Party over pandemic: Polarized trust in political leaders and experts explains public support for COVID-19 policies

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Abstract
Two experiments examined the polarization of public support for COVID-19 policies due to people’s (lack of) trust in political leaders and nonpartisan experts. In diverse samples in the United States (Experiment 1; N = 1,802) and the United Kingdom (Experiment 2; N = 1,825), participants evaluated COVID-19 policies that were framed as proposed by ingroup political leaders, outgroup political leaders, nonpartisan experts, or, in the United States, a bipartisan group of political leaders. At the time of the study in April 2020, COVID-19 was an unfamiliar and shared threat. Therefore, there were theoretical reasons suggesting that attitudes toward COVID-19 policy may not have been politically polarized. Yet, our results demonstrated that even relatively early in the pandemic people supported policies from ingroup political leaders more than the same policies from outgroup leaders, extending prior research on how people align their policy stances to political elites from their own parties. People also trusted experts and ingroup political leaders more than they did outgroup political leaders. Partly because of this polarized trust, policies from experts and bipartisan groups were more widely supported than policies from ingroup political leaders. These results illustrate the potentially detrimental role political leaders may play and the potential for effective leadership by bipartisan groups and nonpartisan experts in shaping public policy attitudes during crises.

Keywords
COVID-19, expertise, party over policy, political attitudes, political polarization, trust

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Addressing crises like the COVID-19 pandemic requires broad public cooperation. Politically polarized reactions to politicians can hinder collective action and public support for policy solutions. As described by former director of the Centers for Disease Control (CDC), Richard Besser, “if you have a politician on the stage, there’s a very real risk that half the nation is going to do the opposite of what they say” (Duhigg, 2020).

Previous research suggests that policies proposed by political elites—power-wielding politicians, policymakers, and leaders of social movements, interest groups, and think tanks—can polarize public opinion, undermining broad policy support (Druckman et al., 2021). This polarizing effect, referred to as placing party over policy (G. L. Cohen, 2003), occurs across policy domains (Mason, 2015; Van Boven & Sherman, 2021), including abortion (Arceneaux, 2008), climate change (Ehret et al., 2018; Van Boven et al., 2018), and public assistance (Béland et al., 2015; G. L. Cohen, 2003; Peterson, 2011).

We examined whether the proposal of policies by political elites would polarize public opinion toward COVID-19. In the spring of 2020, the pandemic was a novel, immediate, shared threat—features that social psychological theory suggests should minimize group differences, which might have prevented COVID-19 from becoming polarized. We also examined an explanation for why this polarization might nevertheless occur: namely, that political leaders polarize public opinion because people trust leaders from their own parties and distrust leaders from opposing parties. Finally, we tested whether policies proposed by widely trusted experts and bipartisan groups would reduce polarization and increase overall policy support compared with policies from political leaders. Answering these questions contributes to theories of how the social mind works by examining the manifestation of psychological phenomena in a specific context, which is theoretically important because the functioning of psychological processes varies across situations (Kenny & Judd, 2019). Answering these questions also provides evidence about how social psychological theories can bolster responses to societal challenges (Fox & Sitkin, 2015; Sullivan, 2020).

Societal leaders, the public, and psychological scientists alike hoped for the suspension of partisanship when confronting the COVID-19 pandemic. This was expressed well by Jacinda Ardern, Prime Minister of New Zealand (Global Citizen, 2022):

COVID-19 highlights how truly interdependent we all are. How reliant we are on cooperation, communication, and compassion to successfully combat the virus. It highlights how important it is that we work together for a sustainable recovery that delivers for our economies and our planet.

This aspiration for cooperation instead of partisanship fits with classic and contemporary social psychological research. When confronting common threats, otherwise divided groups tend to like each other more (Sherif & Sherif, 1953), and people tend to adopt shared identities (Flade et al., 2019), exhibit less prejudice toward outgroups, and be more likely to help outgroup members (Dovidio & Morris, 1975; Feshbach & Singer, 1957). People had direct experience with the unfolding COVID-19 pandemic and the impact of policies to address it at the time of our studies—arguably more direct experience than most people have with policies addressing other polarized issues such as climate change. This experience might have enabled people to evaluate COVID-19 policy proposals without being influenced by the political identities of the policy proposers (Converse, 1964; Green et al., 2008). Political identity divisions run deep, however, as do the social psychological processes that create and maintain them (van Bavel & Pereira, 2018), suggesting that COVID-19 policies from political leaders would polarize public opinion.

The present studies laid the groundwork for subsequent research, conducted in August 2020, that examined similar questions about the polarizing effect of political elites and the depolarizing effect of experts and bipartisan teams in the context of COVID-19 (Flores et al., 2022).
We conducted the experiments reported in the current paper in April 2020, when, by some measures, COVID-19 was not yet highly polarized. At that time, the percentage of Republicans (about 52%) and Democrats (about 59%) who said that COVID-19 was a major threat diverged by about 7% (Deane et al., 2021). When we conducted our subsequent research in August 2020 (Flores et al., 2022), the percentage of Republicans (about 46%) and Democrats (about 85%) who said that COVID-19 was a major threat diverged by a substantially larger 39% (Deane et al., 2021). The studies in this paper are thus a stronger test of how political leaders polarize public opinion in the context of a relatively nonpolarized, novel, and shared threat.

**Political Elites Polarize Policy Attitudes**

People categorize themselves and others into ingroups and outgroups such as political parties (Tajfel, 1981; Turner et al., 1987). An affiliation with the Democratic or Republican party in the United States, and with the Labour or Conservative party in the United Kingdom, is a social identity as much as an expression of political ideology (Achen & Bartels, 2017; Mason, 2015). Political identities sensitize people to information associated with political elites such that support for (or opposition to) policies not only reflects policy content but also signals the sociopolitical identities associated with those policies (G. L. Cohen, 2003; Dias & Lelkes, 2021; Druckman et al., 2013; Mason, 2015; Zaller, 1990, 1992, 1994).

People exhibit polarized reactions to political elites’ policies for several reasons. People signal their political identities by adopting stances that are like political ingroups and unlike outgroups; the more strongly people identify with political groups, the more effort they put into signaling those identities (Brick et al., 2017; Chan et al., 2012; Cole et al., 2022; Iyengar et al., 2012; Mackie, 1986). People are more skeptical of proposals from political outgroups than from ingroups (Kahan et al., 2012; Knowles & Ditto, 2012; Taber & Lodge, 2006), which contributes to devaluing outgroups’ ideas (Griffin & Ross, 1991; Maoz et al., 2002; Ross & Stillinger, 1991; Ross & Ward, 1996). In our experiments, we expected that people would support COVID-19 policies proposed by ingroup political leaders more than the same policies proposed by outgroup political leaders.

**Polarized Trust Influences Policy Attitudes**

Trust in political groups and leaders may explain political elites’ influence on public policy attitudes (Arceneaux & Kolodny, 2009; Haas & Khadka, 2020; Nicholson, 2012). Trust characterizes a relationship in which one person assumes vulnerability to another based on positive expectations of the other’s behavior (Evans & Krueger, 2009; Rousseau et al., 1998). Political trust comprises citizens’ expectations of the benevolent intentions of the government and influences their support for governmental institutions as well as their willingness to be governed and follow government recommendations (Hamm et al., 2019; Hetherington, 2005; Hetherington & Husser, 2012). Stronger trust in government relates to greater adherence to governmental recommendations across countries (Travaglino & Moon, 2021). The absence of trust contributes to government opposition (Davies et al., 2021). For example, in the United Kingdom, the general public’s trust in the government declined as the pandemic progressed in 2020, which inhibited the government’s ability to manage the pandemic (Davies et al., 2021).

People trust their ingroup political leaders more than outgroup political leaders (Druckman et al., 2021; Finkel et al., 2020; Iyengar et al., 2019); in the United States, Democrats trust Democratic elites more than Republican elites, and the reverse is true for Republicans (Finkel et al., 2020). This may reflect people’s general tendency to view the opposing political group as more swayed by ideological and motivational bias than the political ingroup (Pronin et al., 2002; Robinson et al., 1995; Ross & Ward, 1995; Sherman et al., 2003). In recent years, polarized political trust has increased in the United States, the United Kingdom, and elsewhere (Boxell et al.,
In our experiments, we expected to replicate polarized trust between leaders of the ingroup and outgroup political parties. We also expected that trust in political elites proposing a policy would be correlated with policy support in our experiments; that people would support policies more that were proposed by those they trust (i.e., the political ingroup) than by those they distrust (i.e., the political outgroup).

