Mutual Gain or Resource Drain? Attitudes toward International Financial Assistance During the Early COVID-19 Pandemic*

Abstract

Despite the need for international cooperation on COVID-19, the United States displayed reluctance to contribute to a global response. To shed light on the domestic politics that may underlie this foreign policy, we investigate how the U.S. public viewed financial assistance to international organizations (IO)s and developing countries during the early stages of the pandemic. On one hand, the pandemic may illustrate the importance of cooperation; on the other hand, voters may be reluctant to engage internationally during a national crisis. In a survey fielded to 2,500 Americans in early April 2020, we find that personal exposure to the effects of COVID-19 is associated with increased support for IOs but decreased support for foreign aid. We suggest that Americans, especially those most affected by COVID-19, perceive benefits to supporting IOs but not to assisting developing countries. Partisanship moderates this relationship: although Republicans are less likely to support both forms of economic engagement, the positive relationship between exposure and support for IOs is actually stronger for Republicans. These findings are consistent with the notion that Americans, and especially Republicans, support international engagement when they feel it benefits them.

Keywords: international financial assistance, COVID-19 pandemic, international organizations, foreign aid, partisanship

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International cooperation has been vital to addressing the global coronavirus (COVID-19) pandemic, but the United States's commitment to global engagement was often uncertain. On July 7, 2020, the Trump Administration formally notified the United Nations that the United States would withdraw from the World Health Organization (WHO). As the largest contributor to the WHO budget, this move would have slashed the international organization's resources by 10 percent. Despite the global spread of the coronavirus in 2020, the U.S. provided little assistance to the developing world, a role it has historically played, instead outbidding developing countries for scarce protective equipment and tests (Bradley 2020). All told, the U.S.'s global exit creates a power vacuum that China has been keen to fill by providing medical supplies to others and increasing its WHO contributions (Cheng 2020). The U.S.'s reluctance has also undoubtedly hampered the international community's ability to respond to COVID-19, especially in developing countries.

A possible explanation for the U.S.'s behavior centers on domestic politics: resisting global engagement may have been politically popular during an election year. At the same time, COVID-19 may have itself shaped attitudes toward global engagement. On one hand, the pandemic may have illustrated the importance of cooperation and increased support for global engagement; on the other hand, voters perhaps blamed global ties for the pandemic and deepened their hostility to international cooperation, especially during a national crisis.

Opposition to globalization has had important consequences for politics in recent years. Much of the electorate has mobilized against regional integration projects, turning out in large numbers to protest the Transatlantic Trade and Investment Partnership (TTIP) and vote in favor of the Brexit referendum and the election of President Trump. These campaigns often entailed explicitly anti-IO and anti-trade rhetoric. A key grievance voiced by supporters of these anti-globalization campaigns is that policymakers do not represent the people but only look after the elite. Indeed, when it comes to foreign policy preferences, Page and Barabas (2000, 344) observe that "[t]he most conspicuous gap between citizens and leaders is a familiar and long-standing one: more leaders than citizens tend to be 'internationalists,' at least in the simple sense that they say they favor the United States taking an 'active part' in world affairs." Recent studies similarly find that internationalist foreign

policy orientations are associated with "elite" characteristics such as high socio-economic status and political knowledge (Kertzer 2013). Given the spread and strength of populism in many established democracies, it is essential to understand how these foreign policy attitudes are formed.

We investigate these dynamics by fielding a survey to a nationally representative sample of 2,500 Americans (March 27-April 8, 2020) to measure their support for two forms of global economic engagement in the wake of COVID-19: financing international organizations (IOs) and helping developing countries. We find that individuals who have been personally exposed to the effects of COVID-19 are more likely to support IOs but less likely to support foreign aid. Partisanship also plays an important role, with Republicans less likely than Democrats to support either form of assistance. But Republicans' opinions about funding IOs are more sensitive to COVID-19 exposure than Democrats'. In fact, exposure counteracts the partisan bias, leading to similar support for financing the WHO among exposed Republicans and Democrats. Taken together, our findings are consistent with the notion that voters will support international engagement when they believe it benefits them, and Republicans rely on this logic more so than Democrats. An implication of our results for the broader literature on public opinion on global economic policies is that Republicans may be more likely than Democrats to behave in ways that serve their material interests.

