirming that the model measures the egalitarian syndrome equally well in generations socialized in substantially different political and socioeconomic conditions.

FIGURE 2
Respecified model of the egalitarian syndrome (Model B)



3.2 VALIDATION OF THE EGALITARIAN SYNDROME SCALE

Convergent validity of the egalitarian syndrome scale was tested by exploring its association with risk aversion. First we developed two egalitarian syndrome scales – the longer (SEMA-27) and the shorter version (SEMA-15)[16] – by aggregating values of the items included in Models A and B.[17] Aggregated values were divided by the number of items included to obtain scales ranging from 1 to 5. As expected, both scales statistically significantly correlated with risk aversion ($r_{SEMA\text{-}27} = 0.37$, $p < 0.001$; $r_{SEMA\text{-}15} = 0.35$, $p < 0.001$), with higher acceptance of the egalitarian syndrome being associated with higher risk aversion.

3.3 ACCEPTANCE OF VALUES ASSOCIATED WITH THE EGALITARIAN SYNDROME

In the whole sample, the average SEMA-27 score was 3.87 (SD = 0.69; median value = 3.89). Considering the theoretical range of the scale (1-5), where 1 indicates complete rejection and 5 complete acceptance of the egalitarian syndrome,

[16] For a list of the SEMA-27 and SEMA-15 items see the appendix in Štulhofer and Burić (2015).
[17] Bearing in mind these are nested models, the high correlation between the longer and shorter versions of the scale (r = -0.97) was expected.

the average score points to a dominant acceptance of the egalitarian syndrome. After omitting the extreme values (1 and 5), the national average remained almost unchanged (3.84). Almost a fifth (18%) of respondents were characterised by a result greater than or equal to one standard deviation above the average, which we consider a strong acceptance of values associated with the egalitarian syndrome.

The average scores of the five lower-level dimensions of SEMA-27 varied from 4.06 (SD = 0.69) in the case of the anti-entrepreneurial obsession to 3.68 (SD = 0.95) in the case of the finite good perspective. The anti-entrepreneurial obsession, the norm of egalitarian distribution (M = 3.97, SD = 0.98) and intellectual egalitarianism (M = 3.74, SD = -0.76) were the three most accepted dimensions of the egalitarian syndrome.

At county level, the highest average SEMA-27 scores were found in the Brod-Posavina (4.60), Lika-Senj (4.56) and Bjelovar-Bilogora (4.38) counties. The three counties characterized by the lowest acceptance of the egalitarian syndrome were the Međimurje (3.45), Istria (3.61) and Sisak-Moslavina (3.64) counties.

3.4 TESTING THE CULTURAL INERTIA HYPOTHESIS

A bivariate test of the persistence of the egalitarian syndrome resulted in a small but significant correlation between the SEMA-27 scores and age ($r = 0.12$; $p < 0.001$). To control for possible confounders, multivariate regression analysis was carried out with SEMA-27 as the dependent variable (table 1). Independent variables were gender, age, urban vs. rural dwelling, education, personal income, and occupation (represented by three dummy variables). Since current occupation was asked for, the last indicator reduced sample size by omitted the unemployed, retired and those in school. To explore if age has an indirect influence on the dependent variable, we also tested moderating effect of age, linear and quadratic, on the association between education and SEMA-27 (not shown in the table). The age and education interaction term was built using mean-centred variables.

As shown in table 1, education and urban residence were significantly and negatively correlated with the criterion. In addition, higher-status occupations were positively associated with the outcome, as professionals, upper middle management and clerks reported significantly lower levels of egalitarian syndrome than skilled manual workers. Moderation effect of age was not confirmed. All effect sizes were small ($\beta = -0.10 – -0.19$) and the regression model explained only 13% of variance in the acceptance of the egalitarian syndrome.

To rule out the possibility of a discontinuous relationship between age and the egalitarian syndrome, an additional test was carried out using multivariate logistic regression analysis. Dependent variable was group membership (0 = individuals aged 60 years or older; 1 = individuals aged up to 30 years). Occupation, rural vs. urban dwelling, education, income and SEMA-27 were entered in the model as independent variables. Confirming the robustness of the above reported findings,

the odds of belonging to one of the two contrasted age groups were not significantly associated with the SEMA-27 scores ($p > 0.08$).