A closely related yet distinct psychological construct is trustworthiness. While one person trusting another comprises a relationship between two people, one person judging another as trustworthy is independent of their relationship and constitutes judgments about the other person’s attributes of competence, benevolence, and integrity (Grimmelikhuijsen & Knies, 2017; Hendriks et al., 2015). People or institutions can be deemed trustworthy even when they are not trusted (Levi & Stoker, 2000). For example, a leader from an opposing political group can be judged as trustworthy based on their credentials, personality or competence, yet still not be trusted to act in the public interest. In our second experiment, we examined whether trustworthiness would follow similar patterns as polarized trust—whether people would judge ingroup political elites as more trustworthy than outgroup political elites and whether trustworthiness would be correlated with policy support.

Expert Policies Bypass Polarization

If polarized trust partly explains why the proposal of policies by political elites polarizes policy support, then policies proposed by sources trusted by both parties should be less polarized and more widely supported than those proposed by political elites from only one party. Nonpolitical experts may be one such widely-trusted source.

Both liberals and conservatives trust experts at relatively high levels (Hamilton & Safford, 2020). To be sure, liberals value intellectualism and scientific expertise more, and are more trusting of experts, than conservatives do and are (Kossowska et al., 2021; Motta, 2018; Pechar et al., 2018; Stein et al., 2021), and liberals in the United States trust experts more than conservatives do (Funk et al., 2019; Gauchat, 2012; Hmielowski et al., 2014; Simonov et al., 2020). Despite these differences, both liberals and conservatives trust experts, more than they trust politicians—especially more than they trust outgroup politicians (Funk et al., 2019; van der Linden et al., 2019). In the United States, both Democrats and Republicans express confidence that scientific experts act in the public’s best interest (Funk et al., 2019). People trusted experts and organizations such as the CDC for information about the Zika virus regardless of partisanship (Hamilton & Safford, 2020).

Expertise is central to perceived source credibility (Hovland et al., 1953; Levi & Stoker, 2000; Petty & Wegener, 1998) and source trustworthiness (Hendriks et al., 2015), and can make experts particularly persuasive (DeBono & Harnish, 1988; McGinnies & Ward, 1980; Pallak et al., 1983; Petty et al., 1981).

We therefore expected that, on average, spanning political parties, people would support COVID-19 policies from experts more than policies proposed by political leaders from a single party in our experiments. We also hypothesized that trust might explain higher support for expert-proposed than politician-proposed policies.

Polarization Emerges Across Countries

We conducted similar experiments in the United States (Experiment 1) and the United Kingdom (Experiment 2). Testing our hypotheses across countries is important because research on political elite influence has typically focused on Democrats and Republicans in the United States (e.g., G. L. Cohen, 2003; Druckman et al., 2013; Ehret et al., 2018; Van Boven et al., 2018). Although informal comparisons suggest that political identities of policy proposers have larger impacts in the United States than in other countries (Bullock, 2011; Colombo & Kriesi, 2017), direct comparisons have been hampered because different countries often confront different policy issues. Many issues are polarized in...
some countries but not in others, such as wel-
fare (G. L. Cohen, 2003) and climate change
(Ehret et al., 2018; Van Boven et al., 2018) in the
United States, and infrastructure and drinking
age (Brader et al., 2013) in Europe. Any observed
difference across countries in such work could
therefore reflect differences between issues.
Conducting parallel experiments with similar
policy proposals about the same policy issue in
multiple countries allows a more direct empirical
test of differences in reactions to policy propos-
ers. Prior to COVID-19, there had been little
research empirically comparing the polarizing
influence of policy proposals by political elites
across countries in the same policy context (see
also Flores et al., 2022).

The United States and the United Kingdom
are useful comparison countries because they are
similar on key cultural dimensions such as indi-
vidualism (Hofstede et al., 2010). And although
the United States has a long-standing two-party
system, whereas the United Kingdom formally
has a multiparty system (González et al., 2008;
Martini & Torcal, 2019; Reiljan, 2020; Westwood
et al., 2018), both countries have two prominent
political parties: The Democratic and Republican
parties in the United States, and the Labour and
Conservative parties in the United Kingdom
(Marchal & Watson, 2019).

Overview of the Present
Experiments

In our experiments, participants read hypothe-
ical COVID-19 policy proposals based on actual
policies that were under consideration by politi-
cal leaders at the time the experiments were con-
ducted. We experimentally manipulated whether
the policies were proposed by Democratic or
Republican (Experiment 1), or Labour or
Conservative (Experiment 2), political leaders,
or by scientific and policy experts. We predicted
that (a) participants would support COVID-19
policies more when proposed by ingroup politi-
cal leaders than when proposed by outgroup politi-
cal leaders, (b) participants would support
expert-proposed policies more than policies
proposed by political leaders from either party,
(c) participants would trust ingroup political
leaders more than outgroup political leaders, and
experts more than political leaders, and (d)
tergroup trust would be correlated with polar-
ized policy attitudes. We expected to observe
similar patterns in the United States and the
United Kingdom. We explored potential cross-
country differences.

All data, materials, and analyses are available
on the Open Science Framework (OSF; https://
osf.io/4xdpa/). Both experiments were reviewed
and approved by the Research Ethics Committee
of Swansea University. After the studies, partici-
pants indicated whether they consented to their
data being included in the analyses and data from
those who did not consent were removed.

Experiment 1: US Partisans,
Political Leaders, and Experts

In the first experiment, participants read about
one of two COVID-19 policies, randomly
assigned. The policy contents were plausible and
debated among political elites in the United States
when the experiment was conducted in April
2020. We varied whether the policy emphasized
public health or economic concerns to examine
whether the polarizing effect of political elites
would emerge regardless of or be moderated by
policy content.

Method

Participants. A power analysis using the online
simulation-based calculator developed by Lakens
and Caldwell (2021) indicated that a sample of
1,800 would afford power of .80 to detect inter-
action effects of $d = 0.20$ in the $3 \times 4$ analysis
of variance originally planned in this study. Antici-
ating exclusions, we recruited a larger number of
participants ($N = 2,060$) from CloudResearch
Prime Panels (Chandler et al., 2019) on April 4,
2020. Participants were compensated at the
standard rates of Prime Panels. We excluded 258
participants who did not opt in to data inclusion.
This resulted in 1,802 U.S. adults (1,069 women,
681 men, 7 other, 45 non-responses; \( M_{\text{age}} = 43.41, SD_{\text{age}} = 17.11; 4\% \text{ Asian American, } 9\% \text{ Black, } 5\% \text{ Hispanic, } 1\% \text{ Native American, } 79\% \text{ White, and } 2\% \text{ other}. \) We excluded from analyses 24 of these participants who gave incoherent answers to open-ended questions (Chmielewski & Kucker, 2020).

**Design.** We randomly assigned participants to read a COVID-19 policy in a 3 (participant partisan identification: Democrat, Republican, or independent) \( \times 4 \) (policy proposers: Democratic, Republican, bipartisan, or expert) \( \times 2 \) (policy emphasis: economic or public health emphasis) factorial design (see Table 1).

**Measures.** Participants reported partisan identification using two standard branching questions from the American National Election Studies (ANES, 2016), as in previous research (Van Boven et al., 2018). The first question asked whether participants identified as Democrat, Republican, independent, with another party, or had no preference. Those who did not indicate identification with the Democratic or Republican parties were then asked which party they felt closer to. From these responses, we categorized participants as Democrat, Republican, or independent. If participants felt closer to one party over the other, they were classified with that party. If they indicated feeling closer to neither party, they were classified as independent. This resulted in 824 Democrats, 698 Republicans, 236 independents, and 44 participants who did not answer. Participants also reported how important their partisan identification was (1 = not at all important, 7 = very important).

Participants then reported their attitudes toward the policy they read (−3 = strongly oppose, +3 = strongly support). As a measure of behavioral support, participants indicated whether they would write an email to their congressional representative in support of this proposal (yes or no).

We measured trust by asking participants, “How much do you distrust or trust each of the following groups: Democratic politicians; Republican politicians; experts such as scientists,
medical doctors, and policy analysts” ($-3 = \text{strongly distrust}, +3 = \text{strongly trust}$; ANES, 2016).

