Appendix: Partisanship Unmasked? The Role of Politics and Social Norms in COVID-19 Mask-Wearing Behavior

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Survey details

4,438 American respondents were initially recruited to a larger multi-wave panel survey from three separate YouGov sampling frames. 2,238 came from YouGov's Pulse panel; 1,096 came from the general YouGov panel; and 1,104 came from areas with a high incidence of COVID. By Wave 3, we retained 2,982 respondents (67%), including 1,532 from the Pulse panel (68%), 774 from the general population (71%), and 676 from the high-incidence group (61%). Respondents filled out Wave 1 on May 20–June 3, 2020; Wave 2 on June 25–July 12, 2020; and Wave 3 on July 28–August 19, 2020. The main experiment took place in the third wave. (Wave 4 was later fielded from March 9–23, 2021.)

Measurement of independent variables

Affective polarization (Wave 3). Respondents filled out 0-100 point feeling thermometers for "People who support Democrats" and "People who support Republicans." We transformed these items to subtract feeling thermometers for the opposing party from feeling thermometers for a respondent's party.

Under- and over-estimation of American and partisan mask-wearing (Wave 3). Prior to the manipulations, respondents were asked "What percentage of Americans/Democrats/Republicans do you think would say they wear a mask in public all or most of the time?" We used respondent partisanship to transform the Democratic and Republican questions into co-partisan and out-partisan questions. We coded respondents as underestimating (overestimating) Americans/co-partisans/out-partisans when their guess was under (over) the true figure by 10% or more, with respondents who were relatively accurate as the reference category.

Party (Wave 1). A 3-point scale of self-proclaimed party identification such that 1=Democratic, 2=Independent, 3=Republican.

Gender (Wave 1). A dichotomous variable that =1 if a respondent is male, 0 otherwise.

Ideology (Wave 1). A 7-point scale of ideological identification such that 1=very liberal, 4=moderate; middle of the road, and 7=very conservative.

Trust in health institutions (Wave 1). Respondents filled out five items on the amount of trust they have in health institutions on 4-point scales from 1 (not at all) to 4 (a lot). Three concerned trust in governmental health institutions to handle the coronavirus outbreak with the stem "How much do you trust the following people and organizations to do the right thing to best handle the coronavirus outbreak?" "Hospitals and doctors," "Scientists and researchers," "Centers for Disease Control and Prevention (CDC)." They also filled out two items on trust in information from governmental health institutions with the stem "How much, if at all, do you trust the information you get from..." "Health experts in the state government?" "Health experts in the federal government?" (α=.80)

Trust in the media (Wave 1). Respondents filled out two items on trust in the media on 4-point scales from 1 (not at all) to 4 (a lot) with the following stem: "How much, if at all, do you trust the information you get from..." "National news organizations?" "Local news organizations?" (r=.65, α=.77)

Political interest (Wave 1). A five-point scale from not at all interested (1) to extremely interested (5).

Lasso regression

The eligible covariates included education, age, gender, marital status, church attendance, region, party, ideology, living in a high incidence COVID area, CRT score, political knowledge, race, trust in health institutions, and trust in the media. Using the lasso regression, we find men, Republicans, and those who were more conservative had significantly lower mask-wearing intentions, while those who trusted health institutions had significantly higher mask-wearing intentions. We also find that Republicans and those who were more conservative perceived masks as significantly less effective, while those who trusted health institutions and the media considered masks more effective as a pandemic mitigation tool. Lastly, we find conservatives displayed significantly lower affective polarization, while those reporting higher political interest displayed higher affective polarization. Therefore, we control for gender, party, ideology and trust in health institutions in models of behavioral intentions; party, ideology, trust in health institutions and media trust in models of perceived mask-wearing effectiveness; and ideology and political interest in models of affective polarization.

H1A/H2A/RQ1A: Main effects of norms treatments

Table A1: Treatment effects on mask-wearing intentions among partisans

	(1)	(2)
American norms treatment	0.116*	0.140***
	(0.054)	(0.047)
Co-partisan norms treatment	−0.041	0.026
	(0.057)	(0.049)
Out-partisan norms treatment	0.042	0.058
	(0.056)	(0.047)
Male		−0.162***
		(0.034)
Republican		−0.177***
		(0.028)
Conservatism		−0.047***
		(0.012)
Health trust		0.570***
		(0.045)
Constant	4.367***	3.431***
	(0.039)	(0.130)
N	2,519	2,513
R^2	0.003	0.287

OLS regression with robust standard errors in parentheses; ***p<0.005, **p<0.01; *p<0.05.

Table A2: Effect of American norms treatment on mask-wearing intentions (control/American norms conditions only)

	(1)	(2)
American norms treatment	0.127^{*}	0.133^{*}
	(0.052)	(0.045)
Male		-0.153^{***}
		(0.046)
Partisanship		-0.159^{***}
		(0.037)
Conservatism		-0.050^{***}
		(0.016)
Health trust		0.574^{***}
		(0.053)
Constant	4.308^{***}	3.401^{***}
	(0.038)	(0.151)
N	1,488	1,470
R^2	0.004	0.260

OLS regression with robust standard errors in parentheses; $^{***}p<0.005$, $^{**}p<0.01$; $^{*}p<0.05$. Partisanship is measured as a three-point scale where 1=Democrat and 3=Republican (including leaners).

H1B/H2B/RQ1B: Norms treatment effects by prior norms estimations

Table A3: Treatment effects on mask-wearing intentions by prior norm estimates among partisans

	(1)	(2)
American norms treatment	0.097	0.123*
	(0.067)	(0.061)
Co-partisan norms treatment	−0.013	0.057
	(0.067)	(0.053)
Out-partisan norms treatment	0.051	0.060
	(0.109)	(0.088)
Underestimates American norm	−0.299***	−0.126*
	(0.052)	(0.042)
Underestimated co-partisan norm	−0.301***	−0.204***
	(0.059)	(0.046)
Underestimates out-partisan norm	0.326***	0.179***
	(0.058)	(0.046)
Overestimates American norm	0.254*	0.125
	(0.068)	(0.069)
Overestimates co-partisan norm	−0.332***	0.435***
	(0.053)	(0.063)
Overestimates out-partisan norm	0.169*	0.022
	(0.068)	(0.056)
American treatment × underestimates Americans	0.122	0.053
	(0.092)	(0.078)
Co-partisan treatment × underestimates co-partisans	−0.061	−0.037
	(0.124)	(0.097)
Out-partisan treatment × underestimates out-partisans	0.022	−0.011
	(0.118)	(0.097)
American treatment × overestimates Americans	−0.076	0.043
	(0.123)	(0.121)
Co-partisan treatment × overestimates co-partisans	−0.013	−0.056
	(0.107)	(0.097)
Out-partisan treatment × overestimates out-partisans	−0.050	−0.021
	(0.149)	(0.116)
Male		−0.135***
		(0.033)
Republican		−0.337***
		(0.034)
Conservatism		−0.045***
		(0.012)
Health trust		0.489***
		(0.045)
Constant	4.467***	3.609***
	(0.066)	(0.137)
N	2,358	2,353
R^2	0.074	0.352

OLS regression with robust standard errors in parentheses; ***p<0.005, **p<0.01; *p<0.05.

