

ONLINE APPENDIX FOR: GETTING THE MESSAGE?

CHOICE, SELF-SELECTION, AND THE EFFICACY OF SOCIAL MOVEMENT

ARGUMENTS

Contents

A Treatment Conditions	2
A.1 Treatment Choice Condition	2
A.2 Persuasive Vignette	3
B Question Wordings	4
C Power Simulations	8
D Descriptive Statistics	14
D.1 MTurk Study	14
D.2 Qualtrics Sample	14
E Effects on General Support for Gender Equality	16
E.1 MTurk Study	17
E.2 Qualtrics Study	19
F Additional Analyses	21
F.1 Effects on Support for #MeToo Conditional on Familiarity	23
F.2 Effects on Support for #MeToo Conditional on Partisanship	27
F.3 Effects on Knowledge of Sexual Assault Statistics	31
F.4 Effects on Providing Written Responses about #MeToo	35

A TREATMENT CONDITIONS

A.1 TREATMENT CHOICE CONDITION

Before asking you about your views, we'd like to give you the opportunity to hear some thoughts that other people have on the Me Too movement.

Would you like to hear Joan's opinions?



Figure A.1: The figure shows the choice presented to subjects with the opportunity to select whether to hear Joan's opinion and receive the informational treatment.

A.2 PERSUASIVE VIGNETTE

Here's what Joan had to say when we asked her about the Me Too social movement:

I think the Me Too movement is really important. Hearing these stories through social media has shown just how common the problems of sexual assault and harassment are in society. It doesn't just happen in Hollywood, or the media, or politics. This stuff happens everywhere and it needs to stop.



I've heard people say that the Me Too movement has a mob mentality, that they accuse people without clear evidence. But we've heard that kind of talk before. For years, when women came forward about their experiences, they were not taken seriously. I read a study that 2 out of 3 sexual assaults go unreported. Me Too shows that women are finally being taken seriously. So right now, given the way things are, it seems like the benefits of helping people tell their stories, of believing women, and not assuming they are lying or exaggerating, outweigh the costs.

Some people say gender issues aren't that important, but the Me Too movement showed that wasn't so. With this big push from the Me Too movement, women are finding new support to confront their harassers and those who enabled them. We've got a long way to go, but Me Too seems like a step in the right direction.

Figure A.2: Treatment consisted of an hypothetical vignette that attributed common arguments of the #MeToo movement to either a female speaker named "Joan", or, for some subjects who opted out of hearing a "Joan's" views, a different woman, named Jane, or a man named John.

B QUESTION WORDINGS

PRIMARY OUTCOMES

Specific support for #MeToo: Using the following scale, where 0 means you completely disagree, 100 means you completely agree, and 50 means you neither agree nor disagree, how strongly would you agree or disagree with the following statements:

- The MeToo movement can sometimes go too far (reverse coded)
- I support the Me Too movement
- #MeToo helps raise awareness about sexual assault, harassment and discrimination

General support for Gender Equality: Using the following scale, where 0 means you completely disagree, 100 means you completely agree, and 50 means you neither agree nor disagree, how strongly would you agree or disagree with the following statements:

- Sexual harassment and assault are still far too common in the U.S.
- In general, women have the same rights and opportunities as men (reverse coded)
- Concerns about gender inequality are overblown (reverse coded)

SECONDARY OUTCOMES

Factual Knowledge : How many sexual assaults do you think are not reported to the police?

- Two out of three (66 percent) (correct answer)
- One out of four (25 percent)
- One out of ten (10 percent)
- Four out of five (80 percent)

Open response : Do you have any opinions you'd like to share about the Me Too movement? (Code as whether respondents wrote anything at all (1 if wrote something 0 otherwise) and as count of the total number of characters written)

COVARIATES

Gender: What is your gender?

- Male
- Female
- Other

Age: What is your age in years?

Race: What racial or ethnic group best describes you? Please select all that apply

- White
- Black or African
- American American Indian or Alaska Native
- Asian
- Native Hawaiian or Pacific Islander
- Hispanic or Latino
- Other

Education: What's the highest level of education you've completed?

- Less than high school
- High school graduate
- Some college
- 2 year degree
- 4 year degree
- Professional degree
- Doctorate

Which of the following best indicates how much money your family's total income was this past year

- Less than \$10,000
- \$10,000 – \$19,999

- \$20,000 – \$29,999
- \$30,000 – \$39,999
- \$40,000 – \$49,999
- \$50,000 – \$59,999
- \$60,000 – \$69,999
- \$70,000 – \$79,999
- \$80,000 – \$89,999
- \$90,000 – \$99,999
- \$100,000 – \$149,999
- More than \$150,000
- Prefer not to say

Ideology: We hear a lot of talk these days about liberals and conservatives. Here is a seven-point scale on which the political views that people might hold are arranged from very liberal to very conservative. Where would you place yourself on this scale?

- Extremely liberal
- Liberal
- Slightly liberal
- Moderate, middle of the road
- Slightly conservative
- Conservative
- Extremely conservative

Partisanship: Generally speaking do you think of yourself as a...

- Democrat
- Republican
- Independent
- Other

Democratic Strength: Would you call yourself a... (If Partisanship = Democrat)

- Not very strong Democrat
- Strong Democrat

Republican Strength: Would you call yourself a... (If Partisanship = Republican)

- Not very strong Republican
- Strong Republican

Independent lean: Would you consider yourself closer to...(If Partisanship = Independent/Other)

- The Republican Party
- The Democratic Party
- Neither

Familiarity with #MeToo Movement: How familiar are you with the Me Too social movement?

- Extremely familiar
- Very familiar
- Moderately familiar
- Slightly familiar
- Not familiar at all

C POWER SIMULATIONS

Below we present the results of a set of power analyses simulating different possible scenarios with 1,000 respondents overall with 40 percent assigned to the experimental arm and 60 percent assigned to the selection condition with an outcome following a standard normal distribution ($N(0,1)$). In general, power is a function of the size and direction of effects among selectors and avoiders, the distribution of these types in the data, and the correlation between likelihood of selecting into or out of treatment and the outcome. Power for detecting heterogeneous effects by choice is greatest when there are roughly equal numbers of respondents opting into and out of treatment. As more people opt to receive treatment, the power of the *ACTE* among avoiders declines, and vice versa. The power of the *CACTEs* also declines as more people opt to receive treatment, but at a considerably slower rate than the standard *ACTE* among avoiders.

EQUAL NUMBERS OF SELECTORS AND AVOIDERS, EQUAL AND OFFSETTING EFFECTS

Assuming equal and offsetting effects with roughly equal proportions of subjects selecting into and out of treatment, the *ACTE* among selectors and the *CACTEs* among avoiders can be expected to detect an effect of about 0.45 with about 80 percent power. The *ACTE* among avoiders can be expected to detect an effect of about 0.55 with about 80 percent power. The lower power for the *ACTE* among avoiders is lower in part because the variances are weighted, to account for the fact that only a portion of those opting out of treatment receive no information.

- $N = 1000$
- $Y_0 = \text{Normal}(\text{mean}=0, \text{sd}=1)$
- τ aus: 0.1 to 0.7 by 0.05
- $\alpha = 0.5$

Figure C.1: Statistical Power with Equal Number of Selectors than Avoiders, Equal and Offsetting Effects

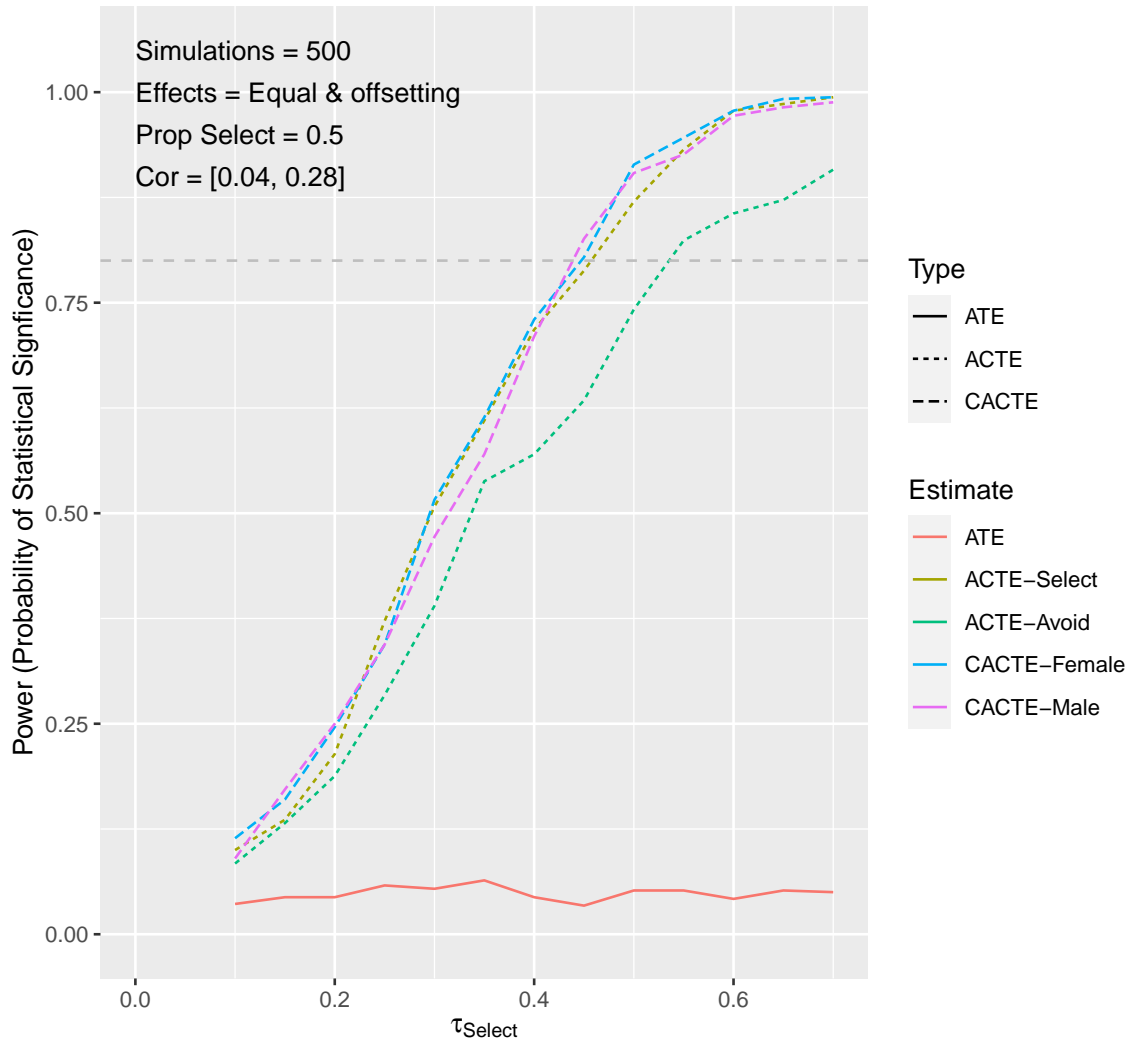


Figure C.2 shows the probability of correctly rejecting a null hypothesis at $p < 0.05$ for each of our estimands, assuming there are equal people selecting treatment than avoiding it, and the effects of treatment (τ) are equal in size and opposite in direction. The standard ATE in this scenario will never detect an effect beyond chance while the ACTE among selectors and the CACTEs among avoiders can be expected to detect an effect of about 0.45 with about 80 percent power.