As part of a separate investigation to gauge personal criteria for policy support, participants considered two factors and whether they “believe [they] should ideally influence [their] your personal opinions about this proposal:” “the content of the plan . . . regardless of the position of [proposal group]” and “the position of [proposal group] . . . regardless of the content of the plan” (1 = not at all, 5 = a great deal). We randomly assigned participants to report personal criteria either before or after reporting policy support to examine whether reflecting on these factors influenced policy attitudes (Moche et al., 2022; Ramos et al., 2022).

We included manipulation checks that most participants answered correctly (68% and 94% across questions). To preserve random assignment, we included all participants in analyses, but the key patterns of significance remained the same when excluding participants who failed the manipulation checks. At the end of the study, participants selected whether to opt in to data inclusion (258 declined).

The survey included additional measures not analyzed here (see OSF), including risk perception, conspiracy mentality, empathic concern, and behavioral intentions to take other precautions against COVID-19.

Results

We analyzed data using linear and logistic regressions with contrast coded predictors and their interactions. Contrast codes and interactions were included for comparisons between levels of each of our four factors: participant partisan identification, policy proposers, policy emphasis, and question order (see Table 2). The question order of reporting personal criteria for evaluating the policy did not affect or significantly moderate the key findings, so it is not

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<th>Predictors</th>
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<td>Democrats versus Republicans</td>
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<td>Partisans versus independents</td>
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<th>Predictors</th>
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<td>Democratic versus Republican</td>
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<td>Partisan versus bipartisan and expert</td>
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<th>Predictor</th>
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<td>Economic versus public health</td>
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<th>Predictor (not discussed in the text)</th>
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<td>Before versus after dependent variables</td>
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Note. Orthogonal contrast codes allow categorical variables to be included in linear regressions, comprising an analysis equivalent to an Analysis of Variance (ANOVA) but allowing for planned comparisons between conditions without requiring post hoc tests. This provides more precise single degree of freedom tests of key hypotheses than a traditional ANOVA.
discussed further; however, we left the factor representing the manipulation in the models to account for the preregistered hypothesis that it might influence policy opinion and partial out any variance caused by this manipulation.

Political elites polarize policy attitudes. Participants supported COVID-19 policies proposed by ingroup political elites more than the same policies proposed by outgroup political elites (see Figure 1). Democratic participants reported more favorable policy attitudes when Democratic political leaders proposed the policies ($M = 1.25, SD = 1.63$) than when Republican political leaders proposed them ($M = 0.88, SD = 1.61; b = −0.39, 95% CI [−0.71, −0.07], t(1755) = −2.38, p = .017, \eta^2_p = .003$). Republican participants reported more favorable policy attitudes when Republican political leaders proposed the policies ($M = 1.04, SD = 1.65$) than when Democratic political leaders proposed them ($M = 0.42, SD = 1.92; b = 0.61, 95% CI [0.27, 0.95], t(1755) = 3.48, p = .001, \eta^2_p = .007$). This resulted in a significant interaction between participant partisan identification and Democratic versus Republican policy proposal ($b = 1.00, 95% CI [0.53, 1.47], t(1755) = 4.17, p < .001, \eta^2_p = .010$). Independents’ policy attitudes were not significantly different when Democrats ($M = 0.54, SD = 1.67$) or Republicans ($M = 0.62, SD = 1.42; b = 0.07, 95% CI [−0.52, 0.67], t(1755) = 0.24, p = .811, \eta^2_p < .001$), proposed the policy.

Participants supported the policy emphasizing economic considerations with shorter lockdowns more ($M = 1.34, SD = 1.46$) than the policy emphasizing public health with longer lockdowns ($M = 0.74, SD = 1.79; b = −0.59, 95% CI [−0.77, −0.41], t(1755) = −6.54, p < .001, \eta^2_p = .

Figure 1. Means of policy support ($−3 =$ strongly oppose, $+3 =$ strongly support) by experimental condition and participant partisan identification.

Note: Error bars represent standard errors. Each jittered point represents a participant’s response.
The three-way interaction between policy type, participant partisan identification, and Democratic or Republican proposers was not significant, ($b = 0.38$, 95% CI $[-0.56, 1.32]$, $t(1755) = 0.78$, $p = .555$, $\eta^2_p < .001$). Thus, the influence of the policy proposers was not significantly different by policy focus.

Participants’ willingness to send an email to their congressional representative exhibited the same pattern as their policy support (see Figure 2). Democrats were less likely to write an email supporting Republican-proposed policies (33.5%) than Democrat-proposed policies (45.2%; odds ratio (OR) = 0.60, 95% CI [0.40, 0.91], $z = -2.42$, $p = .016$, $\eta^2_p = .003$). Republicans were more likely, although not significantly so, to write an email supporting Republican-proposed policies (33.0%) than Democrat-proposed policies (26.1%; OR = 1.43, 95% CI [0.88, 2.28], $z = 1.43$, $p = .154$, $\eta^2_p = .001$). Across both Democratic and Republican participants, this resulted in a significant interaction between participant partisan identification and Democratic versus Republican policy proposers (OR = 2.35, 95% CI [1.26, 4.43], $z = 2.66$, $p = .008$, $\eta^2_p = .004$). Independent participants did not differ on their likelihood to write an email between the Democratic and Republican proposer conditions (OR = 1.02, 95% CI [0.40, 2.77], $z = 0.04$, $p = .972$, $\eta^2_p < .001$).

Democrats supported the policies more ($M = 1.20$, $SD = 1.59$) than did Republicans ($M = 0.92$, $SD = 1.76$; $b = -0.31$, 95% CI $[-0.48, -0.15]$, $t(1755) = -3.75$, $p < .001$, $\eta^2_p = .008$). Independents were less supportive ($M = 0.75$, $SD = 1.57$) than Democrats and Republicans on average ($M = 1.07$, $SD = 1.67$; $b = -0.29$, 95% CI $[-0.52, -0.07]$, $t(1755) = -2.55$, $p = .011$, $\eta^2_p = .004$). Republicans were also less likely (36.8%) than were Democrats (41.8%) to write an email (OR = 0.77, 95% CI [0.62, 0.95], $z = -2.40$, $p =$...
.016, \eta^2_p = .003), with independents (26.3%) less likely to send an email than the average of Democrats and Republicans (39.5%; OR = 0.54, 95% CI [0.38, 0.74], \chi = −3.66, p < .001, \eta^2_p = .008). Note that the effect sizes of the differences between Democrats and Republicans for the two dependent measures (\eta^2_p = .008 and .004, respectively) are similar in magnitude to the effect sizes for the influence of the policy proposers (\eta^2_p = .010 and .004 for policy support and emails, respectively). The polarizing effects of political elites were thus similar in magnitude to the overall difference between Democrats and Republicans.

**Expert and bipartisan policies.** Participants supported policies proposed by experts and by a bipartisan group more than policies proposed by either Democratic or Republican elites.1 Collapsing across participant partisan identification, participants supported bipartisan- and expert-proposed policies (M = 1.18, SD = 1.62) more than Democrat- and Republican-proposed policies (M = 0.88, SD = 1.70; b = 0.29, 95% CI [0.14, 0.44], \chi(1755) = 3.71, p < .001, \eta^2_p = .008). Participants’ support of expert-proposed (M = 1.28, SD = 1.60) and bipartisan-proposed policies was similar (M = 1.07, SD = 1.62); b = 0.18, 95% CI [−0.03, 0.40], \chi(1755) = 1.68, p = .094, \eta^2_p = .002). Participants also reported comparable support of Democrat- (M = 0.83, SD = 1.79) and Republican-proposed policies (M = 0.92, SD = 1.61; b = 0.07, 95% CI [−0.15, 0.29], \chi(1755) = 0.64, p = .525, \eta^2_p < .001).

Similarly, participants were more likely to write emails supporting expert- and bipartisan-proposed policies (41.3%) than supporting Democrat- or Republican-proposed policies (34.0%; OR = 1.37, 95% CI [1.13, 1.67], \chi = 3.14, p = .002, \eta^2_p = .006). Participants were comparably willing to email in support of expert- versus bipartisan-proposed policies (OR = 1.00, 95% CI [0.77, 1.31], \chi = 0.02, p = .988, \eta^2_p < .001), and were less willing to email in support of Republican- than Democrat-proposed policies (OR = 0.87, 95% CI [0.65, 1.15], \chi = −0.99, p = .321, \eta^2_p = .001).