Table A4: Effect of American norms treatment by prior norm estimates (control/American norms conditions only)

	(1)	(2)
American norms treatment	0.072	0.100
	(0.070)	(0.065)
Underestimates American norm	-0.280^{***}	-0.256^{***}
	(0.078)	(0.067)
Overestimates American norm	0.151	0.156
	(0.125)	(0.129)
American treatment $\times$ underestimates Americans	0.108	0.072
	(0.109)	(0.089)
American treatment $\times$ overestimates Americans	0.086	0.120
	(0.150)	(0.141)
Male		-0.158^{***}
		(0.045)
Partisanship		-0.161^{***}
		(0.036)
Conservatism		-0.057^{***}
		(0.016)
Health trust		0.531^{***}
		(0.053)
Constant	4.456^{***}	3.647^{***}
	(0.049)	(0.159)
N	1,416	1,408
R^2	0.024	0.278

OLS regression with robust standard errors in parentheses; $^{***}p<0.005$, $^{**}p<0.01$; $^{*}p<0.05$. Partisanship is measured as a three-point scale where 1=Democrat and 3=Republican (including leaners).

RQ2: Do norm treatments impact perceived mask effectiveness?

Table A5: Treatment effects on perceived mask effectiveness among partisans

	(1)	(2)
American norms treatment	0.056	0.085*
	(0.047)	(0.038)
Co-partisan norms treatment	−0.009	0.050
	(0.049)	(0.039)
Out-partisan norms treatment	0.023	0.039
	(0.048)	(0.039)
Republican		−0.175***
		(0.025)
Conservatism		−0.044***
		(0.011)
Health trust		0.490***
		(0.038)
Media trust		0.067*
		(0.027)
Constant	3.456***	2.483***
	(0.034)	(0.098)
N	2,519	2,512
R^2	0.001	0.348

OLS regression with robust standard errors in parentheses; ***p<0.005, **p<0.01; *p<0.05.

Table A6: Effect of American norms treatment on perceived mask effectiveness (control/American norms conditions only)

	(1)	(2)
American norms treatment	0.055	0.074*
	(0.045)	(0.036)
Partisanship		−0.106***
		(0.032)
Conservatism		−0.064***
		(0.013)
Health trust		0.513***
		(0.046)
Media trust		0.109***
		(0.035)
Constant	3.411***	2.373***
	(0.033)	(0.117)
N	1,488	1,469
R^2	0.001	0.348

OLS regression with robust standard errors in parentheses; ***p<0.005, **p<0.01; *p<0.05. Partisanship is measured as a three-point scale where 1=Democrat and 3=Republican (including leaners).

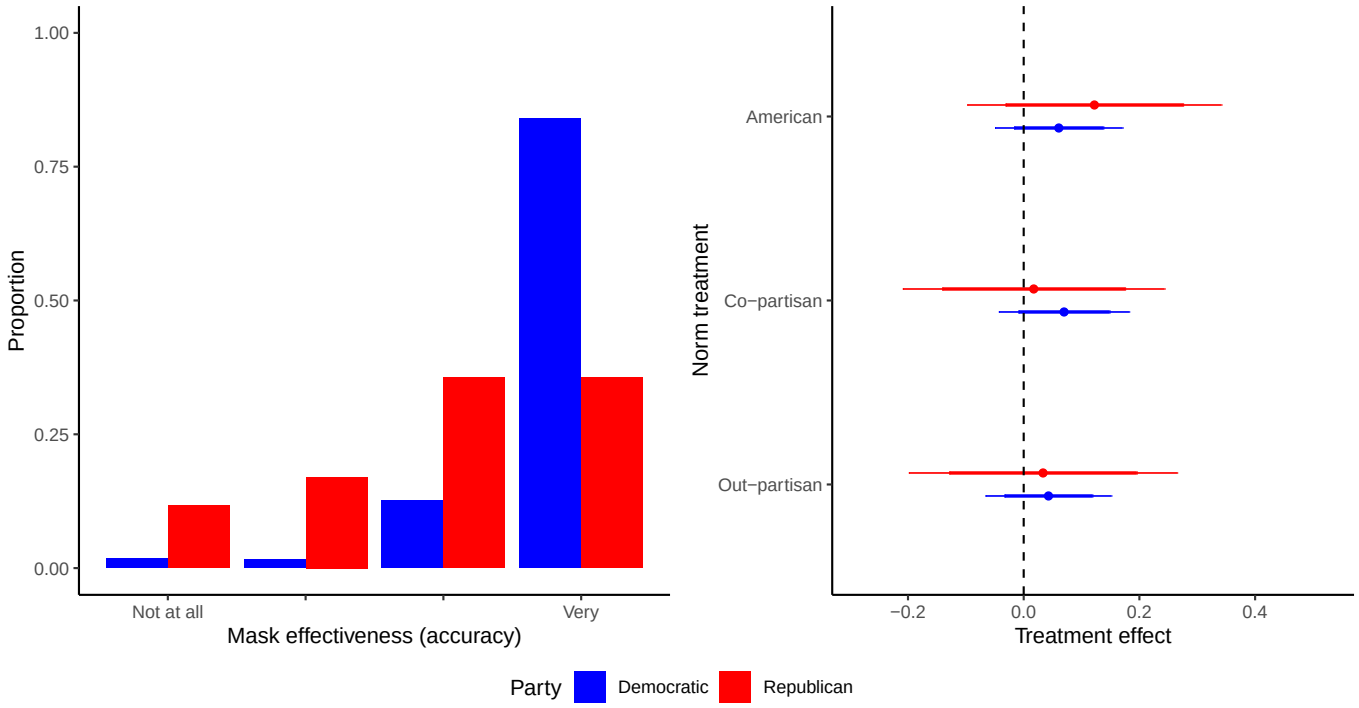
RQ3: Do norm treatment effects differ by party?