Table C.1: Power Analysis

	Hypothesized Effect Among Selectors												
	0.1	0.15	0.2	0.25	0.3	0.35	0.4	0.45	0.5	0.55	0.6	0.65	0.7
ATE	0.04	0.04	0.04	0.06	0.05	0.06	0.04	0.03	0.05	0.05	0.04	0.05	0.05
ACTE-Select	0.10	0.14	0.21	0.37	0.51	0.61	0.72	0.79	0.87	0.93	0.98	0.99	0.99
ACTE-Avoid	0.08	0.13	0.19	0.28	0.39	0.54	0.57	0.63	0.74	0.82	0.86	0.87	0.91
CACTE-Female	0.11	0.16	0.25	0.34	0.52	0.61	0.73	0.80	0.91	0.95	0.98	0.99	0.99
CACTE-Male	0.09	0.17	0.25	0.34	0.47	0.57	0.71	0.83	0.90	0.93	0.97	0.98	0.99

MORE SELECTORS THAN AVOIDERS, EQUAL AND OFFSETTING EFFECTS

Assuming about two-thirds of subjects will select the treatment, the *ACTE* among selectors can be expected to detect an effect of about 0.35 with about 80 percent power. The *CACTEs* among avoiders can be expected to detect an effect of about 0.5 with over 80 percent power, while the maximum power for *ACTE* among avoiders for an effect of size 0.7 is 50 percent.

- $N = 1000$
- $Y_0 = \text{Normal}(\text{mean}=0, \text{sd}=1)$
- τ aus: 0.1 to 0.7 by 0.05
- $\alpha = 0.66$

Figure C.2: Statistical Power with More Selectors than Avoiders, Equal and Offsetting Effects

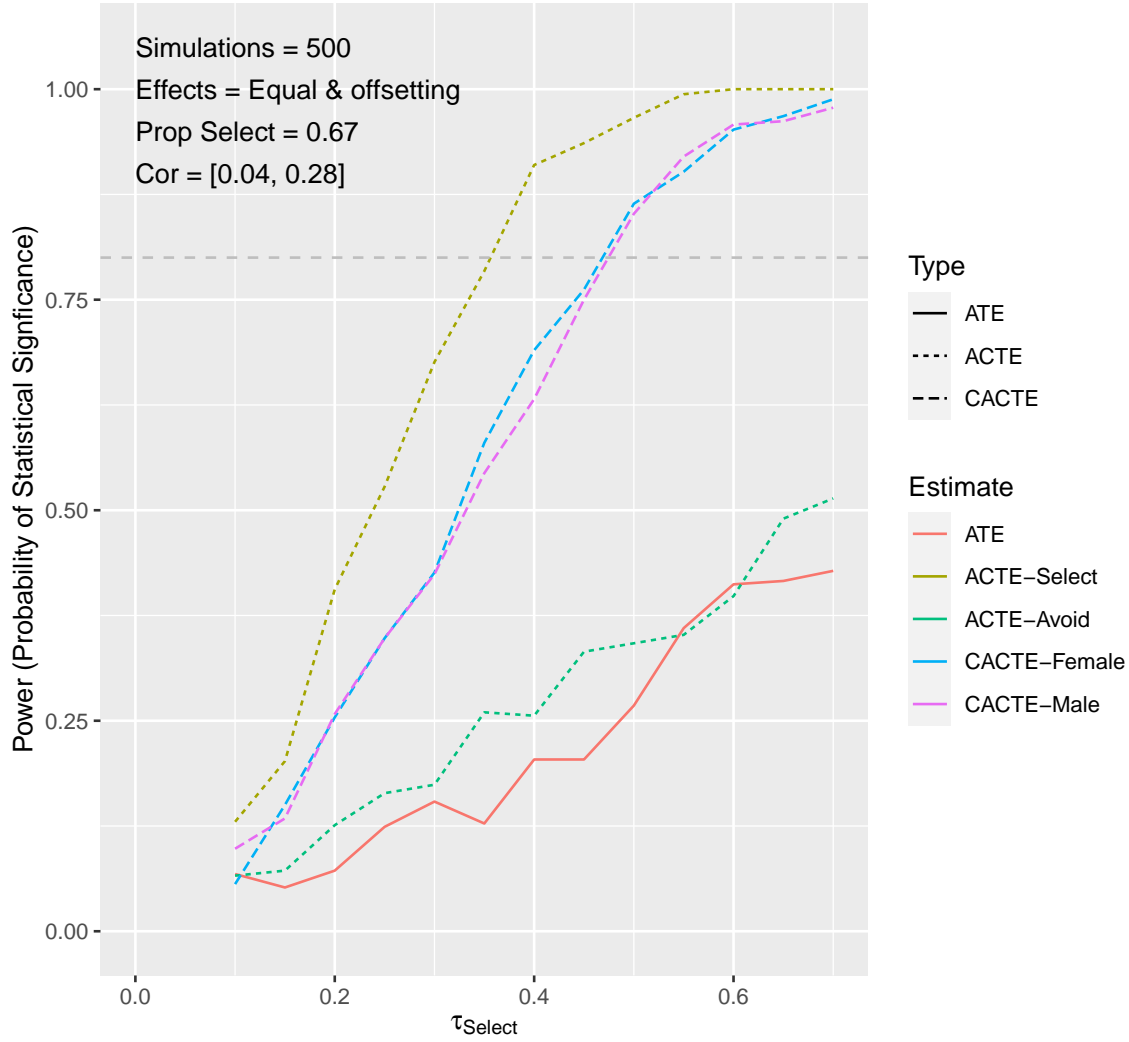


Figure C.2 shows the probability of correctly rejecting a null hypothesis at $p < 0.05$ for each of our estimands, assuming there are more people selecting treatment than avoiding it, and the effects of treatment (τ) are equal in size and opposite in direction. When there are more selectors than avoiders, power declines rapidly for the ACTE among avoiders, but remains comparable for the comparable for the CACTEs among avoiders.

Table C.2: Power Analysis

	Hypothesized Effect Among Selectors													
	0.1	0.15	0.2	0.25	0.3	0.35	0.4	0.45	0.5	0.55	0.6	0.65	0.7	
ATE	0.06	0.06	0.09	0.13	0.17	0.20	0.18	0.24	0.27	0.33	0.35	0.41	0.47	
ACTE-Select	0.14	0.24	0.36	0.52	0.72	0.79	0.89	0.95	0.98	0.99	1.00	1.00	1.00	
ACTE-Avoid	0.08	0.08	0.13	0.14	0.18	0.20	0.29	0.32	0.38	0.40	0.44	0.48	0.52	
CACTE-Treatment	0.08	0.17	0.27	0.30	0.45	0.54	0.68	0.76	0.86	0.90	0.95	0.97	0.99	
CACTE-Alternative	0.12	0.15	0.22	0.33	0.46	0.57	0.65	0.74	0.84	0.90	0.96	0.98	0.99	

MORE SELECTORS THAN AVOIDERS, EQUAL AND OFFSETTING EFFECTS, INCREASING
CORRELATION BETWEEN SELECTION AND OUTCOMES

Increasing the positive correlation between the selection and the outcome increases the power of the *ACTE* among selectors as well as the power of the *CACTEs* among avoiders.

- $N = 1000$
- $Y_0 = \text{Normal} (\text{mean}=0, \text{sd}=1)$
- τ : 0.1 to 0.7 by 0.1
- $\alpha = 0.66$
- Selection effect = .5

Figure C.3: Statistical Power with More Selectors than Avoiders, Equal and Offsetting Effects, and Selection Correlated with Outcome