Public Opinion on International Financial Assistance

Powerful states provide many types of financial assistance. These activities have been described as "cooperative" or "liberal internationalism" (Ikenberry 2009), a foreign policy orientation characterized by support for international organizations, foreign aid, and open markets. While states can advance liberal internationalism with myriad policies (such as by complying with IO decisions they disagree with), we focus on financial assistance they provide to international institutions and developing countries.

Why would powerful states provide economic support? States enjoy the benefits of coordi-

nation and information when they mutually participate in IOs (Keohane 1984), and those IOs are only able to perform these functions when member governments supply their budgets. In particular, the WHO is mostly financed by voluntary contributions from members, so a state's financial assistance is a vital component of its support for such an organization. To enjoy the benefits of a functioning WHO, states must contribute financially, and greater sponsorship is rewarded with more voice (Kaya 2015).

States also benefit by providing bilateral financial assistance to poorer countries. Donors channel aid for numerous reasons — geopolitical (Alesina and Dollar 2000), in exchange for policy concessions (De Mesquita and Smith 2007), or to stimulate the donor economy (Milner and Tingley 2011). Donors also provide aid to mitigate negative spillovers, such as migration and trafficking, from developing countries (Bermeo 2018), and a pandemic is no exception. Sandler and Arce (2007, 530) write: "International actions to bolster the healthcare infrastructure of a poor country provide localised public goods to the recipient country and globalised benefits by making the population a less likely host to infectious viruses that can spread worldwide." Of course, financial assistance imposes obvious, calculable costs. Unsurprisingly, foreign aid dries up by about 30% when donor countries experience economic crises (Dang, Knack and Rogers 2013; Frot 2009).

But powerful states must also consider their domestic constituencies (Putnam 1988). Some explain foreign assistance by pointing to an altruistically concerned donor public (Lumsdaine 1993) with personal moral beliefs (Kertzer et al. 2014; Prather 2020). More commonly, domestic explanations for foreign economic policies center on preferences that can be explained through open economy politics — who "wins" or "loses" from liberal internationalism. Election-seeking politicians reflect their constituents' preferences in roll call votes on international economic issues (Broz 2008; Milner and Tingley 2011), lending support to the "two-level game" approach. States are unlikely to pursue cooperative internationalism if there is widespread opposition at home.

Variation in public support for IOs varies based on whether voters gain from the benefits they provide. According to Bearce and Scott (2019, 189), "citizen attitudes about IOs map largely onto their attitudes about economic globalization," and, consistent with factor endowment models,

skilled workers in advanced economies are more likely to support IOs. Dellmuth and Tallberg (2015) find that individuals care more about the benefits those IOs provide than the fairness of their processes. In other words, individuals may think like states, primarily considering the gains to international cooperation.[1]

The public similarly considers the anticipated gains from foreign aid. Foreign aid, like trade, benefits skilled workers in advanced economies (Milner and Tingley 2011), who are indeed more likely to support foreign aid (Paxton and Knack 2012). Individuals are also sensitive to the costs of foreign aid. Heinrich, Kobayashi and Bryant (2016) find that Europeans who were hardest hit by the financial crisis were less likely to support aid. While the public may consider costs and benefits, some benefits (such as avoiding negative spillovers) may be less obvious to them (Heinrich and Kobayashi 2020).

In the context of COVID-19, we expect individuals who experience its effects most acutely to consider what is gained by financing a global response to the virus. The American public and the rest of the world could vividly observe how the virus spread in a short amount of time; exposure may have caused them to realize that no one is safe until everyone is safe. During the first month of the pandemic, exposure was much less widespread than it was later in 2020, and the majority of our survey participants reported no exposure to the virus. We think it reasonable to expect that during this time period, although probably not much beyond it, Americans' support for global efforts was highly related to the still-rare exposure some had experienced.

We also hypothesize that individuals who are personally affected by COVID-19 may be more likely to see the benefits of funding the WHO than helping developing countries respond to the virus. The specific efforts of the WHO are highly visible: it provides scientific guidance to the public and is tightly connected to vaccine development. According to a 2021 Pew public opinion poll, 65 percent of Americans believe the U.S. benefits "a great deal" or "a fair amount" by its membership in the WHO (Pew 2021). In contrast, the impacts of developing countries on the U.S.