Table 1

Socio-demographic predictors/correlates of the acceptance of the egalitarian syndrome (dependent variable = SEMA-27)

	***N* = 662**
	B/β SE[a]
Gender	-0.01 / -0.01 (0.05)
Age	0.00 / 0.03 (0.00)
Residence	
Rural residence (*reference value*)	/
Urban residence	-0.13 / -0.10* (0.05)
Education	
1st tercile (least educated; *reference value)*	/
2nd tercile	-0.21 / -0.16* (0.09)
3rd tercile (best educated)	-0.26 / -0.15* (0.12)
Income	
1st quartile (lowest income levels; *reference value*)	/
2nd quartile	-0.07 / -0.05 (0.08)
3rd quartile	-0.10 / -0.07 (0.08)
4th quartile (highest income levels)	-0.08 / -0.05 (0.09)
Occupation	
Experts and senior management	-0.46 / -0.19*** (0.12)
Middle management and white collar workers	-0.19 / -0.11* (0.07)
Skilled workers (*reference value*)	/
Unskilled workers and farmers	0.05 / 0.03 (0.09)
Adjusted R^2	0.13

[a] *SE = standard error.*

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

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3.5 POSSIBLE CONSEQUENCES OF THE EGALITARIAN SYNDROME PERSISTENCE

To address the hypothesized negative association between the egalitarian syndrome and socioeconomic development at county level we inspected correlations between the SEMA-27 average county values and several indicators of county development levels (per capita GDP, GDP change 2000-2013, the Development Index, the Index of Regional Competitiveness and the 2014 and 2015 TEA index). Bearing in mind the socio-economic specificity of the capital, the analysis was carried with (n = 21) and without the city of Zagreb (n = 20).

As is seen in table 2, the acceptance of the egalitarian syndrome was significantly correlated with all county development indicators. The direction of these associations was as hypothesized: higher SEMA-27 scores corresponded to lower SI and TEA 2014 and 2015 scores, a lower competitiveness ranking, lower county GDP and weaker GDP growth. Effect sizes varied from small to moderate. To provide a more detail insight, we explored the correlations between the five dimensions of the empirically revised egalitarian syndrome model and the DI, IRC, and TEA 2015 scores (not presented in tables). Overall, the strongest associations were found with anti-entrepreneurial obsession (r = -0.39 – 0.62), the norm of egalitarian distribution (r = -0.41 – -0.50) and intellectual egalitarianism (r = 0.24 – 0.26).

Table 2

Associations between the acceptance of egalitarian syndrome (SEMA-27) and the selected indicators of county-level development

	SEMA-27	**(A)**	**(B)**	**(C)**	**(D)**	**(E)**	**(F)**
				r not including the City of Zagreb (*r* including the City of Zagreb)			
SEMA-27	1	-0.34 (-0.30)	0.39 (0.34)	-0.27 (-0.11)	-0.19 (-0.14)	-0.31 (-0.31)	-0.36 (-0.34)
(A) County-level development index (2013)		1	-0.79 (-0.82)	0.65 (0.67)	0.84 (0.86)	0.31 (0.31)	0.43 (0.43)
(B) County-level index of competitiveness (2013)*			1	-0.66 (-0.70)	-0.67 (-0.74)	-0.59 (-0.58)	-0.36 (-0.39)
(C) County GDP (2013)				1	0.63 (0.85)	0.19 (0.15)	0.41 (0.25)
(D) County-level GDP changes (2000-2013)					1	0.18 (0.27)	0.09 (0.35)
(E) County-level TEA[a] (2014)						1	0.34 (0.35)
(F) County-level TEA[a] (2015)							1

Note: The analysis includes the total population of counties (p-values are not applicable).

[a] Index of early entrepreneurial activity.

** Spearman's rank correlation coefficients; other values represent zero-order correlation coefficients.*

4 DISCUSSION

This study successfully replicated the multi-dimensional model of egalitarian syndrome constructed using a student sample (Štulhofer and Burić, 2015). The findings provide strong empirical support for Županov's theoretical contribution. As hypothesized, the egalitarian syndrome appears to be a multi-dimensional sociocultural phenomenon. Furthermore, we established gender and age invariance of both versions of the egalitarian syndrome scale (SEMA-27 and SEMA-15), which is a precondition for their use across different social groups, and explored the scales' convergence validity.