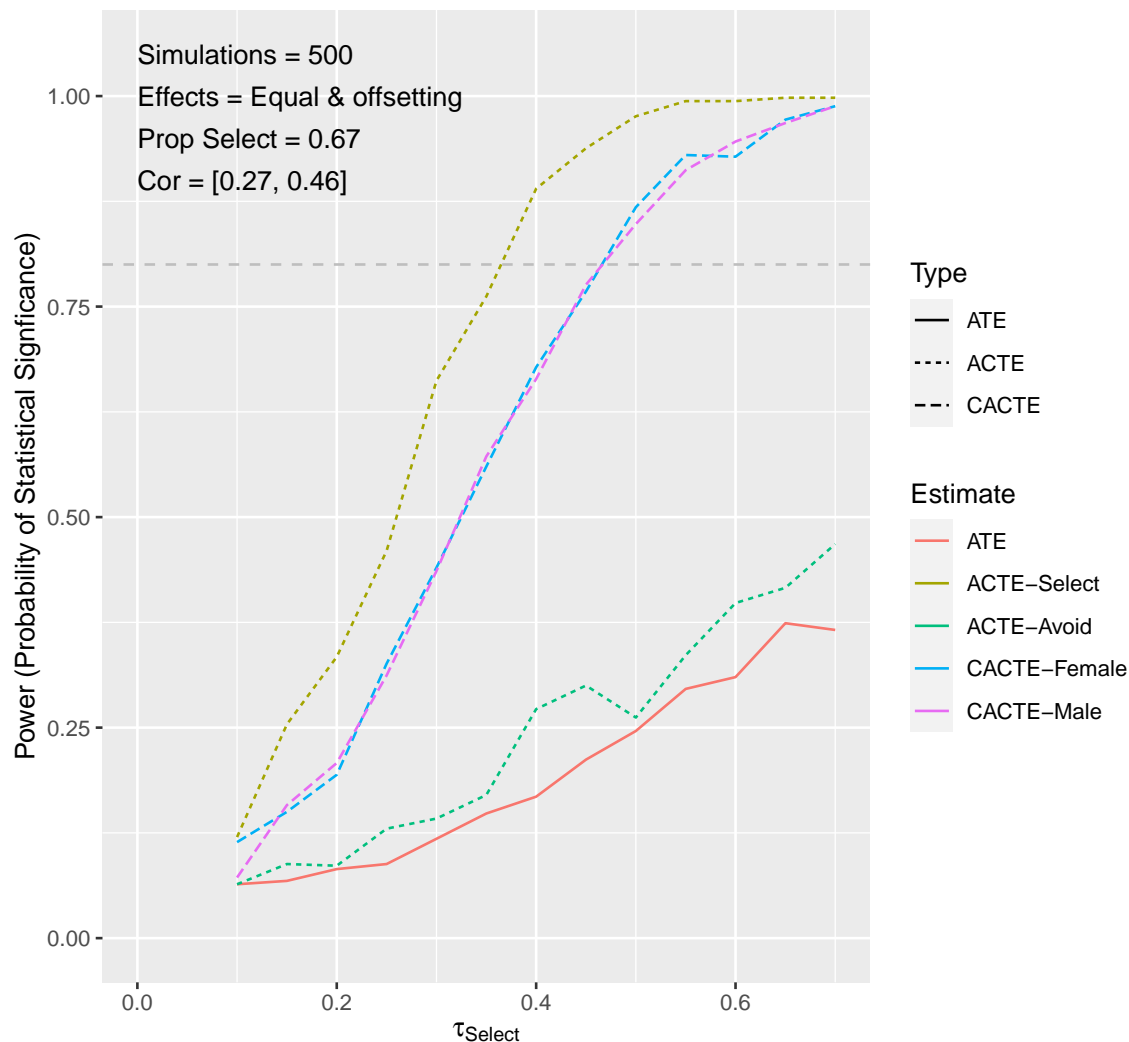


Figure C.3 shows the probability of correctly rejecting a null hypothesis at $p < 0.05$ for each of our estimands, assuming there are more people selecting treatment than avoiding it, and the effects of treatment (τ) are equal in size and opposite in direction. The CACTE among avoiders can be expected to detect an effect of about 0.45 with about 80 percent power, while the maximum power for ACTE among avoiders for an effect of 0.7 is just over 40 percent.

Table C.3: Power Analysis

	Hypothesized Effect Among Selectors												
	0.1	0.15	0.2	0.25	0.3	0.35	0.4	0.45	0.5	0.55	0.6	0.65	0.7
ATE	0.06	0.07	0.08	0.09	0.12	0.15	0.17	0.21	0.25	0.30	0.31	0.37	0.37
ACTE-Select	0.12	0.25	0.33	0.46	0.66	0.76	0.89	0.94	0.98	0.99	0.99	1.00	1.00
ACTE-Avoid	0.06	0.09	0.09	0.13	0.14	0.17	0.27	0.30	0.26	0.34	0.40	0.42	0.47
CACTE-Female	0.11	0.15	0.19	0.33	0.44	0.56	0.68	0.77	0.87	0.93	0.93	0.97	0.99
CACTE-Male	0.07	0.16	0.21	0.31	0.44	0.57	0.66	0.78	0.85	0.91	0.95	0.97	0.99

D DESCRIPTIVE STATISTICS

In September 2018, we recruited 1,137 subjects through Amazon’s Mechanical Turk (MTurk) to complete our initial study. Eligible subjects had to have a Human Intelligence Task (HIT) approval rate of 99 percent or higher, be located in the U.S., and have completed at least 1000 HITs. In January 2019, we fielded a second study of 1,000 respondents recruited via quota-based sampling from Qualtrics’s online panel to obtain a sample that was nationally representative on race, age, gender, and education.

Consistent with past scholarship (Berinsky, Huber and Lenz, 2012; Huff and Tingley, 2015), our MTurk sample tended to be younger, wealthier, and more educated than our Qualtrics sample. MTurk respondents were more liberal and Democratic, but less racially diverse relative to the Qualtrics panel. They also tended to be more familiar with the #MeToo movement and were more likely to opt-in to reading a woman’s views on this issue. Both samples contained roughly equal proportions of male and female respondents.

D.1 MTURK STUDY

Table D.1: Descriptive Statistics for MTurk Sample

	Min.	1st Qu.	Median	Mean	3rd Qu.	Max.
Prop. Female	0	0	0	0.49	1	1
Age	18	29	35	38.12	45	82
Income	1	4	6	6.23	8	12
Education	1	3	5	4.31	5	7
Party ID	1	2	3	3.49	6	7
Ideology	1	2	3	3.53	5	7
Prop. Black	0	0	0	0.06	0	1
Prop. Latinx	0	0	0	0.07	0	1
Prop. Asian	0	0	0	0.09	0	1
Familiarity with MeToo	0	2	3	2.45	3	4
Prop Avoiding Treatment	0	0	0	0.19	0	1

D.2 QUALTRICS SAMPLE

Table D.2: Descriptive Statistics for Qualtrics Sample

	Min.	1st Qu.	Median	Mean	3rd Qu.	Max.
Prop. Female	0	0	1	0.51	1	1
Age	18	31	46	45.94	60	93
Income	1	3	5	5.38	8	12
Education	1	2	3	3.28	5	7
Party ID	1	2	4	3.62	6	7
Ideology	1	3	4	4.04	5	7
Prop. Black	0	0	0	0.17	0	1
Prop. Latinx	0	0	0	0.18	0	1
Prop. Asian	0	0	0	0.06	0	1
Familiarity with MeToo	0	1	2	2.05	3	4
Prop Avoiding Treatment	0	0	0	0.33	1	1

E EFFECTS ON GENERAL SUPPORT FOR GENDER EQUALITY

In this section, we explore the possible effects of our treatment emphasizing the importance of the #MeToo movement on broader support for issues pertaining to gender equality in the U.S. Again, we construct a scale using principal component analysis of three 100-point measures tapping support for gender equality. In our MTurk sample, treatment appears to have no effect. None of the five causal estimands are statistically significant. In our Qualtrics sample, we find some modest average treatment effect, that appears to be concentrated among those likely to receive the treatment, specifically, women who are open to hearing another woman's views on #MeToo. Arguments in support of #MeToo appear effective at least marginally effective at mobilizing support among their most likely recipients, but appear to have little effect beyond their core audience. Of course, a different message, perhaps one conveying a personal experience might be more effective than our particular treatment, which used more general claims and statistics to argue for the importance of the #MeToo movement.

E.1 MTURK STUDY

Figure E.1: Effects on General Support for Gender Equality (MTurk Study)

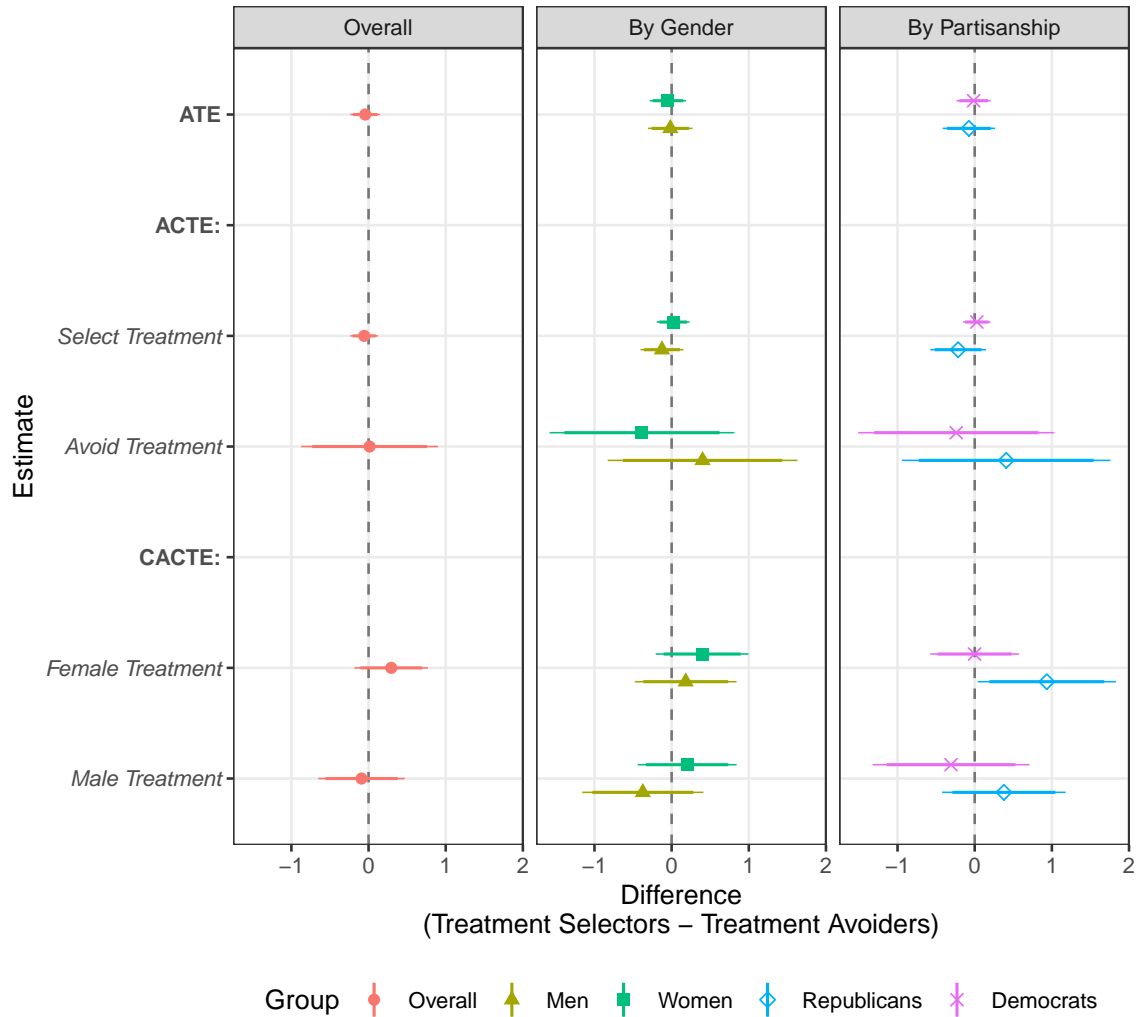


Figure E.1 provides the ATE, ACTEs, and CACTEs overall and separately by gender and partisanship in our MTurk sample on general support of gender equality.