[1]Elites can shape public opinion on these issues through messaging (Dellmuth and Tallberg 2020). But our survey was fielded before President Trump vocally indicted the WHO or withheld funds. Also, Kushner Gadarian, Goodman and Pepinsky (2020) find no effect of partisan cues on COVID-19 policy attitudes.

are highly diffuse: Americans cannot tell when product shortages result from disruptions in supply chains abroad or when viral transmission occurs through international travel. In a 2017 Chicago Council poll, only 41 percent of Americans thought foreign aid helped U.S. national security, and even fewer (29 percent) thought it helped the U.S. economy (Chicago 2017). While we deliberately study these dynamics in the context of COVID-19, we believe it is a generalizable trend that the benefits of IOs are more specific than the diffuse benefits of development assistance.

Finally, building on the literature on partisanship and its impact on public opinion, we expect partisanship to moderate these relationships (McCarty, Poole and Rosenthal 2016; Druckman, Peterson and Slothuus 2013; Abramowitz 2010; Layman, Carsey and Horowitz 2006; Bartels 2002; Green, Palmquist and Schickler 2004; Converse 1969, e.g.). In their analysis of partisan sentiment from the 1980s to 2016, Iyengar and Krupenkin (2018, 24) demonstrate that the partisan divide has intensified over the past three decades, to the point of influencing Americans' everyday behaviors', "from dating, to employment decisions, to vaccinating a child." Such partisan differences have also been found to color individuals' foreign policy preferences. Liberals are more likely than conservatives to support IOs (Bearce and Scott 2019; Milner and Tingley 2013*a*) and foreign aid (Milner and Tingley 2011; Paxton and Knack 2012). In particular, we build on Milner and Tingley (2013*b*), who show that Republicans prioritize the benefits gained from foreign aid, whereas Democrats prefer aid that aligns with their moral values. We expect this similarly applies to the COVID-19 context: While Republicans should be overall less likely than Democrats to support financing both IOs and developing countries, variation in the perceived benefits of global engagement may matter more for Republicans than for Democrats. Early evidence suggests that partisanship predicts many COVID-19 health behaviors and policy attitudes (Clinton et al. 2021; Gadarian, Goodman and Pepinsky 2020; Gollwitzer et al. 2020; Grossman et al. 2020), and we expect it also conditions attitudes toward international financial assistance.

Our study is related to Kobayashi, Heinrich and Bryant (2021), who investigate support for foreign aid using a survey experiment fielded one month after ours. The authors find that experimentally induced worry about COVID-19's effects on the U.S. (but not themselves) lowers support

for aid, while information about what the U.S. gains by helping developing countries increases it. In addition to our broader focus on financial assistance to institutions as well as countries, and our consideration of partisanship, our study differs crucially in its research design. This especially matters for works investigating how self-interest explains support for globalization, where survey experiments and observational studies often arrive at different conclusions (Naoi 2020).

Data and Methodology

To examine public support for international assistance, we fielded a survey to 2,500 American adults recruited through the Qualtrics market research sample, nationally representative on the basis of age, gender, ethnicity and geographic region.

We investigate support for assistance to international organizations and developing countries. First, we asked respondents how much they would like to see the U.S. contribute financially to IOs like the WHO taking global action on COVID-19 (*IO Contributions*), using a 1-5 scale. Overall, we find considerable support (see Figure 1). More than two thirds of the respondents (63%) believe that the U.S. should contribute, while only 14% are opposed.

Figure 1 here

Second, respondents indicated their support for aiding developing countries in the fight against COVID-19 on a 1-10 scale, where 1 means that the U.S. should prioritize efforts at home and 10 implies prioritizing developing countries (*Foreign Aid*). Figure 2 shows that the majority of the public favors responding at home, with a median response of 4. A full 20% would prefer the U.S. to concentrate entirely on domestic efforts.