The presented analyses offer at least two important insights. First, we found a wide-spread acceptance of values associated with the egalitarian syndrome among the majority of participants in a nationally representative sample. Second, belonging to a specific age cohort failed to predict the level of acceptance of the egalitarian syndrome, point to cultural inertia or persistence of this sociocultural phenomenon. It was education, occupation (social status) and urban residence that partially explained the distribution of the egalitarian syndrome.

It should be noted that the absence of significant multivariate association between age and SEMA-27 is consistent with the cultural inertia hypothesis. The fact that the acceptance of values associated with the syndrome was similar in different generations, and that the differences in acceptance were related to the effects of (in part trans-generational) socialisation in rural communities, education and professional socialisation,[18] strongly suggests the persistence of the egalitarian syndrome. It is possible that social and economic changes during the 1990s had differential, generation-specific, influence on radical egalitarian values, wiping out the hypothesized differences between younger and older age cohorts. The acceptance of the egalitarian syndrome might thus have increased among the younger generations (as a reaction to the rising uncertainty and the well-publicized irregularities in the privatization process) and simultaneously decreased in the older generations (in accordance with the dominant enthusiasm with democracy and new market values).

Bearing in mind Županov's contention that the germ of the egalitarian syndrome should be sought in agrarian societies, characterized by scarcity and low levels of economic development (Županov, 1970; 1977), we can look at the individual-level predictors as micro markers of a degree of (structural) distance from the traditional agrarian community. Accordingly, one of the next steps in the analysis of the persistence of egalitarian syndrome should be directed toward social categories with the highest SEMA scores. To better understand the social mechanism underlying the egalitarian syndrome, it would be worthwhile testing how the post-socialist transition processes and the related social costs have regenerated or intensified the syndrome[19].

[18] Because of the lack of appropriate indicators, this study can not answer the question whether the effect of occupational status is due to professional or class socialisation (habitus).

[19] Županov also indicated this line of research when he hypothesized about the radicalization of the syndrome in the period of economic stagnation (Županov, 1983:60).

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Although at first sight problematic, the fact that the socio-demographic characteristics of the research subjects have explained a little more than a tenth of the variance in egalitarian syndrome is in accord with the thesis that we are dealing with a cultural phenomenon that cannot be fully explained by individual experiences or interests.[20] The egalitarian syndrome, as Županov described it, is primarily a collective feature, or, to put in more contemporary terms, a value set generated by structural characteristics typical of Croatian society at a lower level of modern development (e.g., the predominance of rural and uneducated population). In this sense, future research should focus on community-level or contextual indicators in predicting the acceptance of radical egalitarianism.

Although fragmentary and lacking in robustness, the findings related to the second hypothesis tend to support Županov's focus on negative links between the acceptance of values associated with the egalitarian syndrome and socioeconomic development.

Županov's central thesis that the egalitarian syndrome is a sociocultural brake on development is backed up by the findings that county-level development indicators were negatively correlated with the egalitarian syndrome. Given the central place that anti-entrepreneurial sentiments, redistribution ethic and anti-intellectualism have in the syndrome, the relationship is hardly surprising. If persistent, these sets of values will continue to impede entrepreneurial activity and, consequently, growth. This is in line with the GEM 2015 study findings that showed that Croatia was in 54th place out of the 60 countries according to the perception of social status of the entrepreneur (Singer et al., 2016). Also suggestive is the conclusion of GEM analyses carried out between 2002 and 2011: in terms of entrepreneurial activity, Croatia is lagging behind other, similarly developed, countries. The Eurobarometer study carried out in autumn 2015 showed that over a half of the EU citizens were in favour of stimulating private investment with public money – compared to less than a half of Croatian citizens.[21]

In the article "Egalitarianism and Industrialism" (Županov, 1970; 1977), Županov devoted a fair amount of attention to low levels of innovativeness and creativity at the time that he saw as factors of social inefficiency.[22] Insights into national innovation and creativity levels are not, it would seem, very much different at the beginning of the twenty first century. According to a 2015 study into global innovativeness, Croatia was ranked 40th among 141 countries, listed behind all the countries of Western Europe and many of Eastern European countries[23].