Table E.1: Treatment Effect Estimates on General Support for Gender Equality (MTurk Sample)

	Overall	Men	Women	Republicans	Democrats
ATE					
ATE	-0.04 [-0.23, 0.15]	-0.02 [-0.31, 0.27]	-0.05 [-0.28, 0.19]	-0.08 [-0.41, 0.26]	-0.01 [-0.24, 0.21]
ACTE					
Select Treatment	-0.06 [-0.23, 0.12]	-0.12 [-0.40, 0.16]	0.02 [-0.19, 0.23]	-0.21 [-0.58, 0.15]	0.03 [-0.15, 0.21]
Avoid Treatment	0.01 [-0.87, 0.90]	0.36 [-0.88, 1.61]	-0.38 [-1.58, 0.81]	0.41 [-0.94, 1.76]	-0.24 [-1.51, 1.03]
CACTE					
Female Treatment	0.29 [-0.18, 0.77]	0.22 [-0.44, 0.89]	0.40 [-0.21, 1.00]	0.93 [0.04, 1.83]	-0.00 [-0.58, 0.58]
Male Treatment	-0.09 [-0.65, 0.47]	-0.33 [-1.12, 0.46]	0.20 [-0.44, 0.84]	0.38 [-0.42, 1.18]	-0.31 [-1.32, 0.71]

Note:

The table provides point estimates and 95% confidence intervals for treatment effect estimated from the full sample and separately by gender and partisanship

E.2 QUALTRICS STUDY

Figure E.2: Effects on General Support for Gender Equality (Qualtrics Study)

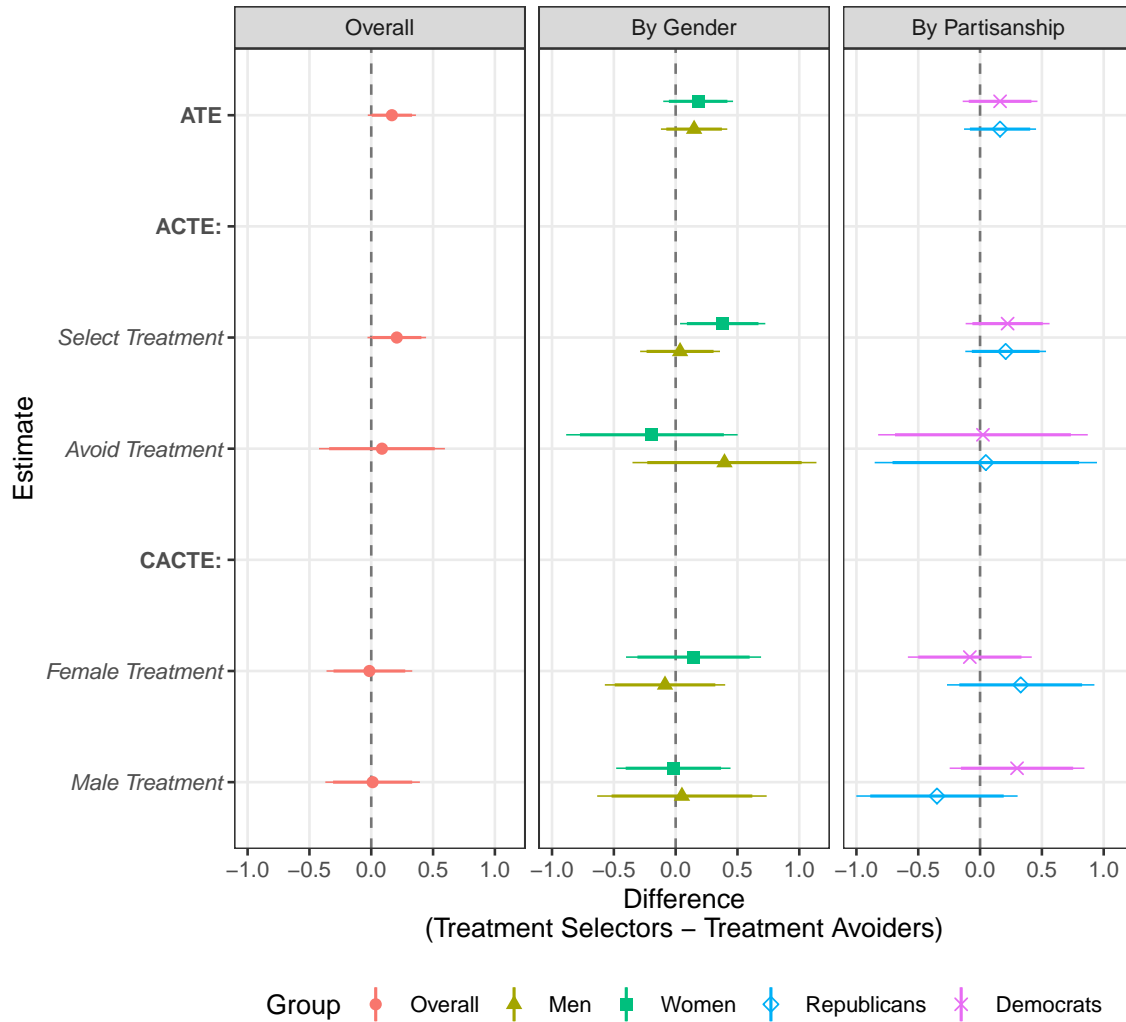


Figure E.2 provides the ATE, ACTEs, and CACTEs overall and separately by gender and partisanship in our MTurk sample on general support of gender equality.

Table E.2: Treatment Effect Estimates on General Support for Gender Equality (Qualtrics Sample)

	Overall	Men	Women	Republicans	Democrats
ATE					
ATE	0.17 [-0.03, 0.36]	0.15 [-0.12, 0.42]	0.18 [-0.10, 0.46]	0.16 [-0.13, 0.45]	0.16 [-0.14, 0.46]
ACTE					
Select Treatment	0.21 [-0.03, 0.44]	0.04 [-0.29, 0.36]	0.38 [0.04, 0.73]	0.21 [-0.12, 0.53]	0.22 [-0.12, 0.56]
Avoid Treatment	0.09 [-0.42, 0.60]	0.39 [-0.35, 1.14]	-0.19 [-0.89, 0.50]	0.05 [-0.85, 0.95]	0.02 [-0.82, 0.87]
CACTE					
Female Treatment	-0.02 [-0.36, 0.33]	-0.09 [-0.57, 0.40]	0.14 [-0.40, 0.69]	0.33 [-0.27, 0.92]	-0.08 [-0.58, 0.42]
Male Treatment	0.01 [-0.37, 0.39]	0.05 [-0.63, 0.74]	-0.02 [-0.48, 0.44]	-0.35 [-1.00, 0.30]	0.30 [-0.25, 0.84]

Note:

The table provides point estimates and 95% confidence intervals for treatment effect estimated from the full sample and separately by gender and partisanship

F ADDITIONAL ANALYSES

In this section, we explore some possible explanations for the general patterns of results observed in our paper. Specifically, we consider the extent to which prior knowledge and beliefs about the #MeToo movement may further condition the responses of our subjects, and the ways partisanship and gender interact to shape responses. These analyses were not pre-registered. While exploratory and suggestive, we hope they may inform further research on this topic.

In general, we suspect that prior knowledge about the #MeToo movement may limit the impact of our treatment. We coded respondents below the median on on measure of familiarity as unfamiliar (those who reported being either moderately, slightly, or not at all familiar with #MeToo) and respondents above the median (those who reported being very or extremely familiar) as familiar. The results are shown in Figures F.1 and F.2 for our MTurk and Qualtrics samples, respectively. The left panel shows the results conditional on familiarity with the movement, the center and right panels show the results conditional on familiarity for men and women, respectively. In general, the effects are more often positive and significant for subjects who reported low levels of familiarity compared to those reporting high levels of familiarity. Subjects familiar with the movement have likely already received the message and updated their beliefs, while treatment provides those unfamiliar with new supportive information about the importance of the #MeToo movement that may lead them to update their beliefs.

Similarly, we suspect that partisanship may play a similar role with Democrats tending to be more receptive to the message but also more likely to have already received it. Generally, partisan differences seem to overwhelm gender differences in terms of beliefs and responses to different messages (Sharrow et al., 2016; Huddy, Cassese and Lizotte, 2008). This seems particularly true for the #MeToo movement where partisan differences can predict how individuals respond to specific cases and how partisans feel about the movement broadly. That said, we also test for an interactive effect between gender and partisanship in some instances.

There are, for instance, slight differences in how women might perceive gender equity by partisanship. Within the Republican Party, there is a larger split between men and women with women have somewhat more liberal preferences on women's equality than their male counterparts (Barnes and Cassese, 2017). That

said, a growing subset of Republican women seem to harbor sexism (Cassese and Barnes, 2019). Given these two discrepant trends, we believe it is worth honing in our analysis to look at the interaction between partisanship and gender. Below we disaggregate the analysis by gender and party to assess the existence of additional interactive effects.

The results are shown in Figures F.3 and F.4 for our MTurk and Qualtrics samples, respectively. We find that there is a difference among Republicans based on the messenger. For Republican men who opt to listen to Joan, they are more positive about the #MeToo movement relative to Republican women who select to hear Joan’s perspective. However, for those avoiding the treatment, we see a different pattern. Republican men who avoid the treatment appear to exhibit a backlash effect, while Republican women who avoid the treatment grow more favorable toward the #MeToo movement.

Finally, we explore the effect of our treatment on respondents’ knowledge of sexual assault statistics – specifically what percent of rapes go unreported – in Figures F.5 and F.6 and their propensity to provide some form of written response when given the opportunity to share their own views about the #MeToo movement (Figures F.7 and F.8). We observe two different patterns of responses in our two samples. Among MTurk respondents, treatment is largely successful at increasing knowledge of statistics about sexual assault among both men and women, and most precisely estimated among respondents likely to receive our treatment. Among our Qualtrics respondents, we also observe positive effects, concentrated primarily among women. In terms of subjects’ willingness to provide their own views in open response, MTurk respondents open to hearing a woman’s views were more likely to provide some written response, while those who would choose not to receive this information were less likely. These effects would be missed by only looking at the *ATE* from a standard experiment. In our Qualtrics sample, treatment appears to have little to no effect, except possibly among men who would avoid receiving the treatment who appear to be more likely to provide their own views after being randomly assigned to receive our treatment. The *CACTEs* among men, however, while positive are much smaller in magnitude and non-significant.