Figure 2 here

Our key independent variables are personal exposure to COVID-19 and partisanship. We measure self-reported personal exposure to the pandemic through whether the respondent or their loved

ones have contracted COVID-19 (*Contracted COVID-19*) and whether they or a household income-earner have lost their job due to COVID-19 (*Lost Job*). An alternative approach would be to ask respondents for their level of worry about COVID-19; we avoided this out of concern that the type of respondent who was more concerned about COVID-19 in April was a type of respondent who would also be more likely to hold cosmopolitan views about world politics. Instead, we tried to measure exposure as objectively as we could, and we acknowledge that many individuals are exposed to the effects of the pandemic without meeting these specific criteria. As shown in Table 1, 8% of the respondents in our sample indicated coming into contact with the virus, while 23% experienced pandemic-related job loss due. Unsurprisingly and unfortunately, many experienced both.

We complement these measures with county-level data on the number of confirmed coronavirus cases per capita.[2] It is possible that *County Cases* serves as another proxy for personal exposure: respondents in counties with more cases may see more visible effects of the crisis, experience more stringent restrictions or closures, have more affected social networks, or other factors. At the same time, this variable proxies for much more than just personal exposure. Individuals in these counties where COVID-19 is more salient may simply worry more, without being any more likely to be personally affected. Moreover, inferences from this measure should be made cautiously, since cases were much higher in more cosmopolitan counties at this stage of the crisis, and these counties may be more likely to hold more liberal political opinions. Nevertheless, this is a useful measure to estimate, and it allows us to check the validity of our individual-level exposure measures by testing whether individual exposure is higher in counties with higher case counts (it is). We record the number of cases as of April 8, the last day on which our survey was fielded, and we take the natural log.[3]

Party identification is captured by asking respondents whether they usually think of themselves

[2]Data of confirmed cases at county level come from the New York Times: https://www.nytimes.com/interactive/2020/us/coronavirus-us-cases.html. We use the U.S. Census estimated population for 2019.

[3]Specifically, we take the log of cases divided by county population +1, to accommodate instances in which there were no cases per capita.

Table 1: Individual exposure to COVID-19

	Self or loved one has contracted COVID-19?		
Self or income earner lost job to COVID-19?	No	Yes	
No	1838 (.74)	69 (.03)	1907 (.77)
Yes	450 (.18)	125 (.05)	575 (.23)
	2288 (.92)	194 (.08)	

Table 2: Exposure to COVID-19 and partisanship

	Democrat	Independent	Republican
Self or loved one contracted COVID-19	70 (.03)	62 (.02)	62 (.02)
Didn't contract	911 (.37)	773 (.31)	604 (.24)
Self or income earner lost job to COVID-19	231 (.09)	196 (.08)	155 (.06)
Didn't lose job	756 (.30)	648 (.26)	513 (.21)

as a Republican, a Democrat, or an Independent/other. We are primarily interested in the effects of being a Republican, but we recognize that many Republican-leaning individuals identify as Independent, and so we anticipate similar if muted relationships for Independents. As there is reason to believe that partisanship shapes health behaviors and attitudes, we later test whether Republicans are more or less likely to report exposure to COVID-19 (Gadarian, Goodman and Pepinsky 2020). At first glance, we show in Table 2 substantial numbers of individuals exposed to COVID-19 from across the political spectrum.

We use ordinary least squares regression to estimate the role played by partisanship and exposure in an individual's support for international financial assistance. We control for age, gender, income, education, and race, all of which may influence exposure to COVID-19, partisanship, and policy attitudes. For instance, older individuals may be more vulnerable to COVID-19 and may express more conservative political attitudes. We also recognize that both exposure to COVID-19 and partisanship are geographically correlated, challenging our ability to tell whether our outcomes are affected by partisanship or by exposure to COVID-19, let alone their interaction. To account for this, we use state fixed effects. When estimating the role of county-level exposure, we cluster standard errors by county.

Results

We first examine the relationship between personal exposure and partisanship and support for *IO Contributions*. As expected, Figure 3 shows that people who have contracted or had a loved one contract the virus are more supportive of contributing to IOs than those who have not. Democrats are the most enthusiastic, followed by Independents and then Republicans. While 41% of the Democrats strongly support this action, only 17% of Republicans share this view.

Figure 3 here

Similarly, we inspect citizens' willingness to help developing countries (*Foreign Aid*). As shown in Figure 4, we find what we anticipated: a stronger preference for prioritizing developing countries among those who avoided exposure to COVID-19 (exposed individuals favor a domestic response). Partisanship plays a similar role as with *IO Contributions*. Twice as many Republicans as Democrats provided an extreme response indicating the U.S. should exclusively focus on responding at home.