**Polarized trust.** As expected, both Democratic and Republican participants trusted political leaders from their ingroup (M = 1.02, SD = 1.56) and distrusted political leaders from their political outgroup (M = −1.34, SD = 1.70; \chi(1520) = 41.70, p < .001, \eta^2_p = .533; see Figure 3). Participants also trusted experts (M = 2.01, SD = 1.24) more than they trusted outgroup political leaders (\chi(1520) = 64.16, p < .001, \eta^2_p = .730), and more than ingroup political leaders (\chi(1520) = 23.68, p < .001, \eta^2_p = .269). Independents trusted experts (M = 1.24, SD = 1.46) more than they trusted Democratic and Republican political leaders on average (M = −0.70, SD = 1.33; \chi(1756) = 19.87, p < .001, \eta^2_p = .184), whom they did not differentially distrust, (\chi(1756) = −0.56, p = .578, \eta^2_p < .001).

Participants’ trust was correlated with their policy support. In multiple linear regressions, participants’ trust in the group proposing the policy, controlling for partisan identification and for policy proposers condition, predicted policy attitudes (b = 0.37, 95% CI [0.31, 0.42], \chi(1755) = 13.85, p < .001, \eta^2_p = .101), and their willingness to send emails OR = 1.51, 95% CI [1.39, 1.64], \chi = 9.95, p < .001, \eta^2_p = .053.2

**Discussion**

These results provide evidence that COVID-19 policies proposed by political leaders from the Democratic or Republican party polarize public opinion in the United States, whereas policies proposed by bipartisan groups or experts are more widely supported and less polarizing. Participants supported policies and were more willing to write emails to policymakers in support of policies proposed by their political ingroup than those from the political outgroup. They also supported and were more willing to write emails in support of expert- and bipartisan-proposed policies than policies proposed by politicians. The higher support for bipartisan- and expert-proposed policies emerged among both Democrats and Republicans, which is notable considering common discussion about Republicans trusting experts much less than do Democrats (Funk et al., 2019). Thus, the possibility that polarization can be avoided by bipartisan and expert leadership provides a concrete recommendation to address polarized societal issues.
The results support the explanation that the proposal of policies by political elites influences public policy support because people support policies more from trusted rather than distrusted sources. Participants reported that they trusted ingroup political leaders and experts while distrusting outgroup political leaders. Notably, people also reported higher trust in experts than in ingroup political leaders, indicating the power of expert leadership on global challenges such as COVID-19. Correlational evidence indicated that trust may explain the influence of political leaders and experts on personal policy attitudes.

Experiment 2: UK Partisans, Political Leaders, and Experts

We next examined the influence of political elites on COVID-19 policy support in the United Kingdom, in a close replication of Experiment 1. We made several minor design changes. We used only the public health policy with longer lockdowns because the economic policy was not plausible in the United Kingdom at the time of data collection. Other changes to the policy description reflected the U.K. political landscape and the COVID-19 pandemic situation at the time. We removed the bipartisan proposers condition to maximize power to detect the effect of partisan influence.

As previously described, the degree to which people are perceived as having trustworthy traits is distinct from the degree to which they are trusted. Trustworthiness is an evaluative judgment of a person’s character, whereas trust denotes a relationship in which one person concedes vulnerability to the other, with positive expectations of their behavior (Levi & Stoker, 2000). We included an
established multidimensional measure of perceived trustworthiness of the policy proposer in this experiment (Hamm et al., 2019; Hendriks et al., 2015; Mayer et al., 1995). Participants indicated how much the policy proposers had traits of benevolence, competence, and integrity; components of trustworthiness (Grimmelikhuijsen & Knies, 2017). We explored whether perceived trustworthiness would exhibit the same pattern as trust that was observed in Experiment 1.

Method

Participants. A power analysis using the same calculator as in Experiment 1 (Lakens & Caldwell, 2021) indicated that a sample of 1,350 would afford power of .80 to detect interaction effects of $d = 0.20$ in the $3 \times 3$ design originally planned in the study. Anticipating exclusions, we recruited a larger sample than the power analyses called for ($N = 1,867$) from Prolific Academic, in exchange for a payment of £1.88 ($2.40) per participant. Data were collected on April 27–28, 2020. Participants were British citizens residing in the United Kingdom. To obtain a sample of participants best suited to test our hypotheses, we used Prolific Academic’s prescreening criterion to select only people who voted for the Labour or the Conservative party in the 2019 U.K. general election. This resulted in a sample with more self-identified Labour (50%) and Conservative (47%) participants than those in the British Election Survey (38% and 29%, respectively; Fieldhouse et al., 2018). The final sample excluded 33 participants who did not opt in for data inclusion, including participants who indicated they did not want their data included, but to be conservative about consent, also participants who on a second question asking if they were sure about excluding their data did change their mind and offer data inclusion. The resulting sample included 1,834 adults (1,109 women, 634 men, 9 other, 82 non-responses; $M_{age} = 35.73$, $SD_{age} = 13.44$; 5% Asian/Asian British, 2% Black/African/Caribbean British, 2% mixed/multiple ethnic groups, 86% White, < 1% other, 4% non-responses). We screened open-ended questions for incoherent answers as in Experiment 1, but none warranted exclusion.

Design. We randomly assigned participants to read a COVID-19 policy in a $3 \times (participant partisan identification: Labour, Conservative, or neither) \times 3$ (policy proposers: Labour, Conservative, or expert) factorial design (see Table 3).

Measures. Participants reported partisan identification using two branching questions, like those in Experiment 1. There were 908 Labour party participants, 848 Conservative party participants, 66 not identifying with either party, and three participants who declined to provide affiliation. Participants also reported self-importance of partisan identification ($1 = not at all important, 7 = very important)$.

<table>
<thead>
<tr>
<th>Table 3. Key experimental manipulation for Experiment 2.</th>
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<tbody>
<tr>
<td>Three policy proposers conditions</td>
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<tr>
<td>Conservative or Labour conditions</td>
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<tr>
<td><strong>“A Conservative [Labour] group has proposed the</strong></td>
</tr>
<tr>
<td><strong>following plan. Assume that the group consists of</strong></td>
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<tr>
<td><strong>major Conservative- [Labour-] elected members of</strong></td>
</tr>
<tr>
<td><strong>Parliament, Conservative Government officials [Labour</strong></td>
</tr>
<tr>
<td><strong>Shadow secretaries], and prominent conservative</strong></td>
</tr>
<tr>
<td><strong>[left-wing] policy analysts and “think tanks.” Further,</strong></td>
</tr>
<tr>
<td><strong>suppose that Prime Minister Boris Johnson [the Labour</strong></td>
</tr>
<tr>
<td><strong>Party leader and Opposition leader Keir Starmer</strong></td>
</tr>
<tr>
<td><strong>supports the plan.”</strong></td>
</tr>
<tr>
<td>Expert condition</td>
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<tr>
<td><strong>“A team of experts including medical doctors</strong></td>
</tr>
<tr>
<td><strong>from the NHS, economists, university scientists,</strong></td>
</tr>
<tr>
<td><strong>and non-partisan policy analysts have proposed</strong></td>
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<tr>
<td><strong>the following plan. Assume that the group consists of</strong></td>
</tr>
<tr>
<td><strong>leading experts from premier institutions such as</strong></td>
</tr>
<tr>
<td><strong>Imperial College London, University of Oxford, The</strong></td>
</tr>
<tr>
<td><strong>London School of Hygiene &amp; Tropical Medicine.”</strong></td>
</tr>
</tbody>
</table>
After reading the policy, participants reported their attitudes toward the policy they read (−3 = strongly oppose, +3 = strongly support). As a measure of behavioral intention, participants indicated whether they would write an email to their local Member of Parliament (MP) supporting the policy (yes or no). Using the same measure as in Experiment 1, participants reported how much they trusted each of three groups: Labour politicians, Conservative politicians, and “experts such as scientists, medical doctors, and policy analysts” (−3 = strongly distrust, +3 = strongly trust).

We measured the perceived trustworthiness of the policy proposers using the Muenster Epistemic Trustworthiness Inventory (Hendriks et al., 2015). Participants indicated how much policy proposers had the trustworthy traits of benevolence (moral/immoral, ethical/unethical, responsible/irresponsible, and considerate/inconsiderate; $\alpha = .89$), competence (competent/incompetent, intelligent/unintelligent, well-educated/poorly educated, professional/unprofessional, experienced/inexperienced, and qualified/unqualified; $\alpha = .92$), and integrity (sincere/insincere, honest/dishonest, just/unjust, and fair/unfair; $\alpha = .87$; −3 = most negative, +3 = most positive). These three subscales were highly correlated (all $r > .83$) and averaged into a single composite measure of trustworthiness, as in previous research (Hendriks et al., 2015).