F.1 EFFECTS ON SUPPORT FOR #MeToo CONDITIONAL ON FAMILIARITY

MTURK SAMPLE

Figure F.1: Treatment Effect Estimates on Specific Support for #MeToo Conditional on Familiarity and Gender (MTurk Sample)

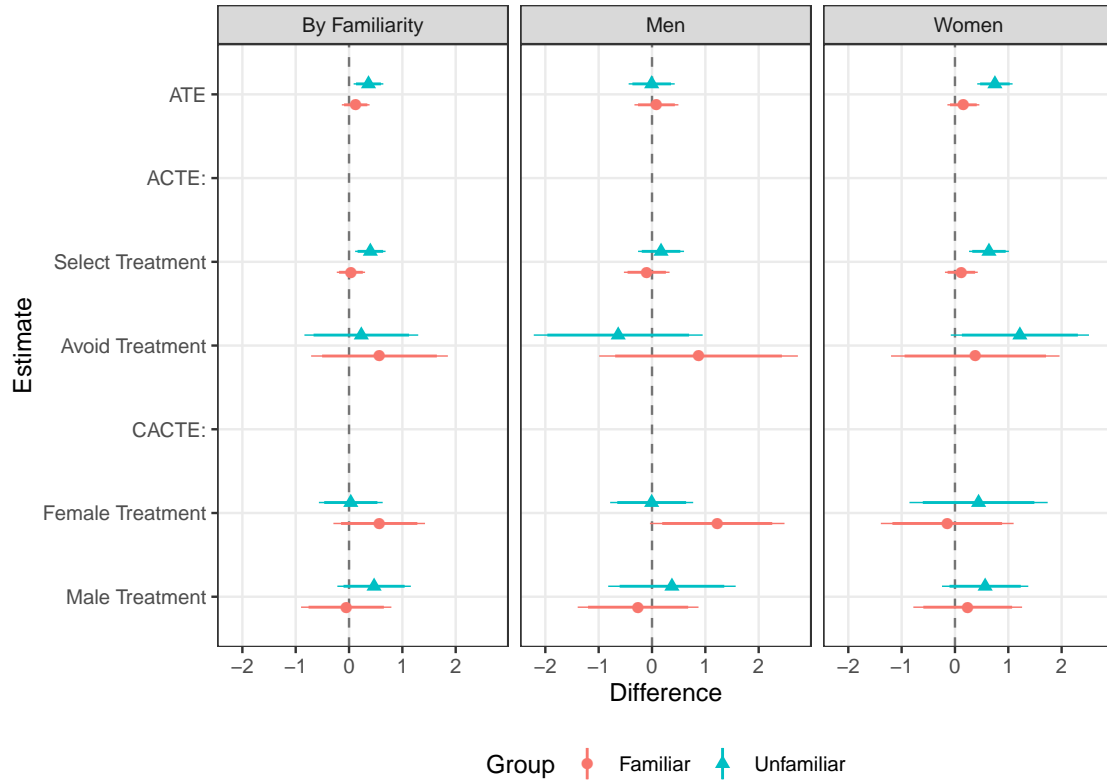


Figure F.1 provides the ATE, ACTEs, and CACTEs on support for #MeToo conditional on familiarity with the movement for the full sample and for men and women separately.

Table F.1: Treatment Effect Estimates on Specific Support for #MeToo Conditional On Familiarity and Gender (MTurk Sample)

	Full Sample		Men		Women	
	Familiar	Unfamiliar	Familiar	Unfamiliar	Familiar	Unfamiliar
ATE						
ATE	0.13 [-0.14, 0.39]	0.36 [0.09, 0.64]	0.08 [-0.33, 0.50]	-0.01 [-0.44, 0.43]	0.16 [-0.14, 0.46]	0.75 [0.42, 1.08]
ACTE						
Select Treatment	0.04 [-0.23, 0.30]	0.40 [0.11, 0.68]	-0.10 [-0.53, 0.33]	0.17 [-0.26, 0.60]	0.12 [-0.19, 0.43]	0.64 [0.26, 1.01]
Avoid Treatment	0.57 [-0.71, 1.85]	0.23 [-0.84, 1.30]	0.87 [-0.99, 2.74]	-0.63 [-2.22, 0.95]	0.38 [-1.20, 1.96]	1.22 [-0.08, 2.51]
CACTE						
Female Treatment	0.57 [-0.29, 1.42]	0.03 [-0.57, 0.63]	1.22 [-0.04, 2.48]	-0.01 [-0.78, 0.77]	-0.15 [-1.39, 1.10]	0.44 [-0.85, 1.74]
Male Treatment	-0.05 [-0.90, 0.79]	0.47 [-0.22, 1.16]	-0.26 [-1.39, 0.87]	0.37 [-0.82, 1.57]	0.24 [-0.78, 1.26]	0.57 [-0.24, 1.37]

Note:

The table provides point estimates and 95% confidence intervals for treatment effect estimated by level of pre-test familiarity with the movement overall and by gender.

QUALTRICS SAMPLE

Figure F.2: Treatment Effect Estimates on Specific Support for #MeToo Conditional on Familiarity and Gender (Qualtrics Sample)

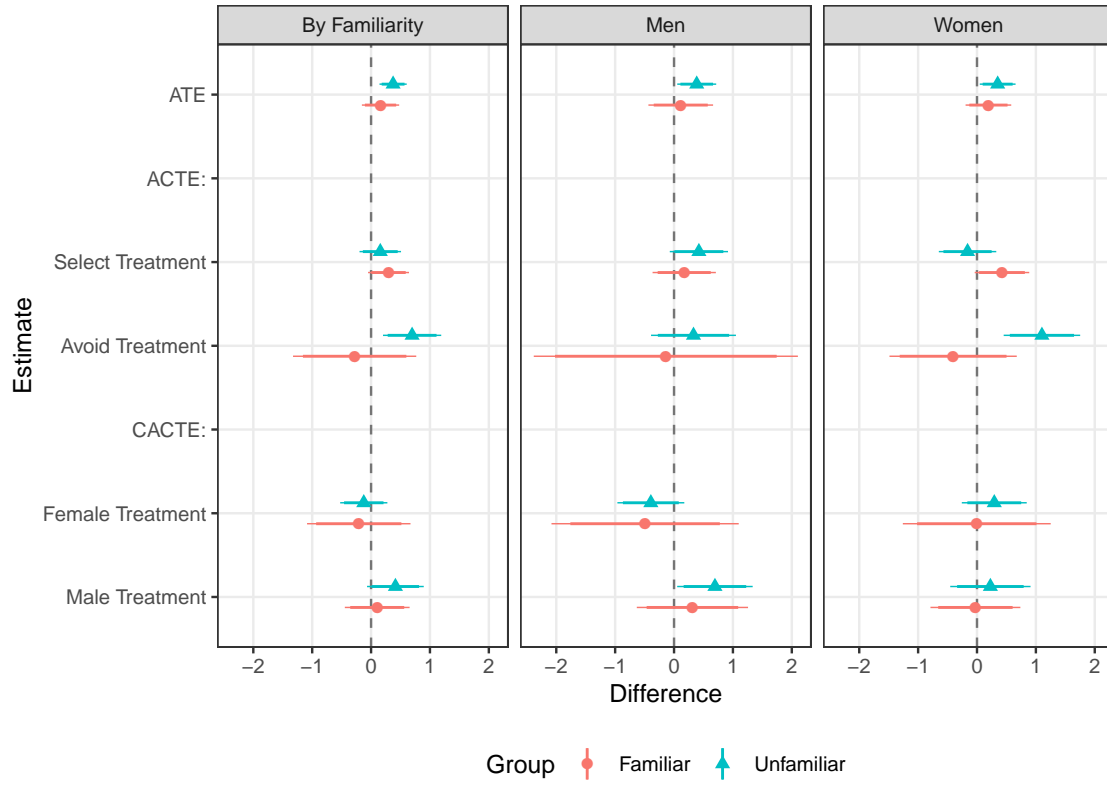


Figure F.2 provides the ATE, ACTEs, and CACTEs on support for #MeToo conditional on familiarity with the movement for the full sample and for men and women separately.

Table F.2: Treatment Effect Estimates on Specific Support for #MeToo Conditional On Familiarity and Gender (MTurk Sample)

	Full Sample		Men		Women	
	Unfamiliar	Familiar	Unfamiliar	Familiar	Unfamiliar	Familiar
ATE						
ATE	0.37 [0.14, 0.61]	0.16 [-0.16, 0.48]	0.39 [0.05, 0.72]	0.11 [-0.44, 0.66]	0.35 [0.05, 0.65]	0.19 [-0.19, 0.58]
ACTE						
Select Treatment	0.16 [-0.20, 0.51]	0.30 [-0.05, 0.64]	0.42 [-0.07, 0.92]	0.17 [-0.36, 0.71]	-0.16 [-0.65, 0.33]	0.42 [-0.04, 0.89]
Avoid Treatment	0.70 [0.20, 1.19]	-0.28 [-1.33, 0.77]	0.33 [-0.39, 1.05]	-0.14 [-2.38, 2.10]	1.10 [0.45, 1.75]	-0.41 [-1.49, 0.68]
CACTE						
Female Treatment	-0.12 [-0.52, 0.28]	-0.21 [-1.09, 0.67]	-0.39 [-0.96, 0.17]	-0.49 [-2.08, 1.10]	0.29 [-0.26, 0.84]	-0.00 [-1.26, 1.25]
Male Treatment	0.41 [-0.07, 0.89]	0.10 [-0.45, 0.65]	0.69 [0.05, 1.34]	0.31 [-0.63, 1.26]	0.23 [-0.45, 0.91]	-0.03 [-0.79, 0.74]

Note:

The table provides point estimates and 95% confidence intervals for treatment effect estimated by level of pre-test familiarity with the movement overall and by gender.