Figure 4 here

Next, we investigate our theoretical expectations systematically using regression analysis. In Table 3, we regress support for IOs on personal exposure and party identification (Column 1).[4] Having contracted the virus or knowing a loved one who has significantly increases (by half a category) individual support for U.S. contributions to IOs. Republicans are significantly less likely than Democrats to support financing IOs by almost one category.

We estimate the interaction between these two variables in Column 2. The positively signed and statistically significant coefficient suggests that while unexposed Republicans are less supportive of financing a multilateral response, exposure counteracts this effect, with exposed Republicans reporting levels of support almost as high as unexposed Democrats. In contrast, exposed and

[4]Table 3 presents our preferred model with full controls. For illustrative purposes, we replicate Columns 1 and 2 in the Appendix, introducing our controls gradually.

unexposed Democrats look very similar in their expressed support for IOs. This could indicate that exposure does little to affect Democrats' support for IOs, but it persuades Republicans of the value of international institutions.

We find similar relationships (although smaller in magnitude) when we use *Lost Job* as our measure of personal exposure (Columns 3 and 4). Losing a job to the crisis, like contracting the virus, is associated with significantly increased support for contributions to IOs, and this relationship is stronger among Republicans. However, the coefficients are about half the size as with *Contracted*, and exposure only halfway counteracts the partisan bias.

The results for county-level exposure are a bit more mixed: We do not find any overall relationship between the county cases per capita and support for IO contributions (Column 5). However, when we interact county cases per capita with an individual's partisanship, the interaction between county cases and Republican (Column 6) is positive and statistically significant, as in the individual-level findings. The substantive size is quite large: we find that, among Republicans, a 10% increase in the county cases per capita is associated with a full category improvement in support for IOs. This suggests that Republicans living in counties with higher case numbers per capita are more likely to be willing to contribute to IOs. In contrast, we find that the number of county cases does not have a statistically significant effect on Democrats' willingness to finance IOs. In other words, Democrats living in counties with high numbers of confirmed cases and their counterparts from less exposed counties share similar levels of support for IOs. These patterns lend credibility to our earlier, individual-level findings, although we stress the complexity of interpreting county-level predictors.

Table 4 reports results for *Foreign Aid*. As before, Republicans are less supportive (by one category on a 1-10 scale) of international assistance to developing countries. But while personal exposure was associated with increased support for contributing to IOs, it decreases support for assisting developing countries. Respondents who reported health (Column 1) or economic (Column 3) exposure to the pandemic are significantly less willing to help developing countries by about a

half of a category.[5]

We again test for the joint effect of partisanship and exposure (Columns 2 and 4). However, the coefficients for the interaction terms are not statistically significant, implying that exposure to COVID-19 is no different for Republicans and Democrats in their aid attitudes. Again, this is what we would expect if people perceive that helping developing countries does little to benefit the U.S., as Republicans would not update their opinions. As before, the county-level results are less clear than the individual-level results in predicting *Foreign Aid* than *IO Contributions*: the county-level exposure variable in Column 5 is not statistically significant. The null interaction effect in Column 6, however, is consistent with the individual-level results.

Our first conclusion is that personal exposure to the effects of COVID-19 is associated with increased support for financing IOs but decreased support for assisting developing countries. One possibility is that respondents anticipate benefiting from *IO Contributions* but not from *Foreign Aid*. While these results may in part result from question wording, since *Foreign Aid* makes this trade-off more explicit, we believe that our overall results suggest that those who are personally affected by COVID-19, with greater appreciation for policies that produce benefits, may expect gains from supporting international cooperation but not from assisting developing countries; more likely, they fear the latter could detract from domestic solutions.

Our second conclusion, that partisanship interacts with exposure, is also consistent with this rationale. Specifically, personal exposure to the pandemic can almost turn a Republican with a skeptical view of the WHO into a supporter. This result is consistent with Milner and Tingley (2013*b*)'s findings that Republicans support global engagement for self- or national-interest reasons. Democrats, on the other hand, value liberal internationalism for ideological reasons.[6] Accordingly, personal exposure plays less of a role in Democrats' policy views. Therefore, it is also

[5]This contrasts with one conclusion from Kobayashi, Heinrich and Bryant (2021), who find that experimentally induced worry about the personal effects of COVID-19 does not depress support for assisting developing countries. We suggest this experimentally manipulated but subjective feeling differs considerably from the more objective, albeit endogenous, measures we use as our primary independent variables — virus exposure and job loss. See Naoi (2020).