Table A7: Treatment effects on mask-wearing intentions and perceived mask effectiveness by party among partisans

	Mask-wearing intentions		Mask effectiveness	
	(1)	(2)	(3)	(4)
American norms treatment	0.055	0.080	0.030	0.061
	(0.045)	(0.045)	(0.041)	(0.039)
Co-partisan treatment	0.007	0.036	0.043	0.070
	(0.045)	(0.046)	(0.040)	(0.040)
Out-partisan treatment	0.043	0.045	0.039	0.043
	(0.043)	(0.043)	(0.039)	(0.039)
Republican	-0.911^{***}	-0.398^{***}	-0.844^{***}	-0.350^{***}
	(0.086)	(0.087)	(0.072)	(0.073)
American treatment × Republican	0.224	0.159	0.130	0.062
	(0.118)	(0.110)	(0.098)	(0.088)
Co-partisan treatment × Republican	−0.072	−0.024	−0.086	−0.052
	(0.123)	(0.114)	(0.100)	(0.090)
Out-partisan treatment × Republican	0.024	0.037	−0.019	−0.009
	(0.123)	(0.113)	(0.103)	(0.091)
Male		-0.161^{***}		
		(0.034)		
Conservatism		-0.048^{***}		-0.044^{***}
		(0.012)		(0.011)
Health trust		0.566^{***}		0.488^{***}
		(0.045)		(0.038)
Media trust				0.066^{*}
				(0.027)
Constant	4.695^{***}	3.460^{***}	3.760^{***}	2.491^{***}
	(0.031)	(0.130)	(0.029)	(0.099)
N	2,519	2,513	2,519	2,512
R^2	0.183	0.288	0.229	0.348

OLS regression with robust standard errors in parentheses; $^{***}p<0.005$, $^{**}p<0.01$; $^{*}p<0.05$.

Figure A1: Perceived mask effectiveness and norm treatment effects by party



Left panel presents perceived mask effectiveness by party. Right panel presents covariate-adjusted average treatment effects of norm treatments (including 95% and 99.5% confidence intervals) on perceived mask effectiveness by party. See Table A7 for corresponding OLS results.

RQ4: Do descriptive norm treatments impact partisan affect?

In the United States, affective polarization (animosity between members of opposing parties) is high (Druckman et al. 2020; Iyengar, Sood and Lelkes 2012; Mason 2015) and mask-wearing is a partisan issue. Does exposure to descriptive norms messages affect the gap between feelings about one's own party versus the other party (Iyengar et al. 2019)? Perceptions of unnecessary compliance or excessive non-compliance with mask mandates among a specific group may be seen as negative among those with different preferences. If such information makes people feel worse about co-partisans (out-partisans), affective polarization should decrease (increase).

Table A8: Treatment effects on affective polarization

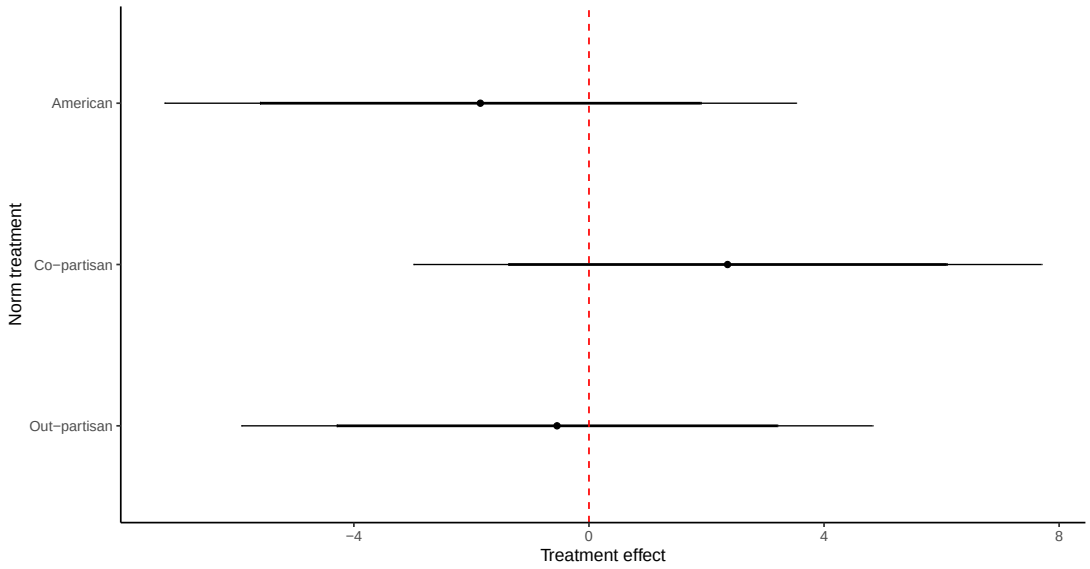
	(1)	(2)	(3)	(4)
American norms treatment	−2.043	−1.102	−1.848	−1.363
	(1.997)	(2.365)	(1.912)	(2.189)
Co-partisan norms treatment	1.588	−0.482	2.358	−0.174
	(1.963)	(2.316)	(1.902)	(2.166)
Out-partisan norms treatment	−0.045	−0.370	−0.543	−1.381
	(1.977)	(2.240)	(1.911)	(2.073)
Republican		−6.599*		−1.200
		(3.042)		(3.909)
American treatment × Republican		−1.932		−1.087
		(4.278)		(4.205)
Co-partisan treatment × Republican		5.803		6.769
		(4.238)		(4.191)
Out-partisan treatment × Republican		1.078		2.321
		(4.358)		(4.332)
Conservatism			−1.715***	−1.840***
			(0.310)	(0.615)
Political interest			8.336***	8.348***
			(0.686)	(0.686)
Constant	56.619***	58.993***	30.652***	31.502***
	(1.378)	(1.567)	(3.274)	(3.517)
N	2,519	2,519	2,518	2,518
R^2	0.001	0.008	0.073	0.075

OLS regression with robust standard errors in parentheses; ***p<0.005, **p<0.01; *p<0.05.