F.2 EFFECTS ON SUPPORT FOR #MeToo CONDITIONAL ON PARTISANSHIP

MTURK SAMPLE

Figure F.3: Treatment Effect Estimates on Specific Support for #MeToo Conditional On Partisanship and Gender (MTurk Sample)

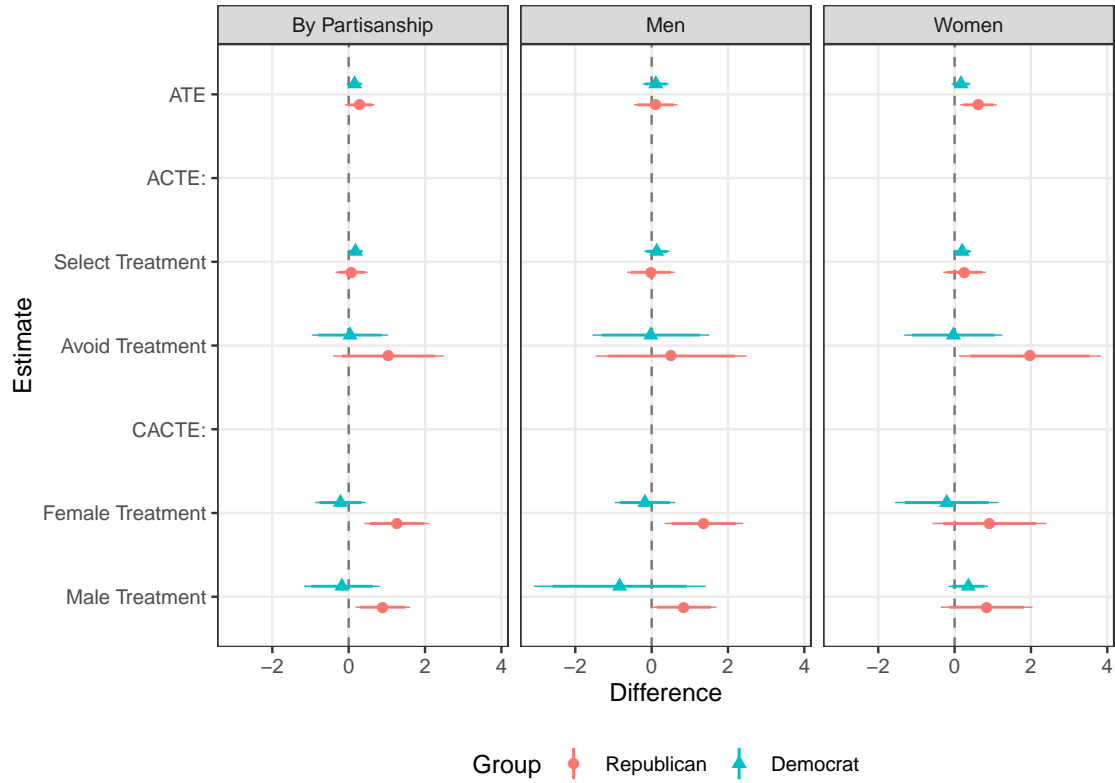


Figure F.3 provides the ATE, ACTEs, and CACTEs on support for #MeToo conditional on partisanship for the full sample and for men and women separately.

Table F.3: Treatment Effect Estimates on Specific Support for #MeToo Conditional On Partisanship and Gender (MTurk Sample)

	Full Sample		Men		Women	
	Democrat	Republican	Democrat	Republican	Democrat	Republican
ATE						
ATE	0.16 [-0.05, 0.36]	0.29 [-0.10, 0.68]	0.11 [-0.23, 0.45]	0.10 [-0.47, 0.68]	0.17 [-0.08, 0.41]	0.63 [0.15, 1.10]
ACTE						
Select Treatment	0.18 [-0.02, 0.38]	0.07 [-0.35, 0.49]	0.13 [-0.20, 0.46]	-0.02 [-0.64, 0.60]	0.20 [-0.04, 0.44]	0.26 [-0.30, 0.82]
Avoid Treatment	0.04 [-0.96, 1.03]	1.04 [-0.40, 2.48]	-0.02 [-1.55, 1.50]	0.51 [-1.47, 2.49]	-0.03 [-1.32, 1.25]	1.97 [0.12, 3.83]
CACTE						
Female Treatment	-0.22 [-0.88, 0.45]	1.27 [0.42, 2.12]	-0.18 [-0.97, 0.61]	1.37 [0.34, 2.40]	-0.21 [-1.56, 1.15]	0.91 [-0.58, 2.40]
Male Treatment	-0.18 [-1.16, 0.81]	0.89 [0.18, 1.60]	-0.84 [-3.09, 1.41]	0.84 [-0.01, 1.70]	0.36 [-0.16, 0.88]	0.84 [-0.36, 2.04]

Note:

The table provides point estimates and 95% confidence intervals for treatment effect estimated by partisanship overall and by gender.

QUALTRICS SAMPLE

Figure F.4: Treatment Effect Estimates on Specific Support for #MeToo Conditional On Partisanship and Gender (Qualtrics Sample)

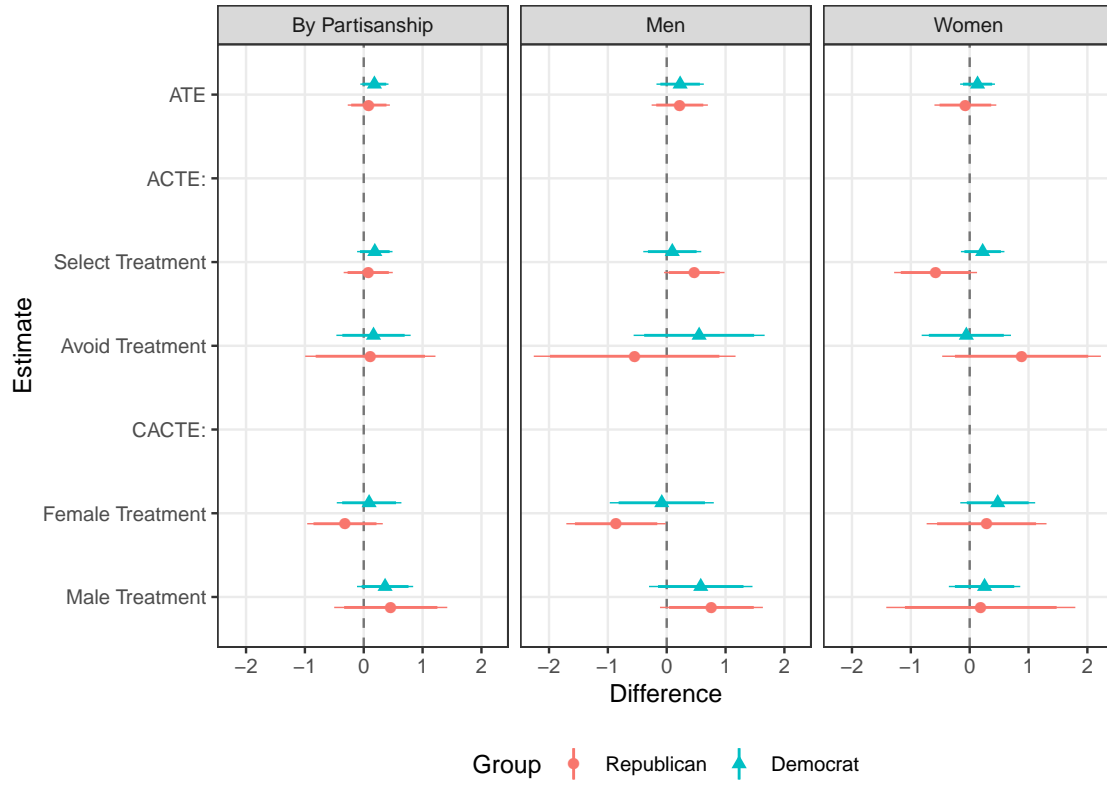


Figure F.4 provides the ATE, ACTEs, and CACTEs on support for #MeToo conditional on partisanship for the full sample and for men and women separately.

Table F.4: Treatment Effect Estimates on Specific Support for #MeToo Conditional On Partisanship and Gender (MTurk Sample)

	Full Sample		Men		Women	
	Republicans	Democrats	Republicans	Democrats	Republicans	Democrats
ATE						
ATE	0.09	0.18	0.22	0.23	-0.07	0.13
	[-0.27, 0.44]	[-0.06, 0.42]	[-0.26, 0.70]	[-0.17, 0.63]	[-0.60, 0.45]	[-0.16, 0.43]
ACTE						
Select Treatment	0.08	0.19	0.47	0.09	-0.58	0.22
	[-0.34, 0.49]	[-0.11, 0.49]	[-0.05, 0.98]	[-0.40, 0.59]	[-1.28, 0.13]	[-0.15, 0.59]
Avoid Treatment	0.11	0.17	-0.54	0.55	0.88	-0.06
	[-0.99, 1.22]	[-0.47, 0.80]	[-2.26, 1.17]	[-0.56, 1.66]	[-0.47, 2.23]	[-0.82, 0.70]
CACTE						
Female Treatment	-0.32	0.09	-0.86	-0.08	0.29	0.48
	[-0.96, 0.32]	[-0.46, 0.64]	[-1.71, -0.01]	[-0.97, 0.80]	[-0.73, 1.31]	[-0.16, 1.11]
Male Treatment	0.46	0.36	0.76	0.58	0.19	0.25
	[-0.50, 1.42]	[-0.11, 0.84]	[-0.11, 1.63]	[-0.30, 1.46]	[-1.42, 1.80]	[-0.35, 0.86]

Note:

The table provides point estimates and 95% confidence intervals for treatment effect estimated by partisanship overall and partisanship by gender

F.3 EFFECTS ON KNOWLEDGE OF SEXUAL ASSAULT STATISTICS

MTURK SAMPLE

Figure F.5: Treatment Effect Estimates on Knowledge of Sexual Assault Statistics (MTurk Sample)