[6]Given our research design, we are unable to parse whether these partisan differences result from differential awareness of benefits or differential valuation of benefits. We suggest this as a promising avenue for future theoretical development.

Table 3: Predictors of attitudes toward IO contributions

	Dependent variable:					
	IO Contributions (1-5)					
	(1)	(2)	(3)	(4)	(5)	(6)
Party:Ind.	−0.497***	−0.524***	−0.507***	−0.551***	−0.508***	−0.529***
	(0.054)	(0.057)	(0.054)	(0.062)	(0.052)	(0.061)
Party:Rep.	−0.794***	−0.851***	−0.793***	−0.914***	−0.771***	−0.843***
	(0.059)	(0.062)	(0.059)	(0.067)	(0.064)	(0.073)
Party:Ind.*Contracted		0.362*				
		(0.203)				
Party:Rep.*Contracted		0.656***				
		(0.204)				
Party:Ind.*Lost Job				0.186		
				(0.125)		
Party:Rep.*Lost Job				0.522***		
				(0.135)		
Party:Ind.*County Cases						12.871
						(17.638)
Party:Rep.*County Cases						50.012**
						(21.863)
Contracted (0-1)	0.483***	0.159				
	(0.086)	(0.141)				
Lost Job (0-1)			0.258***	0.059		
			(0.056)	(0.085)		
County Cases (log pc)					22.590	8.096
					(16.145)	(16.838)
Income	0.002	0.002	0.004	0.004	0.001	0.001
	(0.008)	(0.008)	(0.008)	(0.008)	(0.007)	(0.007)
Female	−0.010	−0.011	−0.030	−0.032	−0.038	−0.038
	(0.050)	(0.050)	(0.050)	(0.050)	(0.047)	(0.047)
Edu	0.007	0.006	0.014	0.012	0.016	0.017
	(0.018)	(0.018)	(0.018)	(0.018)	(0.017)	(0.017)
Age	−0.007***	−0.007***	−0.006***	−0.006***	−0.007***	−0.007***
	(0.001)	(0.001)	(0.001)	(0.001)	(0.001)	(0.001)
Nonwhite	0.054	0.051	0.047	0.049	0.046	0.050
	(0.052)	(0.052)	(0.052)	(0.052)	(0.054)	(0.054)
Fixed Effects?	state	state	state	state	state	state
Clustered S.E.s?	none	none	none	none	county	county
Observations	2,360	2,360	2,376	2,376	2,349	2,349
Adjusted R^2	0.107	0.110	0.103	0.108	0.093	0.094

Note: *p<0.1; **p<0.05; ***p<0.01

Table 4: Predictors of attitudes toward foreign aid

	Dependent variable:					
	Foreign Aid (1-10)					
	(1)	(2)	(3)	(4)	(5)	(6)
Party:Ind.	−0.155	−0.143	−0.167	−0.176	−0.166	−0.155
	(0.108)	(0.113)	(0.108)	(0.124)	(0.108)	(0.127)
Party:Rep.	−0.836***	−0.848***	−0.856***	−0.832***	−0.851***	−0.822***
	(0.118)	(0.123)	(0.118)	(0.133)	(0.117)	(0.130)
Party:Ind.*Contracted		−0.150				
		(0.406)				
Party:Rep.*Contracted		0.116				
		(0.407)				
Party:Ind.*Lost Job				0.037		
				(0.250)		
Party:Rep.*Lost Job				−0.108		
				(0.269)		
Party:Ind.*County Cases						−6.559
						(33.116)
Party:Rep.*County Cases						−20.556
						(39.652)
Contracted (0-1)	−0.626***	−0.612**				
	(0.171)	(0.281)				
Lost Job (0-1)			−0.257**	−0.241		
			(0.111)	(0.171)		
County Cases (log pc)					21.891	28.294
					(32.002)	(31.549)
Income	−0.019	−0.019	−0.021	−0.021	−0.018	−0.018
	(0.015)	(0.015)	(0.015)	(0.015)	(0.014)	(0.014)
Female	−0.184*	−0.182*	−0.161	−0.162	−0.178	−0.178
	(0.099)	(0.099)	(0.099)	(0.099)	(0.110)	(0.110)
Edu	0.101***	0.100***	0.088**	0.089**	0.085**	0.085**
	(0.035)	(0.035)	(0.035)	(0.035)	(0.034)	(0.034)
Age	−0.013***	−0.013***	−0.013***	−0.014***	−0.012***	−0.012***
	(0.003)	(0.003)	(0.003)	(0.003)	(0.003)	(0.003)
Nonwhite	−0.002	−0.001	0.005	0.005	−0.015	−0.016
	(0.103)	(0.103)	(0.103)	(0.103)	(0.113)	(0.114)
Fixed Effects?	state	state	state	state	state	state
Clustered S.E.s?	none	none	none	none	county	county
Observations	2,360	2,360	2,376	2,376	2,349	2,349
Adjusted R^2	0.044	0.043	0.041	0.040	0.038	0.038