The results, which are depicted in Figure A2, indicate that none of the norms treatments measurably change affective polarization ($p > .05$ in all cases). Among all respondents, we observe the following equivalence bounds when estimating effects on mask-wearing intentions using two one-sided tests — providing information on how many Americans who wear masks: [-5.330, 1.244]; on how many co-partisans wear masks: [-1.643, 4.819]; and on how many out-partisans wear masks: [-3.300, 3.209]. When we subset to Democrats only, the analogous bounds on the effects of providing information on how many Americans wear masks are [-4.996, 2.793]; on how many co-partisans:

[-4.297, 3.332]; and on how many out-partisans: [-4.059, 3.319]. When we subset to Republicans only, the analogous bounds for information on all Americans are [-8.909, 2.840]; on co-partisans: [-0.529, 11.171]; and on out-partisans: [-5.453, 6.849].

Figure A2: Effect of norm treatments on affective polarization



Covariate-adjusted average treatment effects of norm treatments (including 95% and 99.5% confidence intervals) on affective polarization. See Table A8 for corresponding OLS results.

RQ5: Do fact-checking treatments moderate the effect of the norm treatments?

This experiment takes place in the context of a larger multi-wave panel survey with another prior experiment embedded in it. In both Wave 2 and Wave 3 in this survey, respondents were randomly assigned to receive either four articles adapted from U.S. and U.K. fact-checkers debunking four myths about COVID-19 or four placebo articles unrelated to the pandemic (probability .5 each). The fact-checks/placebo articles were presented in randomized order. The Wave 3 random assignment process was unrelated to Wave 2's. Therefore, respondents could receive fact checks in Wave 2 only, Wave 2 only, both Wave 2 and Wave 3, or neither wave.

The fact-check articles addressed two conspiracy theories and two false health claims. The conspiracy theories addressed were claims that Bill Gates patented the novel coronavirus and that the novel coronavirus was developed by China as a bioweapon. One false health claim, that hydroxychloroquine cures COVID-19, has its origins with Donald Trump's continued advocacy for taking the medicine as a preventive measure even though no evidence substantiates this claim. Another false health claim, that antibiotics can cure COVID-19, represents a claim that taps into medical knowledge. The placebo articles were about sauces in cooking, the health benefits of hiking, airlines serving hearing-impaired passengers, and technical advances in mattresses.

We preregistered a research question (RQ5) asking if assignment to fact-checks in Wave 2 or Wave 3 changes the effect of any of the norms treatments on mask-wearing intentions or perceived effectiveness of masks. Table A9 reports the results of preregistered models interacting each norms treatment with each fact-check treatment along with the appropriate constituent terms. Estimated treatment effects by prior fact-check exposure and norm condition are depicted in Figure A3.

A joint null hypothesis test of all constituent and interactive terms containing the fact-check treatments failed to reject the null hypothesis of no treatment effect heterogeneity by fact-check exposure for mask-wearing intentions ($p > .05$). We therefore conclude that fact-check exposure does not moderate the effects of the norms treatments on mask-wearing intentions. (The only exception is the significant interaction between the co-partisan treatment and Wave 2 fact-check exposure.)

However, we reject the null of no treatment effect heterogeneity by fact-check exposure for the efficacy of masks in our fully specified model and thus investigate those estimated effects further. The American descriptive norms treatment did not affect the perceived efficacy of masks among people who were not exposed to fact-checks ($p > .05$). We also observe no evidence of heterogeneous treatment effects by fact-check exposure ($p > .05$ for each interaction term).[1]

However, though the co-partisan norms treatment effect is null among people not exposed to fact-checks ($p > .05$), the interaction term is significant for people exposed to the Wave 2 fact-check

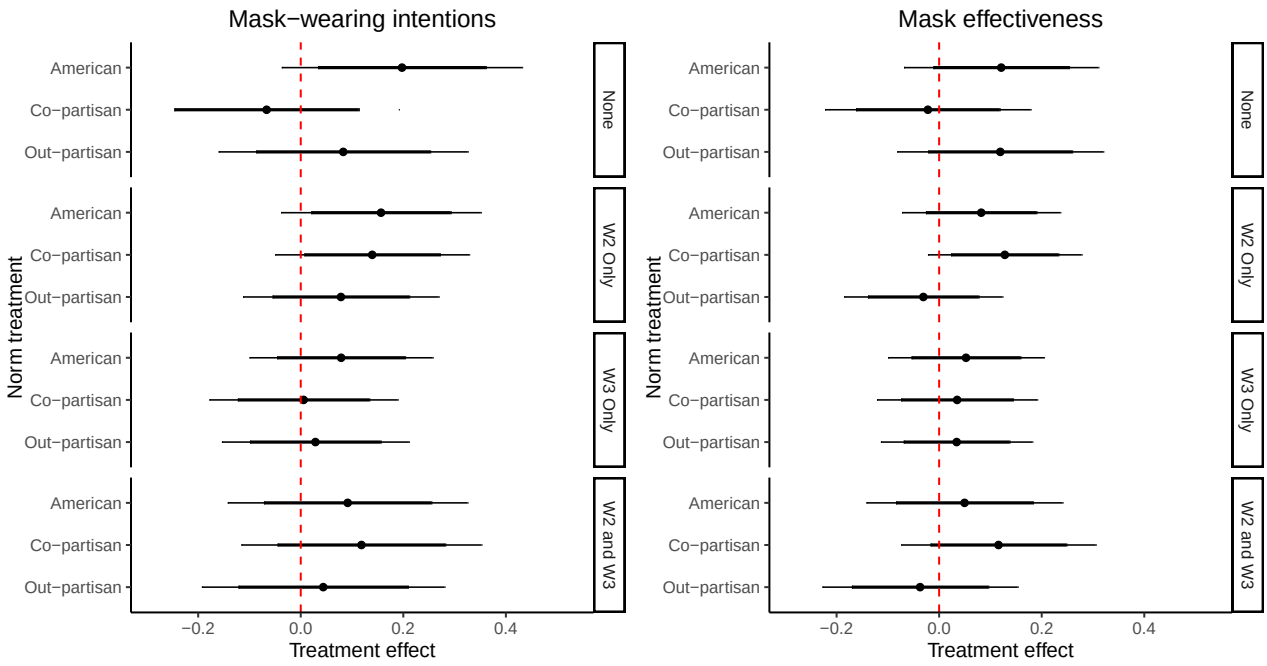
[1]The estimated value of the American treatment $\times$ Wave 2 fact-check exposure in Table A9 was $\hat{\beta} = -0.006$; simulations conducted using DeclareDesign indicate that we have 80% power to detect an effect of $\beta = |0.210|$. The estimated value of the American treatment $\times$ Wave 3 fact-check exposure in Table A9 was $\hat{\beta} = -0.066$; simulations conducted using DeclareDesign indicate that we have 80% power to detect an effect of $\beta = |0.230|$.