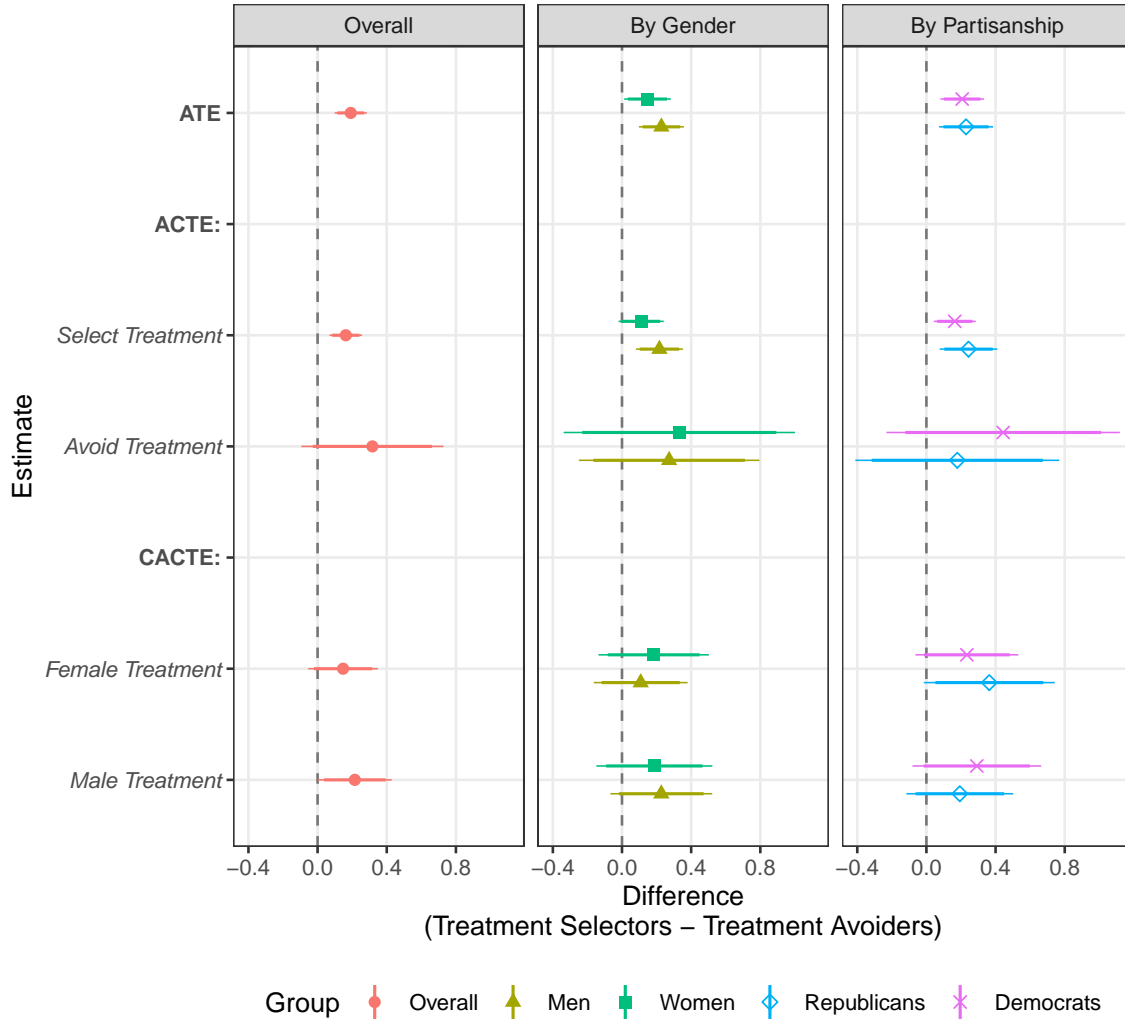


Figure F.5 provides the ATE, ACTEs, and CACTEs on respondents knowledge of sexual assault statistics.

Table F.5: Treatment Effect Estimates on Knowledge of Sexual Assault Statistics (MTurk Sample)

	Overall	Men	Women	Republicans	Democrats
ATE					
ATE	0.19 [0.10, 0.28]	0.23 [0.10, 0.36]	0.15 [0.01, 0.28]	0.23 [0.07, 0.39]	0.21 [0.08, 0.33]
ACTE					
Select Treatment	0.16 [0.07, 0.26]	0.22 [0.08, 0.35]	0.11 [-0.02, 0.24]	0.24 [0.08, 0.41]	0.16 [0.04, 0.29]
Avoid Treatment	0.32 [-0.09, 0.73]	0.27 [-0.25, 0.79]	0.33 [-0.34, 1.00]	0.18 [-0.41, 0.77]	0.44 [-0.23, 1.12]
CACTE					
Female Treatment	0.15 [-0.05, 0.35]	0.11 [-0.16, 0.38]	0.18 [-0.14, 0.50]	0.36 [-0.02, 0.74]	0.23 [-0.06, 0.53]
Male Treatment	0.22 [0.00, 0.43]	0.23 [-0.07, 0.52]	0.19 [-0.15, 0.52]	0.19 [-0.12, 0.50]	0.29 [-0.08, 0.66]

Note:

The table provides point estimates and 95% confidence intervals for treatment effect estimated from the full sample and separately by gender and partisanship.

QUALTRICS SAMPLE

Figure F.6: Treatment Effect Estimates on Knowledge of Sexual Assault Statistics (Qualtrics Sample)

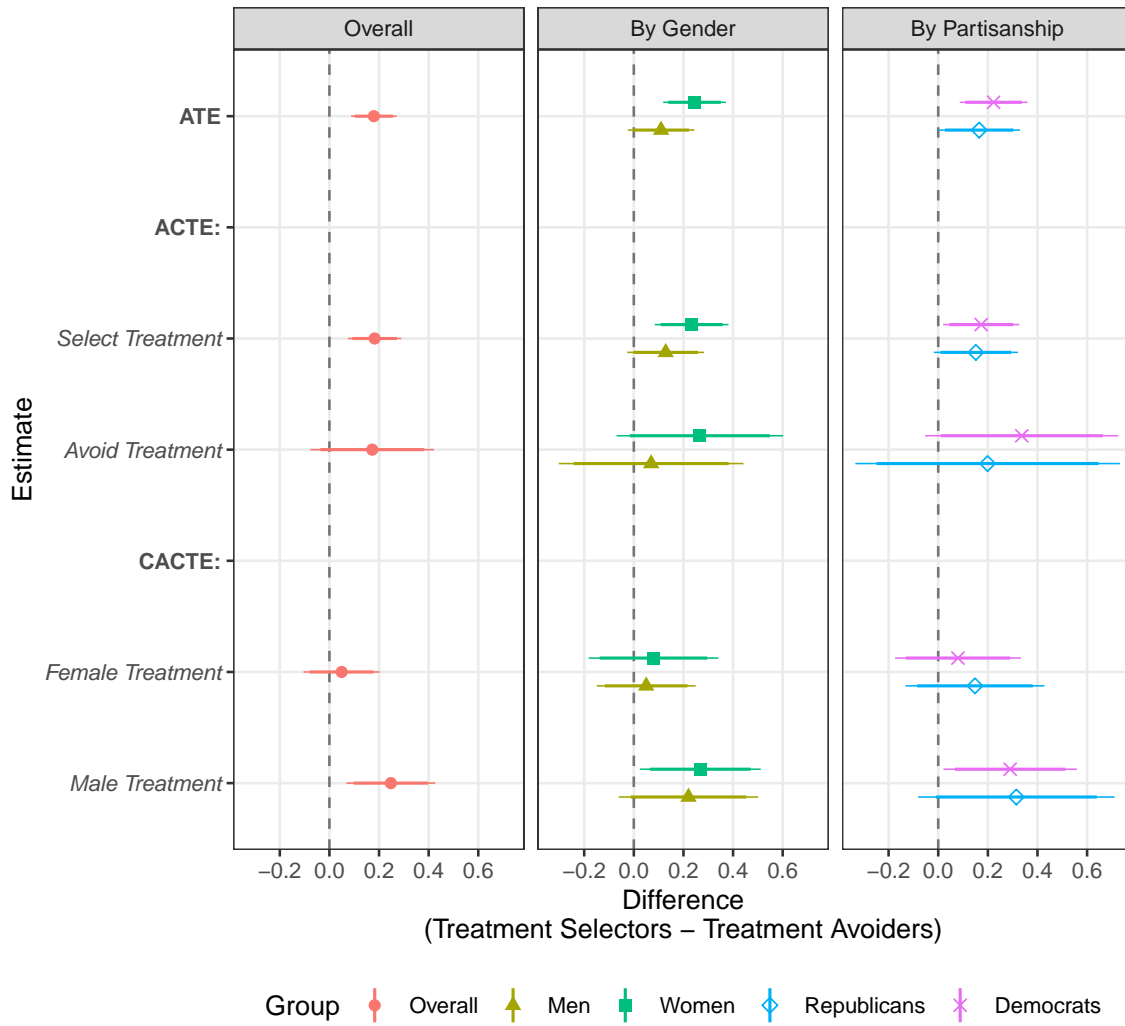


Figure F.6 provides the ATE, ACTEs, and CACTEs on respondents knowledge of sexual assault statistics.

Table F.6: Treatment Effect Estimates on Knowledge of Sexual Assault Statistics (Qualtrics Sample)

	Overall	Men	Women	Republicans	Democrats
ATE					
ATE	0.18 [0.09, 0.27]	0.11 [-0.02, 0.24]	0.24 [0.12, 0.37]	0.17 [-0.00, 0.33]	0.22 [0.09, 0.36]
ACTE					
Select Treatment	0.18 [0.07, 0.29]	0.13 [-0.03, 0.28]	0.23 [0.08, 0.38]	0.15 [-0.02, 0.32]	0.17 [0.02, 0.33]
Avoid Treatment	0.17 [-0.08, 0.42]	0.07 [-0.30, 0.44]	0.27 [-0.07, 0.60]	0.20 [-0.33, 0.73]	0.34 [-0.05, 0.73]
CACTE					
Female Treatment	0.05 [-0.10, 0.20]	0.05 [-0.15, 0.25]	0.08 [-0.18, 0.34]	0.15 [-0.13, 0.43]	0.08 [-0.17, 0.33]
Male Treatment	0.25 [0.07, 0.43]	0.22 [-0.06, 0.50]	0.27 [0.02, 0.51]	0.31 [-0.08, 0.71]	0.29 [0.02, 0.56]

Note:

The table provides point estimates and 95% confidence intervals for treatment effect estimated from the full sample and separately by gender and partisanship

F.4 EFFECTS ON PROVIDING WRITTEN RESPONSES ABOUT #MeToo

MTURK SAMPLE

Figure F.7: Treatment Effect Estimates on Providing Written Responses about #MeToo (MTurk Sample)