Note: *p<0.1; **p<0.05; ***p<0.01

unsurprising that the partisan interaction disappears for a policy action that appears to promise fewer benefits: aiding poor countries.

Our results do not constitute evidence that exposure to COVID-19 causes individuals to become more or less supportive of international assistance. An individual's exposure to the effects of the virus is not random but related to a host of background characteristics. However, if the relationship were causal, our study would expect support for global engagement to increase over the course of the pandemic, especially among Republicans, while developing countries may be further overlooked.

Self-reported personal exposure variables could exhibit biases. In Table 5, we show Republicans are slightly more likely to report having themselves or a loved one who has contracted the virus, and the result is weakly statistically significant.[7] They are no more likely, however, to report losing a job. The viral relationship could be explained if Republicans were to undertake behaviors or have personal backgrounds that increase their health exposure to COVID-19.[8] We are unable to parse these, but note that the number of cases in a respondent's county significantly predicts their self-reported personal exposure, which lends credibility to this measure. We see this as the main utility of this county-level variable.

[7]This is an individual-level finding. County-level patterns were the opposite at this stage of the crisis: in late spring 2020, COVID-19 affected Democratic-voting counties more than Republican-voting counties. See Medina and Gebeloff (2020).

[8]It could also result if Republicans were more likely to associate illness with COVID-19, but since there is evidence of increased skepticism of COVID-19 among Republicans, we think this unlikely.

Table 5: Correlation between partisanship and exposure to COVID-19

	Dependent variable:									
	Contracted (0-1)					Lost Job (0-1)				
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
Republican (0-1)	0.020*	0.017		0.025**	0.106***	−0.001	0.014		0.021	0.104*
	(0.012)	(0.013)		(0.013)	(0.035)	(0.019)	(0.020)		(0.020)	(0.053)
Income		0.001		−0.0003	−0.0003		−0.006**		−0.007**	−0.007**
		(0.002)		(0.002)	(0.002)		(0.003)		(0.003)	(0.003)
Female		−0.036***		−0.032**	−0.031**		−0.007		−0.005	−0.004
		(0.012)		(0.013)	(0.013)		(0.019)		(0.019)	(0.019)
Edu		0.013***		0.012***	0.012***		−0.001		−0.004	−0.004
		(0.004)		(0.004)	(0.004)		(0.007)		(0.007)	(0.007)
Age		−0.002***		−0.002***	−0.002***		−0.005***		−0.005***	−0.005***
		(0.0003)		(0.0003)	(0.0003)		(0.001)		(0.0005)	(0.0005)
Nonwhite		−0.012		−0.019	−0.018		0.017		0.012	0.013
		(0.013)		(0.014)	(0.014)		(0.019)		(0.018)	(0.018)
County Cases (log pc)			8.757**	10.095***	10.173***			13.158***	13.755***	13.843***
			(3.903)	(3.511)	(3.480)			(4.747)	(4.857)	(4.874)
County Trump VS			−0.106***	−0.109***	−0.057			−0.107**	−0.159***	−0.105*
			(0.034)	(0.036)	(0.039)			(0.054)	(0.054)	(0.064)
Rep*County Trump VS					−0.183***					−0.189*
					(0.067)					(0.106)
Constant	0.073***	0.046	0.110***	0.169***	0.147***	0.233***	0.480***	0.259***	0.591***	0.568***
	(0.006)	(0.063)	(0.018)	(0.032)	(0.032)	(0.010)	(0.098)	(0.027)	(0.052)	(0.053)
Fixed Effects?	none	state	none	none	none	none	state	none	none	none
Clustered S.E.s?	none	none	county	county	county	none	none	county	county	county
Observations	2,482	2,360	2,455	2,333	2,333	2,499	2,376	2,472	2,349	2,349
Adjusted R^2	0.001	0.035	0.015	0.039	0.041	−0.0004	0.062	0.010	0.062	0.062