Table A9: Norm treatment effects by prior exposure to COVID fact-checks

	Mask-wearing intentions		Mask effectiveness	
	(1)	(2)	(3)	(4)
American norms treatment	0.150	0.197*	0.078	0.121
	(0.097)	(0.083)	(0.082)	(0.067)
Co-partisan norms treatment	−0.132	−0.067	−0.082	−0.022
	(0.109)	(0.092)	(0.088)	(0.071)
Out-partisan norms treatment	0.018	0.083	0.055	0.119
	(0.103)	(0.086)	(0.085)	(0.072)
Wave 2 fact-check	−0.123	−0.026	−0.069	−0.028
	(0.079)	(0.067)	(0.068)	(0.055)
Wave 3 fact-check	0.063	0.084	−0.006	0.021
	(0.080)	(0.068)	(0.069)	(0.055)
American treatment × Wave 2 fact-check	−0.009	0.026	−0.043	−0.006
	(0.109)	(0.094)	(0.094)	(0.077)
Co-partisan treatment × Wave 2 fact-check	0.259*	0.227*	0.186*	0.163*
	(0.116)	(0.098)	(0.091)	(0.078)
Out-partisan treatment × Wave 2 fact-check	0.073	0.031	−0.102	−0.144
	(0.113)	(0.097)	(0.090)	(0.078)
American treatment × Wave 3 fact-check	−0.052	−0.131	−0.001	−0.066
	(0.109)	(0.094)	(0.094)	(0.077)
Co-partisan treatment × Wave 3 fact-check	−0.074	−0.042	−0.044	−0.025
	(0.116)	(0.098)	(0.098)	(0.079)
Out-partisan treatment × Wave 3 fact-check	−0.013	−0.070	0.040	−0.013
	(0.113)	(0.095)	(0.097)	(0.078)
Male		−0.164***		
		(0.034)		
Republican		−0.178***		−0.175***
		(0.028)		(0.025)
Conservatism		−0.048***		−0.044***
		(0.012)		(0.011)
Health trust		0.567***		0.485***
		(0.045)		(0.037)
Media trust				0.069**
				(0.027)
Constant	4.393***	3.435***	3.493***	2.494***
	(0.075)	(0.143)	(0.062)	(0.109)
N	2,519	2,513	2,519	2,512
R^2	0.007	0.290	0.006	0.352
Joint F-test	1.296	1.228	1.711	2.097*

OLS regression with robust standard errors in parentheses; ***p<0.005, **p<0.01; *p<0.05. Joint F-test represents a test of whether all coefficients containing the fact-check treatments are 0.

Figure A3: Effects of norm treatments on mask-wearing intentions and perceived mask effectiveness by COVID fact-check exposure



Covariate-adjusted average treatment effects of norm treatments (including 95% and 99.5% confidence intervals) on mask-wearing intentions and perceived mask effectiveness by COVID fact-checking exposure (none, Wave 2 only, Wave 3 only, or both Wave 2 and Wave 3). See Table A9 for corresponding OLS results.

($p < .05$) (but not those exposed to the Wave 3 fact-check [$p > .05$]).[2] We therefore estimate the following equivalence bounds using two one-sided tests: [-0.250, 0.097] with no exposure to fact-checks; [-0.029, 0.191] with exposure to Wave 2 fact-checks; and [-0.145, 0.081] with exposure to Wave 3 fact-checks.

Finally, the out-partisan norms treatment had no measurable effect on the perceived effectiveness of masks ($p > .05$; equivalence bounds using two one-sided tests: [-0.106, 0.222]). We also ob-

[2]The estimated value of the co-partisan treatment $\times$ Wave 3 fact-check exposure in Table A9 was $\hat{\beta} = -0.025$; simulations conducted using DeclareDesign indicate that we have 80% power to detect an effect of $\beta = |0.230|$.

serve no evidence of treatment effect heterogeneity by fact-check exposure ($p > .05$ in both cases).[3]

[3]The estimated value of the out-partisan treatment $\times$ Wave 2 fact-check exposure in Table A9 was $\hat{\beta} = -0.144$; simulations conducted using DeclareDesign indicate that we have 80% power to detect an effect of $\beta = |0.230|$. The estimated value of the out-partisan treatment $\times$ Wave 3 fact-check exposure in Table A9 was $\hat{\beta} = -0.013$; simulations conducted using DeclareDesign indicate that we have 80% power to detect an effect of $\beta = |0.240|$.

Ordered logits

Table A10: Treatment effects on mask-wearing intentions among partisans

	(1)	(2)
American norms treatment	0.301***	0.413**
	(0.116)	(0.125)
Co-partisan norms treatment	−0.049	0.080
	(0.112)	(0.121)
Out-partisan norms treatment	0.146	0.214
	(0.113)	(0.123)
Male		−0.496***
		(0.089)
Republican		−0.441***
		(0.067)
Conservatism		−0.115***
		(0.033)
Health trust		1.156***
		(0.085)
N	2,519	2,513

Ordered logistic regression with standard errors in parentheses and cutpoints omitted; ***p<0.005, **p<0.01; *p<0.05.

Table A11: Effect of American norms treatment on mask-wearing intentions (control/American norms conditions only)

	(1)	(2)
American norms treatment	0.288^{**}	0.357^{***}
	(0.105)	(0.114)
Male		-0.488^{***}
		(0.114)
Partisanship		-0.452^{***}
		(0.089)
Conservatism		-0.098^{*}
		(0.043)
Health trust		1.152^{***}
		(0.102)
N	1,488	1,470

Ordered logistic regression with standard errors in parentheses and cutpoints omitted; $^{***}p<0.005$, $^{**}p<0.01$; $^{*}p<0.05$. Partisanship is measured as a three-point scale where 1=Democrat and 3=Republican (including leaners).