As part of a separate investigation, we manipulated perceived shared identity with other Britons in half of the participants and social connectedness with other Britons in the other half of the participants, to examine whether these affected policy support (see OSF).

At the end of the study, participants selected whether to opt in to data inclusion (33 declined). The survey included additional measures not analyzed here (see OSF).

**Results**

We used linear and logistic multiple regressions with contrast-coded predictors and their interactions (see Table 4). Contrast codes were included for comparisons between levels of each of our three factors: participant partisan identification, policy proposers, and shared identity and connectedness. Shared identity and connectedness did not affect or significantly moderate the key findings, so it is not discussed further; however,
we left the factor representing the manipulation in the models to account for the preregistered hypothesis that it might influence policy opinion and partial out any variance caused by these manipulations.

Political elites polarize policy attitudes. Following similar patterns as in Experiment 1, Conservative participants supported the Conservative-proposed \((M = 1.47, SD = 1.55)\) policy more than the Labour-proposed policy \((M = 1.17, SD = 1.59; b = 0.31, 95\% \text{ CI} [0.07, 0.55], t(1754) = 2.52, p = .012, \eta^2_p = .004;\) (see Figure 4). However, Labour participants were not differentially supportive of Conservative-proposed \((M = 1.55, SD = 1.24)\) and Labour-proposed policies \((M = 1.50, SD = 1.43; b = 0.06, 95\% \text{ CI} [-0.17, 0.29], t(1754) = 0.49, p = .626, \eta^2_p < .001).\) The interaction between Labour versus Conservative participant partisan identification and Labour versus Conservative policy proposers was not significant, indicating that across the full sample, participants did not support policies from their own party significantly more than those from the opposing party \((b = 0.25, 95\% \text{ CI} [-0.08, 0.58], t(1754) = 1.47, p = .143, \eta^2_p = .001).\) However, this nonsignificant two-way interaction effect interacted significantly with participant partisan identification such that Conservative participants were more affected by ingroup versus outgroup policy proposal than were Labour participants \((b = -0.62, 95\% \text{ CI} [-0.75, -0.08], t(1690) = -2.45, p = .015, \eta^2_p = .004),\) reflecting the significant effect of Labour versus Conservative policy proposers for Conservative but not for Labour participants. Participants who did not identify with either party did not differ on their attitudes toward Conservative-proposed \((M =
Cole et al.

1.56, $SD = 1.58$) and Labour-proposed policies ($M = 1.07, SD = 1.49; b = 0.37, 95% CI [−0.62, 1.35], t(1754) = 0.73, p = .464, η²_p < .001).

Similarly, policy proposers significantly influenced participants’ intentions to send emails to their MP (see Figure 5). Conservative participants were more likely, although not significantly so, to write an email to support policies backed by Conservative political leaders (27.3%) than by Labour political leaders (21.1%; OR = 1.07, 95% CI [0.99, 1.15], z = 1.90, p = .057, η²_p = .002). Labour participants were less likely to write an email to support policies back by Conservative political leaders (21.3%) than by Labour political leaders (29.6%; OR = 0.92, 95% CI [0.86, 0.99], z = −2.31, p = .021, η²_p = .003). These patterns resulted in a significant interaction between participant partisan identification and policy proposers (OR = 1.16, 95% CI [1.05, 1.29], z = 2.96, p = .003, η²_p = .005). Participants identifying with neither party did not show a difference in likelihood of writing for policies proposed by Labour or Conservative political leaders (OR = 0.99, 95% CI [0.73, 1.34], z = −0.01, p = .993, η²_p < .001).

Labour participants supported the policies more ($M = 1.65, SD = 1.29$) than did Conservative participants ($M = 1.40, SD = 1.57; b = −0.26, 95% CI [−0.40, −0.12], t(1754) = −3.72, p < .001, η²_p = .008). Labour and Conservative participants did not differ on their willingness to send supporting emails (OR = 0.93, 95% CI [0.97, 1.34], z = −1.79, p = .074, η²_p = .001). Participants who did not identify with either party ($M = 1.34, SD = 1.48$) did not report different levels of policy support than Labour and Conservative participants ($M = 1.53, SD = 1.44; b = −0.22, 95% CI [−0.60, 0.17], t(1754) = 1.10, p = .269, η²_p = .001), or different willingness to write emails (OR = 0.92, 95% CI [0.82, 1.04], z = −0.04, p = .970, η²_p = .001).

**Expert policies.** Expert-proposed policies yielded greater overall support than politician-proposed
policies. Participants supported policies proposed by experts (M = 1.72, SD = 1.36) more than policies proposed by Labour and Conservative political leaders (M = 1.42, SD = 1.46; b = 0.30, 95% CI [0.16, 0.44], t(1754) = 4.11, p < .001, η2p = .010). Participants were more likely to write emails to support policies proposed by experts (34.3%) than by Labour or Conservative political leaders (24.8%; OR = 1.10, 95% CI [1.05, 1.15], z = 4.23, p < .001, η2 = .010).

Polarized trust and trustworthiness. Participants trusted experts more than political leaders, and they trusted ingroup political leaders more than outgroup political leaders (see Figure 6, top panel). On the same measure of trust from Experiment 1, Labour and Conservative participants trusted ingroup political leaders (M = 0.75, SD = 1.38) more than they trusted outgroup political leaders (M = –1.19, SD = 1.50; t(1689) = 45.57, p < .001, η2p = .551). And they trusted experts (M = 2.09, SD = 1.08) more than they trusted both ingroup political leaders (t(1689) = 38.98, p < .001, η2p = .473), and outgroup political leaders (t(1689) = 79.13, p < .001, η2p = .787). Participants who did not identify with either party trusted experts (M = 1.62, SD = 1.39) more than they trusted Labour and Conservative political leaders, on average (M = –0.57, SD = 1.31; t(1753) = 14.04, p < .001, η2p = .101), and did not differentially distrust Labour and Conservative political leaders (t(1753) = 1.80, p = .072, η2p = .002).

Ratings of trustworthiness followed the same overall pattern as ratings of trust (see Figure 6, bottom panel). The aggregate measure of trustworthiness was moderately correlated with trust in the proposing group (t(1752) = .34, p < .001). Both Labour and Conservative participants deemed ingroup policy proposers as more trustworthy (M = 1.29, SD = 1.06) than outgroup policy proposers (M = 1.16, SD = 1.16; t(1752) = 2.35, p = .019, η2p = .003). And they judged expert policy proposers as more trustworthy (M = 1.58, SD = 1.08) than either ingroup policy proposers (t(1688) = 4.29, p < .001, η2p = .011), or outgroup policy proposers (t(1688) = 6.61, p < .001, η2p = .026). Participants’ policy support were correlated with how much they trusted the policy proposer (b = 0.26, 95% CI [0.21, 0.31], t(1753) = 10.08, p < .001, η2p = .056), and how trustworthy they perceived the proposer to be (b = 0.65, 95% CI [0.60, 0.70], t(1752) = 23.07, p < .001, η2p = .251), controlling for condition. Willingness to send emails was also correlated with trust (OR = 1.04, 95% CI [1.03, 1.06], t(1753) = 5.15, p < .001, η2p = .015), and trustworthiness (OR = 1.09, 95% CI [1.07, 2.77], t(1752) = 8.65, p < .001, η2p = .042).

Notice that polarized differences in trust were substantially larger than polarized differences in trustworthiness. It may be that participants distrust outgroup political leaders even while perceiving them as trustworthy. Alternatively, the measure of trust may exacerbate differences because it is a single within-participant item that juxtaposes the three groups against each other.

Comparing the United Kingdom and the United States. To directly compare effects in the United States and the United Kingdom, we combined the two datasets and added a country contrast code (–0.5 = United Kingdom, +0.5 = United States; total N = 3,068). For participant partisan identification and policy proposers, we combined Democratic with Labour and Republican with Conservative. We also combined the shared identity and connectedness condition with question order of personal criteria in one predictor representing experimental treatment versus control conditions. This captured the preregistered hypotheses that these manipulations might increase policy support and partialled out any variance caused by these manipulations. We excluded participants in Experiment 1’s bipartisan proposers condition because Experiment 2 did not have an analogous condition.