[20] We owe this insight to one of the anonymous reviewers.
[21] Available at: http://ec.europa.eu/croatia/news/docs/2016/20160229_eb-84-nr-croatia.pdf (February 29, 2016).
[22] Using more contemporary terms, Županov's discussion also touches on the issues related to social capital.
[23] Available at: https://www.globalinnovationindex.org/userfiles/file/reportpdf/gii-full-report-2015-v6.pdf (March 1, 2016).

4.1 THE DIRECTION OF CORRELATION

Strictly methodologically speaking, our findings did not confirm but rather failed to reject the hypothesis of cultural inertia or the persistence of egalitarian syndrome. True confirmation of the hypothesis would require a comparison with an earlier dataset completed in the communist era. Unfortunately, no such data seem to exist (Bernik, 1990). Hence, this study's results can be interpreted in two ways. They may be taken to indicate the persistence of the egalitarian syndrome or, alternatively, they may be used to argue that the egalitarian syndrome is a consequence (and not the cause) of the post-communist transition, which included the 1991-1995 war, and the associated social costs. Although both interpretations are compatible with our findings, the plausibility of the second interpretation seems dependent on its ability to explain how could various models of development (based on different variants of planned and market-oriented economy) that Croatia experienced in the past 50 and more years produce a more or less identical sociocultural toolbox for everyday existence. Put differently, if inadequate socio-economic development is the cause rather than the consequence of the egalitarian syndrome, substantial similarities (i.e., a considerable overlap) is to be expected between the two models of development. Otherwise, it would be hard to explain how Županov was able to describe the phenomenon decades before it was supposedly generated.

The authors of this paper are in favour of a specific combination of the rival interpretations. Although we have no evidence to support the hypothetical scenario that follows, we find it a theoretically plausible and to a certain extent verifiable narration. For example, fragmentary verification might be attempted through retrospective analyses of the reaction to social costs of post-communist transition (Štulhofer, 2000). The egalitarian syndrome, inherited from pre-modern agrarian communities (Županov, 1980), was enthroned by the communist party as the dominant social value, partially as it was fully compatible with the socialist equality of all credo and in part because it was a useful tool for eliminating political competition.[24] In such context, the acceptance of egalitarian syndrome was functional, a useful set of values to navigate in daily life. When socialism collapsed and Croatian society was turned into a democratic, market-oriented system, the acceptance of radical egalitarianism come under pressure. Under changed social conditions, the old values were not capable of directing and facilitating everyday actions. It seems logical that the changed "rules of the social game" required a new set of values – a new toolbox (Swidler, 1986). However, before these new cultural tools could replace the old, high costs of post-communist transition (amplified by the war-related destruction and losses) and the perpetuation of political control over public resources and economic activities reinvigorated the old mores.[25] Before a

[24] For example, independent and critical experts and intellectuals were often accused as "technocrats".

[25] The role of state and political elites has been recently explored by Nistotskaya, Charron and Lapuente (2015). They provide a robust empirical assessment of the relationship between the quality of institutional framework (operationalized as the perceived quality of government) and small and medium-sized entrepreneurial activity in 172 regions of the EU.

new toolbox was tested in practice, we went back to the old and familiar one.[26] According to this hypothetical narrative, the acceptance of the egalitarian syndrome observed in this study may be both the cause and the consequence of the country's suboptimal development. Irrespective of which of these two scenarios is the more realistic, we find Županov's emphasis on the linkage between socioeconomic development and cultural patterns highly relevant for both.

4.2 STUDY LIMITATIONS

This study's findings need to be balanced against several methodological limitations. First, cross-sectional nature of the study makes any causal inferences impossible. Second, our treatment of participants of different age as representatives of different age cohorts or generations is substantially inferior to the dynamic comparison of age cohorts (using repeated cross-sectional data) or to longitudinal panel assessment of change. Unlike these, our approach can not tease apart the effects of ageing, generation-specific culture or cultural changes in general. Third, our analysis failed to take into account the social context in which individuals act. As already mentioned, the characteristics of local communities and social groups might be stronger predictors of the acceptance of egalitarian syndrome than individual characteristics. Future studies should explore the extent to which local characteristics (e.g., the proportion of individuals living in rural settlements, the proportion of highly educated individuals and social mobility rates) predict the acceptance of values associated with the egalitarian syndrome, compared to individual characteristics. Multilevel regression modelling would be the ideal analytic approach to this issue.