Table A12: Predicted probability of mask-wearing (main effects)

	Not at all	Not very often	Some of the time	Most of the time	All of the time
Partisans					
Control	1.31%	2.57%	5.85%	22.68%	67.58%
American treatment	0.87%	1.73%	4.06%	17.43%	75.90%
Co-partisan treatment	1.21%	2.38%	5.45%	21.64%	69.31%
Out-partisan treatment	1.06%	2.10%	4.85%	19.90%	72.09%
Full sample					
Control	1.25%	2.84%	5.87%	22.58%	67.46%
American treatment	0.92%	2.10%	4.44%	18.55%	73.99%

Predicted probabilities estimated from the results reported in Table A10.

Table A13: Treatment effects on mask-wearing intentions by prior norm estimates among partisans

	(1)	(2)
American norms treatment	0.286	0.172*
	(0.172)	(0.184)
Co-partisan norms treatment	−0.065	0.126
	(0.174)	(0.189)
Out-partisan norms treatment	0.234	0.250
	(0.198)	(0.209)
Underestimates American norm	−0.559***	−0.228
	(0.113)	(0.123)
Underestimated co-partisan norm	−0.757***	−0.739***
	(0.126)	(0.136)
Underestimates out-partisan norm	0.677***	0.494***
	(0.207)	(0.224)
Overestimates American norm	0.694***	0.521*
	(0.068)	(0.069)
Overestimates co-partisan norm	−0.962***	0.822***
	(0.126)	(0.161)
Overestimates out-partisan norm	0.354*	0.075
	(0.149)	(0.163)
American treatment × underestimates Americans	0.236	0.151
	(0.217)	(0.232)
Co-partisan treatment × underestimates co-partisans	−0.003	0.042
	(0.243)	(0.260)
Out-partisan treatment × underestimates out-partisans	−0.131	−0.120
	(0.232)	(0.247)
American treatment × overestimates Americans	−0.276	−0.089
	(0.440)	(0.462)
Co-partisan treatment × overestimates co-partisans	0.053	−0.083
	(0.242)	(0.262)
Out-partisan treatment × overestimates out-partisans	−0.074	−0.023
	(0.309)	(0.330)
Male		−0.497***
		(0.094)
Republican		−0.842***
		(0.085)
Conservatism		−0.114***
		(0.037)
Health trust		1.033***
		(0.093)
N	2,358	2,353

Ordered logistic regression with standard errors in parentheses and cutpoints omitted; ***p<0.005, **p<0.01; *p<0.05. Partisanship is measured as a three-point scale where 1=Democrat and 3=Republican (including leaners).

Table A14: Effect of American norms treatment by prior norm estimates (control/American norms conditions only)

	(1)	(2)
American norms treatment	0.179	0.223
	(0.168)	(0.184)
Underestimates American norm	-0.506^{***}	-0.679^{***}
	(0.154)	(0.166)
Overestimates American norm	0.414	0.443
	(0.318)	(0.351)
American treatment $\times$ underestimates Americans	0.214	0.259
	(0.226)	(0.243)
American treatment $\times$ overestimates Americans	0.140	0.220
	(0.468)	(0.507)
Male		-0.533^{***}
		(0.118)
Partisanship		-0.460^{***}
		(0.093)
Conservatism		-0.126^{***}
		(0.044)
Health trust		1.090^{***}
		(0.108)
N	1,416	1,408

Ordered logistic regression with standard errors in parentheses and cutpoints omitted; $^{***}p<0.005$, $^{**}p<0.01$; $^{*}p<0.05$. Partisanship is measured as a three-point scale where 1=Democrat and 3=Republican (including leaners).

Table A15: Predicted probabilities of mask-wearing by prior norm estimation)

	Not at all	Not very often	Some of the time	Most of the time	All of the time
Partisans					
Control: Accurate	1.01%	2.49%	6.42%	26.62%	63.26%
Control: Underestimated American norm	1.27%	3.34%	7.79%	29.78%	57.82%
Control: Overestimated American norm	0.61%	1.63%	4.04%	19.37%	74.36%
Control: Underestimated co-partisan norm	2.10%	5.36%	11.63%	35.79%	45.12%
Control: Overestimated co-partisan norm	0.45%	1.22%	3.06%	15.62%	79.66%
Control: Underestimated out-partisan norm	0.62%	1.67%	4.14%	19.73%	73.84%
Control: Overestimated out-partisan norm	0.94%	2.51%	6.02%	25.54%	64.99%
American treatment: Accurate	0.69%	1.86%	4.58%	21.24%	71.62%
American treatment: Underestimated	0.75%	2.01%	4.91%	22.29%	70.05%
American treatment: Overestimated	0.45%	1.22%	3.08%	15.70%	79.55%
Co-partisan treatment: Accurate	0.90%	2.39%	5.75%	24.82%	66.14%
Co-partisan treatment: Underestimated	0.86%	2.29%	5.55%	24.24%	67.05%
Co-partisan treatment: Overestimated	0.90%	2.39%	5.75%	24.82%	66.14%
Out-partisan treatment, Accurate	0.79%	2.12%	5.16%	23.07%	68.86%
Out-partisan treatment: Underestimated	0.55%	1.47%	3.67%	18.03%	76.27%
Out-partisan treatment: Overestimated	0.75%	2.01%	4.92%	22.34%	69.97%
Full sample					
Control: Accurate on American norm	0.83%	2.27%	4.55%	20.53%	71.82%
Control: Underestimated American norm	1.64%	4.30%	8.10%	29.57%	56.39%
Control: Overestimated American norm	0.54%	1.47%	3.04%	15.07%	79.87%
American treatment: Accurate	0.67%	1.83%	3.72%	17.67%	76.12%
American treatment: Underestimated	1.02%	2.73%	5.41%	23.15%	67.69%
American treatment: Overestimated	0.35%	0.96%	2.00%	10.62%	86.08%

Predicted probabilities estimated from the results reported in Tables A13 and A14.

Table A16: Treatment effects on perceived mask effectiveness among partisans

	(1)	(2)
American norms treatment	0.099	0.226
	(0.116)	(0.131)
Co-partisan norms treatment	−0.028	0.146
	(0.115)	(0.131)
Out-partisan norms treatment	0.069	0.124
	(0.115)	(0.131)
Republican		−0.495***
		(0.071)
Conservatism		−0.185***
		(0.036)
Health trust		1.332***
		(0.099)
Media trust		0.276*
		(0.078)
N	2,519	2,512

Ordered logistic regression with standard errors in parentheses and cutpoints omitted; ***p<0.005, **p<0.01; *p<0.05.