On the measure of policy support, there was a significant three-way interaction between country, participant partisan identification, and liberal versus conservative policy proposers (b = 0.75, 95% CI [0.18, 1.31], t(3066) = 2.58, p = .010, η2p = .002). Participants’ support for ingroup-proposed versus outgroup-proposed policies was stronger in the United States than in the United Kingdom, and this was true for both Democrat or Labour
Figure 6. Means of trust in (top panel) and trustworthiness of (bottom panel) in each group by participant partisan identification.

Note. Each jittered point represents a participant’s response to that group. Each participant contributed three observations for trust (top panel) and one observation for trustworthiness (bottom panel). Error bars represent standard errors.
participants and Republican or Conservative participants (b = −0.10, 95% CI [−0.67, 0.46], η²p < .001). However, none of the other key findings differed by country, including the stronger support for expert-proposed policies compared with politician-proposed policies (b = 0.11, 95% CI [−0.12, 0.34], η²p < .001), the higher likelihood to write emails supporting policies from ingroup than outgroup political leaders (OR = 1.04, 95% CI [0.46, 2.38], z = 0.10, p = .919, η²p < .001), and the higher likelihood of writing emails to support expert-proposed policies (OR = 0.87, 95% CI [0.64, 1.21], z = −0.82, p = .414, η²p < .001). Thus, overall, the effects were not significantly different between the two countries, except for one measure.

A possible explanation for why the proposal of policies by political elites might have had a greater influence on policy attitudes in the United States is that the difference in trust in ingroup versus outgroup political leaders was significantly greater in the United States (M_difference = 2.36, SD = 2.21) than in the United Kingdom (M_difference = 1.94, SD = 1.75; t(3211) = 6.01, p < .001, η²p = .011 Westwood et al., 2018). When statistically equating the two countries on this difference in trust by grand-mean-centering responses within each country, the difference between countries in the effect of ingroup-proposed versus outgroup-proposed policies became substantially smaller (t(2820) = 1.99, p = .047, η²p = .001). The extent that trust is less polarized in the United Kingdom than in the United States may partly explain why partisan influence is smaller in the United Kingdom.

Discussion

The proposal of policies by political leaders and experts influenced people’s support for COVID-19 policy in the United Kingdom much as it did in the United States (Experiment 1). Participants in the United Kingdom supported an expert-proposed COVID-19 policy more than the same policy proposed by political leaders from one party or the other, and they were more likely to write emails to support the expert-proposed policy.

Labour and Conservative participants were also more likely to write emails to support a policy proposed by their political ingroup than by their political outgroup. However, only Conservative, not Labour, participants supported policies from ingroup political leaders more than those from outgroup political leaders. This result merits further examination.

Participants reported that they trusted experts more and perceived experts as higher in trustworthiness than political leaders from their ingroup, whom they trusted more and deemed more trustworthy than political leaders from their outgroup. Correlational analyses showed that trust in the proposing group and perceived trustworthiness of the proposing group partially explained the effect of expert versus partisan proposers on personal policy support. Experimental manipulations of trust are needed to expand on this examination of mediation.

That similar patterns emerged in the same policy context of COVID-19 with highly similar policy solutions provides evidence that polarization from political elites and trust operate similarly in the United States and the United Kingdom.

General Discussion

Many of society’s gravest challenges are social-behavioral problems as much as technological ones (Michie & West, 2020). Enacting policies to address collective action problems requires broad public engagement (Fox & Sitkin, 2015; Loewenstein & Chater, 2017). The current research expands the scientific understanding of social psychological factors that polarize and depolarize public support for policies to combat the COVID-19 pandemic and provides insight that can be applied to other societal issues. These results not only provide insight into basic processes shaping political polarization; they also have implications for effective communication during public health crises.

In two experiments, public support for COVID-19 policies in both the United States and the United
Kingdom was influenced by whether those policies were proposed by experts, ingroup political leaders, or outgroup political leaders. These findings replicate and extend previous research (Cole et al., 2022; Druckman et al., 2021; Ehret et al., 2018; G. L. Cohen, 2003; Van Boven et al., 2018). Participants supported policies more when proposed by leaders from their own political parties rather than opposing parties. Expert-proposed policies and policies proposed by bipartisan groups were more widely supported and less polarizing than policies proposed by leaders from a single party. This could partially be because people trusted experts more than political leaders and they trusted ingroup politicians more than outgroup politicians. That these effects largely emerged in both the United States and the United Kingdom provides evidence for their generalizability.

When the experiments were conducted in April 2020, there was reason to suspect that political elites might not polarize public policy. At the time, there was only about a 7% difference between the percentage of Democrats and that of Republicans who believed COVID-19 was a major threat. By August 2020, this difference had increased to about 39% (Deane et al., 2021). The emergence of polarization on public opinion about COVID-19 just one month after it emerged as a global threat counters the literature arguing that its characteristics of being novel and global might have helped it circumvent polarization (Dovidio & Morris, 1975; Feshbach & Singer, 1957; Sherif & Sherif, 1953).

Importantly, the polarizing effect of partisan framing on COVID-19 attitudes emerged even as broader public attitudes were shifting. In Experiment 1, participants from the United States preferred COVID-19 policies that balanced public health and economic concerns over policies that prioritized public health concerns. By August 2020, when we replicated and extended the present findings, this overall preference reversed such that participants favored policies that prioritized public health concerns over economic ones (Flores et al., 2022). Partisan framing thus polarized public attitudes amidst shifting public attitudes about policy strategies.

The use of externally valid stimuli often sacrifices some precision, as was the case here. Participants read multifaceted policy proposals from differing groups of multiple political elites and experts. These descriptions reflected realistic communication about public policies. The extension and replication of findings from tightly controlled settings to new, unique, realistic contexts such as an emerging pandemic, as in our experiments, are more than simply application of basic theory; they provide critical tests of the relevance and potential boundaries of psychological theory (Sullivan, 2020). Although effect sizes found in our studies were relatively small, they were similar to effect sizes that can be expected in social psychological research (J. Cohen, 1988), and similar in size to partisan framing effects in other research (e.g., G. L. Cohen, 2003; Flores et al., 2022). It is meaningful to determine what types of interventions can change public opinion, whether these changes within experiments are small or large. With this information gleaned from experiments, intervention content can be adapted and strengthened when interventions are brought to scale.

**Explanations**

We hypothesized that politically polarized trust explains how political elites polarize policy support. We also examined whether trust might explain why expert-proposed policies bypass polarization and increase overall public support, because of relatively high levels of trust in experts compared with politicians (Funk et al., 2019; Hamilton & Safford, 2020; van der Linden et al., 2019). Policies proposed by highly trusted experts were more widely supported than policies proposed by political leaders from one party, and trust was correlated with policy support and willingness to write emails, controlling for policy proposers. Correlational mediation analyses indicated that trust may explain the influence of political leaders and elites on personal policy attitudes. An experimental manipulation of trust is needed to provide more conclusive evidence that polarized trust causes polarized policy support or causally explains
the effect of framing on support. A closely related factor such as dislike might explain partisan influence (Druckman et al., 2021; Finkel et al., 2020; Flores et al., 2022), or polarized trust may emerge from polarized policy attitudes, reversing the causal arrow. (Although reverse causality seems unlikely here because the differences in trust were much larger than the differences in policy attitudes.) Would people, for example, support a policy proposed by a trusted outgroup politician more than one proposed by a distrusted ingroup politician? Answering such questions has implications for effective political communication in situations like the COVID-19 pandemic, where people often receive policy information from politicians they do not support.

**Implications**

While we found that policies proposed by ingroup political leaders were more supported than policies proposed by outgroup political leaders, we do not know from the present experimental design whether ingroup leaders increase policy support more or than outgroup leaders reduce support. Understanding this would be useful theoretically and for the design of policy communications. That policy support in the bipartisan condition was as high as policy support in the ingroup proposers condition provides suggestive evidence that people follow their ingroups more than they oppose their outgroups, aligning with other recent work (Cole et al., 2022). Future work might expand on this by comparing ingroup and outgroup policy proposal to proposal by a neutral group. Even though truly neutral sources may not exist in the real world, this knowledge would be practically and theoretically useful.

The possibility that intergroup trust contributes to polarized policy support speaks to an ongoing discussion about the relationship between trust and policy stances (Druckman et al., 2021; Iyengar et al., 2019). Polarized trust, a manifestation of affective polarization, and issue polarization, comprising policy attitudes, are commonly treated as separate forms of polarization. Others have argued that ideological differences and polarized issue stances influence dislike and distrust of the political outgroup (Rogowski & Sutherland, 2016; Webster & Abramowitz, 2017). Our results provide evidence for the primacy of affective polarization in the form of polarized trust in shaping issue polarization in the form of polarized policy support (van Bavel & Pereira, 2018).