Another important restriction pertains to correlations between the acceptance of egalitarian syndrome and the regional development indices. Non-representativeness and small size of county-level subsamples reduced validity and reliability of the analysis. Finally, although certainly not least important, our study omitted several important constructs – such as social solidarity, trust and the norm of reciprocity – which would enable an assessment of the potentially critical link between the egalitarian syndrome and cooperativeness.

5 CONCLUSIONS

Adding to our previous study, we have offered the first systematic operationalisation of Županov's theory and provided evidence suggesting that the egalitarian syndrome remains a phenomenon relevant for the county's socioeconomic development. The multivariate findings presented here confirm Županov's sociological imagination, as well as his empirically-informed theory building skills. In addition, the assessment of the relationship between the egalitarian syndrome and the

[26] Here we are approaching Sztompka's concept of civilizational incompetence (Sztompka, 2000), which is defined as a set of socio-cultural barriers that slowed down the adaptation of the citizens in the former socialist countries to new economic and social circumstances created by the demise of communism. This kind of cultural wall, erected and internalized during the communist era, contains rules, norms, values, habits and symbols, which are for the most part dysfunctional in a post-communist setting.

five county-level development indicators offer some empirical support to Županov's claims that the egalitarian syndrome is an obstacle to societal development. In our view, unresolved issues, such as the question about the direction of association between the syndrome and development, do not diminish the relevance of the Županov's medium-range theory.

In contrast to normative approach, which in our opinion marks the most recent critique of the Županov's theory (Dolenec, 2014), we advocate empirical assessment. Equipped with the proposed measures of the egalitarian syndrome, future studies can explore if the acceptance of values associated with the egalitarian syndrome is systematically linked with developmentally problematic phenomena (e.g., corruption, infringement of norms or a short radius of trust; Delhey, Newton and Weizel, 2011) or with the phenomena that favour development, such as cooperativeness, social capital, civic engagement and respect for norms.

The proposed egalitarian syndrome scales, SEMA-27 and SEMA-15, enable rigorous analysis of the cultural determinants of socioeconomic development in Croatia. Although SEMA-15, being a relatively brief measure, seems usable in general social research, we would like to remind the reader of the useful and still underutilized strategy of planned missing data. The practice enables a reduction of the number of items to be included in the questionnaire (Graham, 2009) by generating missing values which can be relatively straightforwardly imputed using FIML (full information maximum likelihood) method in statistical software packages that support structural modelling (Allison, 2003; Arbuckle, 2013).[27] For example, if the 3-form design is employed (cf. Graham, Taylor, Olchowski and Allision, 2006), only 21 of the SEMA-27 items would need to be included in the questionnaire. In the case of SEMA-15, the number of items would be reduced to 12.

Finally, we would like to propose three broad lines of research in which the use of the proposed scales might be beneficial. We base our proposal on firm belief that the EST represents a theoretical construct that has successfully integrated the structure-action dichotomy. Consequently, one possible research direction would focus on the analysis of social capital and socioeconomic behaviour by investigating associations between the egalitarian syndrome and trust, cooperativeness, civic engagement, and corruption. Another direction would be research into links between the egalitarian syndrome and political preferences, political ideologies, understanding of social justice, perception of good governance and participation in various types of political activities. The third direction would be related to the market economy and entrepreneurial activity. It may be worthwhile to further explore associations between the acceptance of radical egalitarianism, attitudes toward market institutions and participation in various economic activities.

[27] It should be noted that the outcome of planned missingness are values that are missing completely at random.

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The ultimate answer to the question of whether Županov's theory, developed more than forty years ago, can assist us in understanding contemporary socioeconomic development in this country will be primarily empirical. New theoretical explications, even revisions, will likely also be needed and will follow after more empirical work becomes available. To provide answers to *how* the egalitarian syndrome affects socioeconomic development, if at all, these conceptual additions will have to elucidate at least some of the causal mechanisms (Hedström, 2005) that underlie the relationship.

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