Table A17: Effect of American norms treatment on perceived mask effectiveness (control/American norms conditions only)

	(1)	(2)
American norms treatment	0.074	0.169
	(0.105)	(0.120)
Partisanship		−0.341***
		(0.093)
Conservatism		−0.245***
		(0.045)
Health trust		1.363***
		(0.122)
Media trust		0.372***
		(0.100)
N	1,488	1,469

Ordered logistic regression with standard errors in parentheses and cutpoints omitted; ***p<0.005, **p<0.01; *p<0.05. Partisanship is measured as a three-point scale where 1=Democrat and 3=Republican (including leaners).

Table A18: Predicted probabilities of perceived mask effectiveness (main effects)

	Not at all accurate	Not very accurate	Somewhat accurate	Very accurate
Partisans				
Control	2.25%	4.73%	24.85%	68.17%
American treatment	1.81%	3.84%	21.49%	72.86%
Co-partisan treatment	1.95%	4.14%	22.65%	71.26%
Out-partisan treatment	2.00%	4.22%	22.98%	70.80%
Full sample				
Control	2.53%	5.00%	28.67%	63.79%
American treatment	2.15%	4.29%	25.96%	67.60%

Predicted probabilities estimated from the results reported in Tables A16 and A17.

Table A19: Treatment effects on mask-wearing intentions and perceived mask effectiveness by party among partisans

	Mask-wearing intentions		Mask effectiveness	
	(1)	(2)	(3)	(4)
American norms treatment	0.301	0.361*	0.097	0.232
	(0.175)	(0.181)	(0.190)	(0.202)
Co-partisan treatment	0.058	0.113	0.202	0.333
	(0.167)	(0.174)	(0.193)	(0.206)
Out-partisan treatment	0.184	0.182	0.128	0.142
	(0.168)	(0.175)	(0.188)	(0.199)
Republican	−1.833***	−0.903***	−2.228***	−0.897***
	(0.166)	(0.197)	(0.177)	(0.212)
American treatment × Republican	0.191	0.096	0.181	−0.014
	(0.244)	(0.251)	(0.253)	(0.265)
Co-partisan treatment × Republican	−0.152	−0.061	−0.305	−0.313
	(0.237)	(0.243)	(0.255)	(0.267)
Out-partisan treatment × Republican	−0.017	0.064	−0.060	−0.033
	(0.239)	(0.245)	(0.253)	(0.264)
Male		−0.494***		
		(0.089)		
Conservatism		−0.116***		−0.187***
		(0.033)		(0.036)
Health trust		1.153***		1.328***
		(0.085)		(0.099)
Media trust				0.277*
				(0.078)
N	2,519	2,513	2,519	2,512

Ordered logistic regression with standard errors in parentheses and cutpoints omitted; ***p<0.005, **p<0.01; *p<0.05.

Table A20: Predicted probabilities of mask-wearing intention by party

	Not at all	Not very often	Some of the time	Most of the time	All of the time
Control: Democrats	0.94%	1.86%	4.33%	18.33%	74.55%
Control: Republicans	2.28%	4.34%	9.29%	29.81%	54.29%
American treatment: Democrats	0.65%	1.31%	3.11%	14.15%	80.78%
American treatment: Republicans	1.45%	2.84%	6.40%	24.08%	65.03%
Co-partisan treatment: Democrats	0.84%	1.67%	3.91%	16.96%	76.63%
Co-partisan treatment: Republicans	2.17%	4.14%	8.92%	29.21%	55.56%
Out-partisan treatment: Democrats	0.78%	1.56%	3.67%	16.15%	77.84%
Out-partisan treatment: Republicans	1.79%	3.46%	7.64%	26.83%	60.28%

Predicted probabilities estimated from the results reported in Table A19.

Table A21: Predicted probabilities of perceived mask effectiveness by party

	Not at all accurate	Not very accurate	Somewhat accurate	Very accurate
Control: Democrats	1.64%	3.52%	20.17%	74.67%
Control: Republicans	3.94%	7.84%	33.65%	54.58%
American treatment: Democrats	1.31%	2.83%	17.06%	78.80%
American treatment: Republicans	3.19%	6.50%	30.41%	50.90%
Co-partisan treatment: Democrats	1.18%	2.57%	15.81%	80.44%
Co-partisan treatment: Republicans	3.86%	7.71%	33.36%	55.07%
Out-partisan treatment: Democrats	1.43%	3.08%	18.23%	77.26%
Out-partisan treatment: Republicans	3.55%	7.14%	32.05%	57.26%

Predicted probabilities estimated from the results reported in Table A19.

Table A22: Norm treatment effects by prior exposure to COVID fact-checks

	Mask-wearing intentions		Mask effectiveness	
	(1)	(2)	(3)	(4)
American norms treatment	0.415*	0.588*	0.132	0.253
	(0.210)	(0.228)	(0.210)	(0.239)
Co-partisan norms treatment	−0.204	−0.099	−0.179	−0.140
	(0.202)	(0.219)	(0.208)	(0.236)
Out-partisan norms treatment	0.090	0.298	0.208	0.468
	(0.202)	(0.221)	(0.210)	(0.242)
Wave 2 fact-check	−0.283	−0.234	−0.233	−0.192
	(0.156)	(0.170)	(0.161)	(0.183)
Wave 3 fact-check	0.136	0.242	0.021	0.058
	(0.157)	(0.170)	(0.161)	(0.184)
American treatment × Wave 2 fact-check	−0.021	0.065	−0.047	0.063
	(0.233)	(0.251)	(0.233)	(0.264)
Co-partisan treatment × Wave 2 fact-check	0.518*	0.555*	0.458*	0.634*
	(0.224)	(0.243)	(0.231)	(0.262)
Out-partisan treatment × Wave 2 fact-check	0.156	0.045	−0.235	−0.510
	(0.227)	(0.246)	(0.232)	(0.264)
American treatment × Wave 3 fact-check	−0.194	−0.393	−0.014	−0.109
	(0.233)	(0.252)	(0.233)	(0.265)
Co-partisan treatment × Wave 3 fact-check	−0.209	−0.197	−0.166	−0.074
	(0.224)	(0.243)	(0.231)	(0.262)
Out-partisan treatment × Wave 3 fact-check	−0.028	−0.190	−0.016	−0.128
	(0.227)	(0.246)	(0.232)	(0.264)
Male		−0.496***		
		(0.089)		
Republican		−0.445***		−0.499***
		(0.068)		(0.072)
Conservatism		−0.118***		−0.189***
		(0.033)		(0.036)
Health trust		1.146***		1.329***
		(0.085)		(0.099)
Media trust				0.284**
				(0.078)
N	2,519	2,513	2,519	2,512

Ordered logistic regression with robust standard errors in parentheses and cutpoints omitted; ***p<0.005, **p<0.01; *p<0.05.