Another consideration concerns the rationality of relying on the policy stances of one’s political party. In zero-sum political contexts, responding negatively to outgroup policy proposals may seem rational because it increases the chances of ingroup success (Maoz et al., 2002; Ross, 1995). But this zero-sum logic falls short in the face of collective threats such as COVID-19, when both sides fail or succeed together by broad adherence to policies. Addressing public health crises is different from winning elections. Treating public health crises as zero-sum hardly seems rational. Nevertheless, following one’s political party might be individually, if not societally, rational, especially when evaluating complex policies (Todd & Gigerenzer, 2007). But as with other social dilemmas, what is individually rational becomes collectively destructive when societies fail to muster broad agreement to confront collective crises.

Finally, our studies provide additional evidence regarding the question of whether partisan framing is especially polarizing in the United States compared to other countries (see also Flores et al., 2022). The COVID-19 pandemic provided a unique opportunity to examine the influence of political elites in the same context with largely the same policy recommendations. Between the United States and the United Kingdom, we found overarching similar patterns; the only significant cross-country difference we observed was that political elites had a larger effect on policy attitudes in the United States than in the United Kingdom.

**Conclusion**

When it became apparent in early 2020 that COVID-19 would be a worldwide health crisis, there was little divide in public opinion on the pandemic in the United States and the United
Kingdom. Over the ensuing months, public opinion became more polarized on everything from wearing face masks and reopening schools to lifting restrictions on social and economic activity (Horowitz, 2020; Tyson, 2020). The present results suggest that the emerging polarization of public opinion toward COVID-19 policies may partly reflect the foregrounding of political leaders from a single party, such as then President Donald Trump or then Prime Minister Boris Johnson. The present results also suggest that policies from trusted experts or bipartisan groups may allow policy proposals to bypass polarization and garner increased support. When societal challenges require collective action, single-party leadership may inhibit public support for solutions. By contrast, leadership from experts or bipartisan groups may motivate greater public support and help foster the cooperation, communication, and compassion needed for such challenges.

Data availability

All data, materials, and code are available at the Open Science Framework (https://osf.io/4xdpa/).

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Notes

1. In this analysis, we dropped the predictors for participant partisan identification, given the uneven distribution of Democrats (n = 824), Republicans (n = 698), and independents (n = 236). Without dropping these predictors, the model would estimate overall effects that equally weight Democrats, Republicans, and independents. This would constitute an overweighting of independents because one third of the true population is not politically independent. Excluding partisan identification effectively ignores participant partisan identification, producing estimates of effects in a population that has a distribution of Democrats, Republicans, and independents similar to that in our sample, and similar to the distribution in the real world.

2. We examined whether the effect of policy proposers on personal support was statistically mediated by trust in the policy sponsorship group, though we caution against drawing conclusions of causality from correlational mediation analyses. Experimentally manipulating the proposed mediator would provide the cleanest and most definitive test of mediation (Bullock et al., 2010), and future research should include a manipulation of trust (e.g., Tan et al., 2022). There was an overall significant indirect effect from Democratic versus Republican policy proposers to trust in the group proposing the policy to personal policy support (ab = 1.70, 95% CI [1.41, 2.00], z = 11.22, p < .001), and the interaction between policy proposers and participant partisan identification was significantly reduced (reversed, in fact) with trust in the model (c’ = −0.74, 95% CI [−1.25, −0.24], z = −2.90, p = .004), indicating that polarized intergroup trust may partially explain the effect of Democratic versus Republican proposers on policy support. The effect of increased personal policy support for expert or bipartisan-proposed policies compared to partisan policies was also statistically mediated by trust in the proposing group. The indirect effect on policy support of expert- and bipartisan-proposed policies versus Democrat- and Republican-proposed policies was significant (ab = 0.38, 95% CI [0.30, 0.45], z = 9.85, p < .001). The direct effect of expert- and bipartisan-proposed policies versus Democrat- and Republican-proposed policies became nonsignificant with trust in the model (c’ = −0.09, 95% CI [−0.24, 0.07], z = −1.10, p = .272).

3. We removed the predictors for participant partisan identification, for the same reason we did in Experiment 1, given the unbalanced sample with only 66 of 1,825 identifying with neither party.

4. Acknowledging limitations to concluding causality from correlational mediation analyses (Bullock et al., 2010), we found that trust and trustworthiness in the proposing group mediated the effect of expert proposers versus partisan proposers.
on policy support. With trust in the model, the indirect effect of the expert-proposed versus Labour- and Conservative-proposed policies was significant ($ab = 0.45$, 95% CI [0.35, 0.55], $z = 8.83$, $p < .001$). And the direct effect of expert policy sponsorship became nonsignificant ($\beta' = -0.15$, 95% CI [-0.32, 0.02], $z = -1.73$, $p = .084$). Thus, higher trust in experts partially mediated the positive effect of expert-proposed policies on policy support. With trustworthiness in the model, the indirect effect on policy support of expert-proposed policies versus Labour- and Conservative-proposed policies was significant ($ab = 0.21$, 95% CI [0.14, 0.29], $z = 5.78$, $p < .001$). And the direct effect of policy proposers became nonsignificant ($\beta' = 0.09$, 95% CI [-0.04, 0.21], $z = 1.36$, $p = .174$). Higher perceived trustworthiness of experts thus also statistically mediated the positive effect of expert-proposed policies on policy support.

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**Appendix**

**Experiment 1: Policy Proposal**

**Emphasizing Economic Recovery**

*What comes next: A three-part plan to guide public policy to address the health and economic consequences of COVID-19.* Around the world, countries including the United Kingdom, the United States, and India are engaged in lockdown strategies to reduce the spread of COVID-19. Nations are severely restricting the movement of their people with policies to slow the spread of COVID-19.

But what comes next? How will the local, state, and federal governments set policies to ensure the health of all citizens? These decisions are complicated by the fact that the actions required to combat the COVID-19 pandemic will result in lost wages, layoffs, and severely reduced economic activity. While recognizing that vast numbers of people will be out of work, which will result in economic stress, despair, and other mental health challenges, quick and decisive action is required to minimize broader devastation from COVID-19.

Democrat Party condition: Suppose that a Democratic group has proposed the following plan. Assume that the group consists of major Democratic elected officials and prominent liberal policy analysts and think tanks. Further, suppose that presumptive Democratic Presidential nominee Vice President Joe Biden supports the plan.

Republican Party condition: Suppose that a Republican group has proposed the following plan. Assume that the group consists of major Republican elected officials and prominent conservative policy analysts and think tanks. Further, suppose that President Donald Trump supports the plan.

Bipartisan condition: Suppose that a bipartisan group has proposed the following plan. Assume that the group consists of both major Democrat and Republican elected officials and both prominent liberal and conservative policy analysts and think tanks. Further, suppose that President Donald Trump and presumptive Democratic Presidential nominee Vice President Joe Biden support the plan.

Experts condition: Suppose that a team of experts including medical doctors, economists, scientists, and non-partisan policy analysts have proposed the following plan. Assume that the group consists of leading experts from premier institutions such as Harvard, Stanford, and Johns Hopkins universities. Further, suppose that leaders at the Center for Disease Control and the World Health Organization support the plan.

This plan focuses more on stimulating the economy and averting the negative health outcomes that come with prolonged economic downturn. The plan has three parts:

1. Practice social distancing and sheltering in place across the country for at least 1–2 months from today. During this time, distancing and sheltering will prevent the spread of the virus. Whoever has the virus would likely manifest symptoms within 2 weeks. Those who can recover at home would do so, and those who need hospitalization will seek it.

2. Meanwhile, government and research scientists will conduct more extensive testing to better understand which regions of the country and what age cohorts are most affected. Many cases are mild and do not require specific medical treatment, but some cases require hospitalization and intensive care. It is important for each country to conduct systematic research to determine their risk profile for those most vulnerable. The government would establish through data analytics the best possible criteria for differentiating the especially vulnerable from everyone else.
(3) With a better understanding of who is infected, who is at risk, and where the “hot spots” are, the country can begin to phase healthy and immune workers back into the workplace and back to school while sequestering those who are infected or at greater risk.

By focusing on a smaller portion of the population, much of society could return to “business as usual” and restart vast segments of the economy. Healthy children could return to school and healthy adults could return to their jobs. Theaters, restaurants, and other small businesses could reopen.