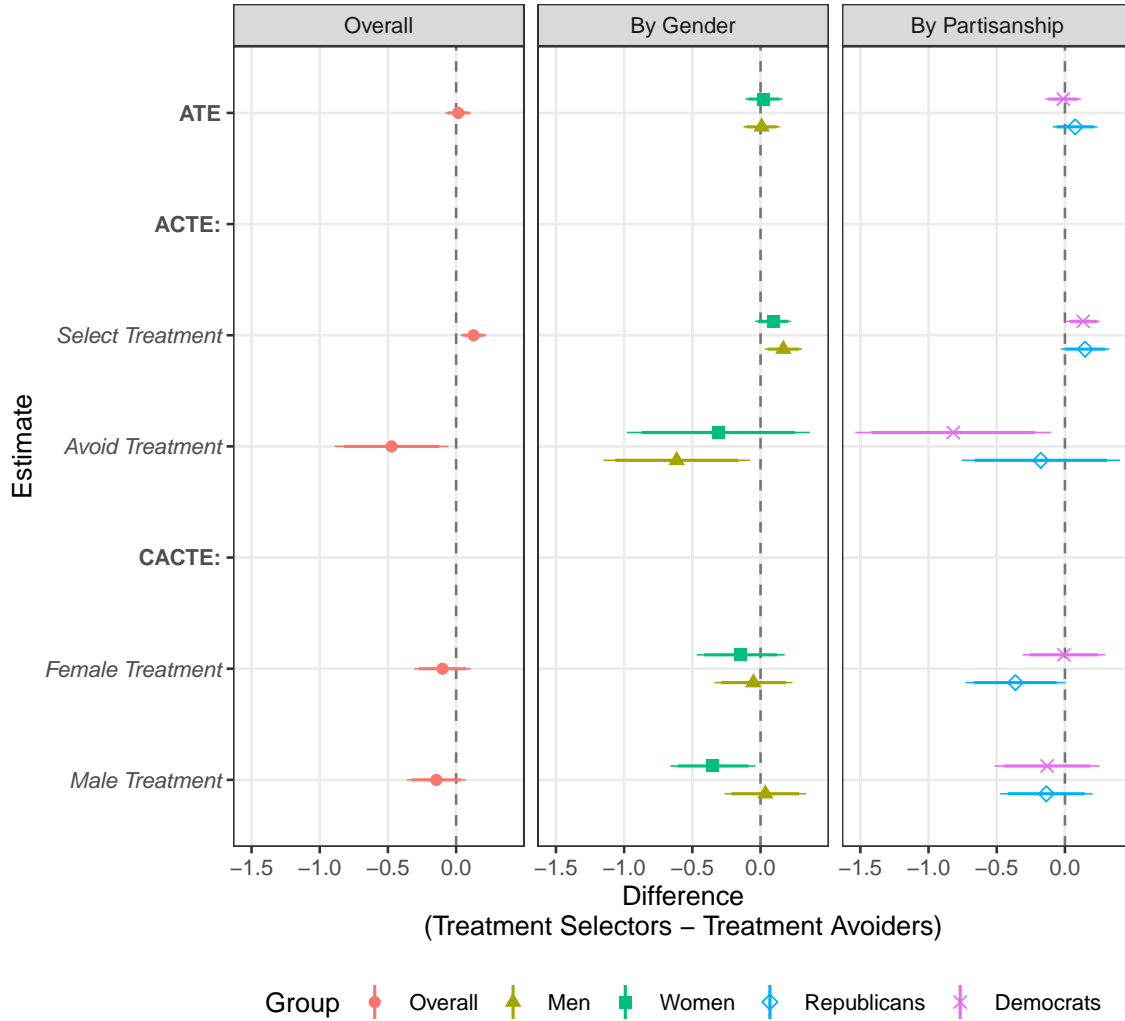


Figure F.7 provides the ATE, ACTEs, and CACTEs on respondents knowledge of sexual assault statistics.

Table F.7: Treatment Effect Estimates on Providing Written Responses about #MeToo (MTurk Sample)

	Overall	Men	Women	Republicans	Democrats
ATE					
ATE	0.02 [-0.08, 0.11]	0.01 [-0.13, 0.14]	0.03 [-0.11, 0.16]	0.08 [-0.09, 0.24]	-0.01 [-0.14, 0.12]
ACTE					
Select Treatment	0.13 [0.03, 0.22]	0.17 [0.03, 0.30]	0.09 [-0.04, 0.22]	0.15 [-0.03, 0.32]	0.13 [0.01, 0.25]
Avoid Treatment	-0.47 [-0.89, -0.06]	-0.61 [-1.15, -0.08]	-0.31 [-0.98, 0.36]	-0.18 [-0.76, 0.40]	-0.82 [-1.54, -0.10]
CACTE					
Female Treatment	-0.10 [-0.31, 0.11]	-0.05 [-0.34, 0.23]	-0.14 [-0.47, 0.18]	-0.36 [-0.73, 0.00]	-0.01 [-0.31, 0.29]
Male Treatment	-0.15 [-0.36, 0.07]	0.04 [-0.26, 0.33]	-0.35 [-0.66, -0.04]	-0.14 [-0.48, 0.20]	-0.13 [-0.52, 0.25]

Note:

The table provides point estimates and 95% confidence intervals for treatment effect estimated from the full sample and separately by gender and partisanship.

QUALTRICS SAMPLE

Figure F.8: Treatment Effect Estimates on Providing Written Responses about #MeToo (Qualtrics Sample)

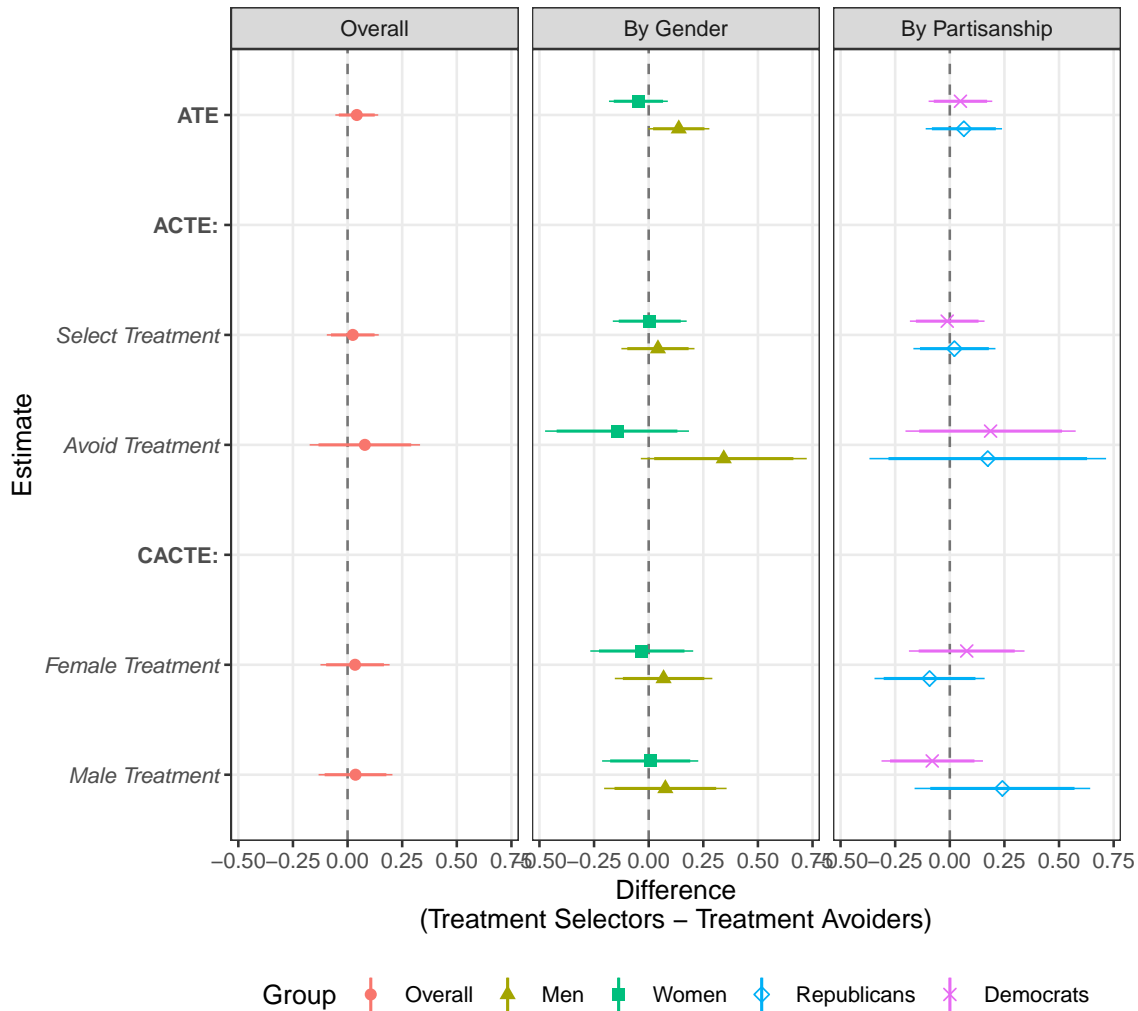


Figure F.8 provides the ATE, ACTEs, and CACTEs on respondents knowledge of sexual assault statistics.

Table F.8: Treatment Effect Estimates on Providing Written Responses about #MeToo (Qualtrics Sample)

	Overall	Men	Women	Republicans	Democrats
ATE					
ATE	0.04 [-0.06, 0.14]	0.14 [-0.00, 0.28]	-0.05 [-0.18, 0.09]	0.06 [-0.11, 0.24]	0.05 [-0.10, 0.19]
ACTE					
Select Treatment	0.02 [-0.10, 0.14]	0.04 [-0.12, 0.21]	0.00 [-0.16, 0.17]	0.02 [-0.17, 0.21]	-0.01 [-0.18, 0.16]
Avoid Treatment	0.08 [-0.17, 0.33]	0.34 [-0.04, 0.72]	-0.14 [-0.47, 0.18]	0.17 [-0.37, 0.72]	0.19 [-0.20, 0.58]
CACTE					
Female Treatment	0.03 [-0.12, 0.19]	0.07 [-0.15, 0.29]	-0.03 [-0.27, 0.20]	-0.09 [-0.34, 0.16]	0.08 [-0.19, 0.34]
Male Treatment	0.04 [-0.13, 0.21]	0.08 [-0.20, 0.36]	0.01 [-0.21, 0.23]	0.24 [-0.16, 0.64]	-0.08 [-0.31, 0.15]

Note:

The table provides point estimates and 95% confidence intervals for treatment effect estimated from the full sample and separately by gender and partisanship

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