Table A23: Predicted probabilities of mask-wearing by fact-check condition

	Not at all	Not very often	Some of the time	Most of the time	All of the time
Control: No fact-check	1.31%	2.58%	5.90%	22.90%	67.30%
Control: W2 fact-check	1.65%	3.22%	7.20%	25.97%	61.96%
Control: W3 fact-check	1.03%	2.05%	4.77%	19.75%	72.39%
American treatment: No fact-check	0.73%	1.47%	3.49%	15.56%	78.74%
American treatment: W2 fact-check	0.86%	1.73%	4.07%	17.55%	75.77%
American treatment: W3 fact-check	0.85%	1.70%	4.01%	17.34%	76.10%
Co-partisan treatment: No fact-check	1.45%	2.84%	6.42%	24.20%	65.10%
Co-partisan treatment: W2 fact-check	1.05%	2.09%	4.86%	20.00%	72.00%
Co-partisan treatment: W3 fact-check	1.38%	2.72%	6.18%	23.60%	66.11%
Out-partisan treatment: No fact-check	0.98%	1.94%	4.54%	19.04%	73.50%
Out-partisan treatment: W2 fact-check	1.18%	2.33%	5.37%	21.47%	69.65%
Out-partisan treatment: W3 fact-check	0.93%	1.85%	4.33%	18.39%	74.50%

Predicted probabilities estimated from the results reported in Table A22.

Table A24: Predicted probabilities of perceived mask effectiveness by fact-check condition

	Not at all accurate	Not very accurate	Somewhat accurate	Very accurate
Control: No fact-check	2.07%	4.41%	23.95%	69.57%
Control: W2 fact-check	2.50%	5.25%	26.90%	65.36%
Control: W3 fact-check	1.95%	4.18%	23.08%	70.79%
American treatment: No fact-check	1.61%	3.49%	20.25%	74.65%
American treatment: W2 fact-check	1.83%	3.93%	22.10%	72.14%
American treatment: W3 fact-check	1.70%	3.66%	20.97%	73.67%
Co-partisan treatment: No fact-check	2.37%	5.00%	26.08%	65.55%
Co-partisan treatment: W2 fact-check	1.54%	3.33%	19.55%	75.58%
Co-partisan treatment: W3 fact-check	2.41%	5.08%	26.33%	66.18%
Out-partisan treatment: No fact-check	1.30%	2.85%	17.34%	78.51%
Out-partisan treatment: W2 fact-check	2.60%	5.44%	27.54%	64.42%
Out-partisan treatment: W3 fact-check	1.40%	3.04%	18.25%	77.30%

Predicted probabilities estimated from the results reported in Table A22.

Balance tables and missingness

Table A25: Balance tests for experimental randomization

	Control	American	Democrat	Republican	p-value
University	43.7%	41.7%	40.7%	43.3%	.609
Age 18–34	109.0%	12.5%	14.2%	13.2%	.082
Age 35–44	14.6%	10.6%	13.8%	14.1%	.089
Age 45–54	12.9%	15.4%	16.8%	16.3%	.160
Age 55–64	28.9%	27.7%	24.9%	22.8%	**.032**
Age 65+	33.6%	33.9%	30.2%	33.6%	.387
Male	46.1%	44.0%	46.1%	47.9%	.534
Married	49.4%	52.3%	50.7%	50.7%	.748
Frequent church attendance	26.2%	27.8%	30.4%	26.9%	.308
Northeast	28.8%	30.6%	31.0%	32.4%	.496
South	28.9%	30.2%	31.6%	28.1%	.471
Midwest	23.4%	17.8%	19.9%	20.7%	.068
West	19.0%	21.4%	17.5%	18.8%	.288
Democratic	55.9%	52.1%	52.0%	53.9%	.386
Independent	12.6%	14.7%	15.9%	14.2%	.359
Republican	31.4%	33.1%	32.1%	31.8%	.910
Conservatism	3.8	4.0	4.0	3.8	.064
High-incidence area	25.2%	25.7%	27.2%	27.6%	.667
Cognitive Reflection Test	1.0	1.0	0.9	0.9	.630
Political knowledge	4.0	3.9	3.8	4.0	**.042**
Non-white	23.2%	26.5%	30.1%	25.6%	**.023**
Political interest	3.8	3.8	3.8	3.8	.539
Health trust	2.3	2.3	2.2	2.2	.401
Media trust	1.9	1.9	1.9	1.9	.939

Unweighted. p-values are calculated using χ^2 statistics for binary variables and F-tests for non-binary variables. Significant differences in bold ($p < .05$).

Table A26: Missingness in non-outcome variables

Variable	Control	American	Co-partisan	Out-partisan
Gender	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Party ID	8 (0.8%)	8 (1.1%)	0 (0%)	0 (0%)
Ideology	2 (0.2%)	0 (0%)	0 (0%)	0 (0%)
Health trust	3 (0.3%)	0 (0%)	3 (0.5%)	1 (0.16%)
Media trust	2 (0.2%)	0 (0%)	1 (0.16%)	0 (0%)
Estimated American norm	60 (6.1%)	38 (5.2%)	29 (4.7%)	28 (4.4%)
Estimated co-partisan norm	349 (35.6%)	148 (20.3%)	32 (5.2%)	30 (4.7%)
Estimated out-partisan norm	353 (36.0%)	147 (20.2%)	38 (6.2%)	36 (5.7%)

Missingness is higher in estimates of co-partisan and out-partisan norms in the control and American norms treatment conditions because those measures are not defined for independents.

In the partisans-only models, 6 observations were removed via listwise deletion from the mask-wearing analyses and 7 were removed from the mask effectiveness analyses due to missingness on one or more covariates. In the analyses containing norm estimates, an additional 161 observations experienced listwise deletion due to missingness on one or more norm estimates.

In the "full" models containing only respondents in the control and American norms conditions only, 19 observations were removed by listwise deletion in the mask-wearing analyses and 20 in the mask effectiveness analyses because of missingness on one or more covariates. In the analyses containing norm estimates, an additional 98 observations were removed by listwise deletion due to missingness on national norms estimates.

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