Democrat Party condition: To address the short-term and long-term economic and health effects of the COVID-19 pandemic, suppose that Vice President Joe Biden, Democratic elected officials, and liberal policy analysts proposed this three-part plan to guide the nation to address what comes next.

Republican Party condition: To address the short-term and long-term economic and health effects of the COVID-19 pandemic, suppose that President Donald Trump, Republican elected officials, and conservative policy analysts proposed this three-part plan to guide the nation to address what comes next.

Bipartisan condition: To address the short-term and long-term economic and health effects of the COVID-19 pandemic, suppose that Democratic and Republican elected officials and bipartisan policy analysts proposed this three-part plan to guide the nation to address what comes next.

Experts condition: To address the short-term and long-term economic and health effects of the COVID-19 pandemic, suppose that a team of experts including medical doctors, economists, scientists, and non-partisan policy analysts proposed this three-part plan to guide the nation to address what comes next.

**Experiment 1: Policy Proposal**

**Emphasizing Public Health**

*What comes next: A three-part plan to guide public policy to address the health and economic consequences of COVID-19. Around the world, countries including the United Kingdom, the United States, and India are engaged in lock-down strategies to reduce the spread of COVID-19. Nations are severely restricting the movement of their people with policies to slow the spread of COVID-19.*

*But what comes next? How will the local, state, and federal governments set policies to ensure the health of all citizens? These decisions are complicated by the fact that the actions required to combat the COVID-19 pandemic will result in lost wages, layoffs, and severely reduced economic activity. While recognizing that vast numbers of people will be out of work, which will result in economic stress, despair, and other mental health challenges, quick and decisive action is required to minimize broader devastation from COVID-19.*

Democrat Party condition: Suppose that a Democratic group has proposed the following plan. Assume that the group consists of major Democratic elected officials and prominent liberal policy analysts and think tanks. Further, suppose that presumptive Democratic Presidential nominee Vice President Joe Biden supports the plan.

Republican Party condition: Suppose that a Republican group has proposed the following plan. Assume that the group consists of major Republican elected officials and prominent conservative policy analysts and think tanks. Further, suppose that President Donald Trump supports the plan.

Bipartisan condition: Suppose that a bipartisan group has proposed the following plan. Assume that the group consists of both major Democrat and Republican elected officials and both prominent liberal and conservative policy analysts and think tanks. Further, suppose that President Donald Trump and presumptive Democratic Presidential nominee Vice President Joe Biden support the plan.

Experts condition: Suppose that a team of experts including medical doctors, economists, scientists, and non-partisan policy analysts have proposed the following plan. Assume that the group consists of leading experts from premier
institutions such as Harvard, Stanford, and Johns Hopkins universities. Further, suppose that leaders at the Center for Disease Control and the World Health Organization support the plan.

This plan focuses on public health, as the best thing we can do for the economy is to beat the virus, however long that takes. The plan has three parts:

1. Practice social distancing and sheltering in place across the country for at least 6–12 months from today. During the active shelter-in-place order, people would be required to stay home, and nonessential businesses would close. When leaving home to access grocery stores, medicine and other essential services, extreme social distancing of at least 6 ft. would be enforced for all people. Public gathering places would be closed.

2. Meanwhile, government and research scientists will conduct extensive testing and contact tracing to better understand the spread of Coronavirus. Testing would start with those exhibiting clear symptoms, expand to those at heightened risk, then continue to broad swaths of the population. The government would use the shelter in place period to vastly expand testing and analyze data to determine the spread of the virus.

3. Those who are infected would be isolated at government established facilities where the mildly and moderately ill can recuperate under the care and observation of nurses. Treatment at these “temporary hospitals” would replace current recommendations to isolate those who are infected at home, under the care of family and housemates.

This three-part plan to shelter-in-place, expand testing, and isolate the infected would allow a clear determination of when restrictions could be lifted, and people could return to work. After the virus receded, the economy could be restarted. Children could return to school and healthy adults could return to their jobs. Theaters, restaurants, and other small businesses could reopen.

Democrat Party condition: To address the short-term and long-term economic and health effects of the COVID-19 pandemic, suppose that Vice President Joe Biden, Democratic elected officials, and liberal policy analysts proposed this three-part plan to guide the nation to address what comes next.

Republican Party condition: To address the short-term and long-term economic and health effects of the COVID-19 pandemic, suppose that President Donald Trump, Republican elected officials, and conservative policy analysts proposed this three-part plan to guide the nation to address what comes next.

Bipartisan condition: To address the short-term and long-term economic and health effects of the COVID-19 pandemic, suppose that Democratic and Republican elected officials and bipartisan policy analysts proposed this three-part plan to guide the nation to address what comes next.

Experts condition: To address the short-term and long-term economic and health effects of the COVID-19 pandemic, suppose that a team of experts including medical doctors, economists, scientists, and non-partisan policy analysts proposed this three-part plan to guide the nation to address what comes next.

Experiment 2: Policy Proposal

What comes next: A 6–12 month plan to guide public policy to address the health and economic consequences of COVID-19 in the UK. Around the world, countries including the UK, the US, and India are engaged in lock-down strategies to reduce the spread of COVID-19. Nations are severely restricting the movement of their people with policies to slow the spread of COVID-19.

But what comes next? Governments need to set policies for the next 6–12 months, to ensure the health of all citizens. These decisions are complicated by the fact that the actions required to combat the COVID-19 pandemic will result in lost wages, layoffs, and severely reduced economic activity. While recognizing that vast numbers of
people will be out of work, which will result in economic stress and mental health challenges, quick and decisive action is required to minimize broader devastation from COVID-19.

Labour Party condition: Suppose that a Labour group has proposed the following plan. Assume that the group consists of major Labour-elected Members of Parliament, Labour Shadow secretaries, and prominent left-wing policy analysts and “think tanks.” Further, suppose that the Labour Party leader Keir Starmer supports the plan.

Conservative Party condition: Suppose that a Conservative group has proposed the following plan. Assume that the group consists of major Conservative-elected Members of Parliament, Conservative government officials, and prominent conservative policy analysts and “think tanks”. Further, suppose that Prime Minister Boris Johnson supports the plan.

Experts condition: Suppose that a team of experts including medical doctors working for the NHS, economists, scientists, and non-partisan policy analysts have proposed the following plan. Assume that the group consists of leading experts from premier institutions such as Imperial College London, University of Oxford, The London School of Hygiene & Tropical Medicine.

This plan focuses on public health, as the best thing we can do for the economy is to beat the virus, however long that takes. It has four parts:

1. Continue maintaining social distancing across the country for at least 6–12 months from now. People would be required to work from home when possible. When leaving home to access grocery stores, medicine and other essential services, or for exercise, extreme social distancing of at least 6 ft. (2m) would be the norm. All public gatherings (i.e. more than 3 people) would be ceased.

2. Expand testing: Find cases in the community, hospitals, and care homes; isolate them and trace their contacts using a combination of local public health teams and digital tools. Testing would start with those exhibiting clear symptoms, expand to those at heightened risk, then continue to broad swathes of the population.

3. Track the epidemic nationally and locally using NHS, public health, and digital surveillance to see where cases are continuing to spread. This will be essential so that we can start to lift the lockdown while shielding the population from hotspots of transmission. Testing will also investigate the differential effects on black and minority ethnic groups, and provide appropriate protection.

4. Ensure transmission is suppressed in hospitals, care homes, and workplaces through the right protective equipment, testing, distancing and hygiene.

This plan to keep social distancing, expand testing, track the epidemic, and suppress transmission in hospitals would allow a clear determination of when restrictions could be lifted, and people could return to work. After the virus receded, the economy could be restarted. Children could return to school and healthy adults could return to their jobs. Theaters, restaurants, and other small businesses could reopen.

Labour Party condition: To address the long-term economic and health effects of the COVID-19 pandemic, suppose that Labour party leader Keir Starmer, members of the Labour Shadow Government, Labour MPs, and left-wing policy analysts proposed this plan to guide the UK to address what comes next.

Conservative Party condition: To address the long-term economic and health effects of the COVID-19 pandemic, suppose that Prime Minister Boris Johnson, members of Her Majesty’s UK Government, Conservative MPs, and conservative policy analysts proposed this plan to guide the UK to address what comes next.

Experts condition: To address the long-term economic and health effects of the COVID-19 pandemic, suppose that a team of experts including medical doctors working for the NHS, economists, university scientists, and non-partisan policy analysts proposed this plan to guide the UK to address what comes next.