Note: *p<0.1; **p<0.05; ***p<0.01

We do not believe political geography confounds our individual-level findings, although it should be considered with respect to our county-level results. Early in the crisis, COVID-19 disproportionately affected cosmopolitan, urban areas that lean Democratic. While controlling for partisanship should address this at the individual level, and our state fixed effects should also mitigate some role played by political geography, we also address this at the county level by controlling for the vote share to President Trump in the 2016 election, which proxies for anti-globalist views (Tables **??** and **??**). All of our results regarding individual-level exposure to COVID-19 are robust. We do find that including the Trump vote share slightly changes one result: among Democrats, county cases begins to negatively predict support for IOs, although this result is only weakly significant, and we believe it indicates that partisanship and county features are intertwined in ways we are not prepared to model. We therefore focus on our individual-level results, which are relatively more straightforward to interpret.

We consider whether ceiling effects explain our IO findings. Since Democrats report extremely high levels of support, they could be harder to move, whereas Republicans have more room for opinion change. To mitigate this concern, we operationalize *IO Contributions* as a dummy variable with 1 denoting individuals who respond "Strongly support," and 0 otherwise, effectively raising the ceiling for Democrats. Our results are unchanged (Table **??**).

Conclusion

We capture Americans' views of global engagement during a unique moment in history: the height of the March/April 2020 outbreak. Americans who were exposed to COVID-19 were more likely to support funding the WHO but less likely to want to help developing countries. This pattern is consistent with the idea that Americans are willing to finance global efforts so long as they expect to benefit, and they expect to benefit more from global institutions than helping other countries. This is consistent with conclusions from Kobayashi, Heinrich and Bryant (2021), who find that informing the public of the "spillback" benefits of assisting developing countries increases their

support for foreign aid, while making a more altruistic case does not. But absent such appeals, individuals may not identify these benefits, and aiding the developing world will be a hard sell. This could change if the consequences of a pandemic for developing countries (and the negative spillovers for the U.S.) were to become more obvious. For instance, Americans may become more supportive of donating vaccines to developing countries after learning about the potential for new, potentially vaccine-resistant variants to emerge in outbreak areas. Another conclusion from our study is that international institutions could survive a pandemic, provided that they are perceived as beneficial and effective.

Our evidence from the case of COVID-19 speaks to a broader literature on support for international economic engagement. Specifically, we show partisan differences in how individuals think about the merits of international financial assistance during a time of national crisis. Republicans may be more likely than Democrats to behave according to the rationality assumption in political economy models. Investigating opinions during a time when these material benefits are more visible and salient introduces rich evidence.

Finally, our results are also consistent with an emerging literature on the impact of partisan differences on seemingly nonpartisan political issues like public health. For example, a number of studies show that differences in health behaviors during the COVID-19 pandemic, including the observation of social distancing measures and stay at home orders, are associated with political ideology (Clinton et al. 2021; Gadarian, Goodman and Pepinsky 2020; Gollwitzer et al. 2020; Grossman et al. 2020). Similarly, Baum (2011) finds evidence of partisan attitudes and behavior during the H1N1 virus (swine flu) crisis of 2009. This partisan divide also influences citizens' behavior with respect to more general health issues, such as their willingness to enroll in a health insurance plan or receive vaccinations (Sances and Clinton 2019; Lerman, Sadin and Trachtman 2017). The findings from this stream of research and ours emphasize the broad consequences of partisanship on citizens' lives.

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Figures

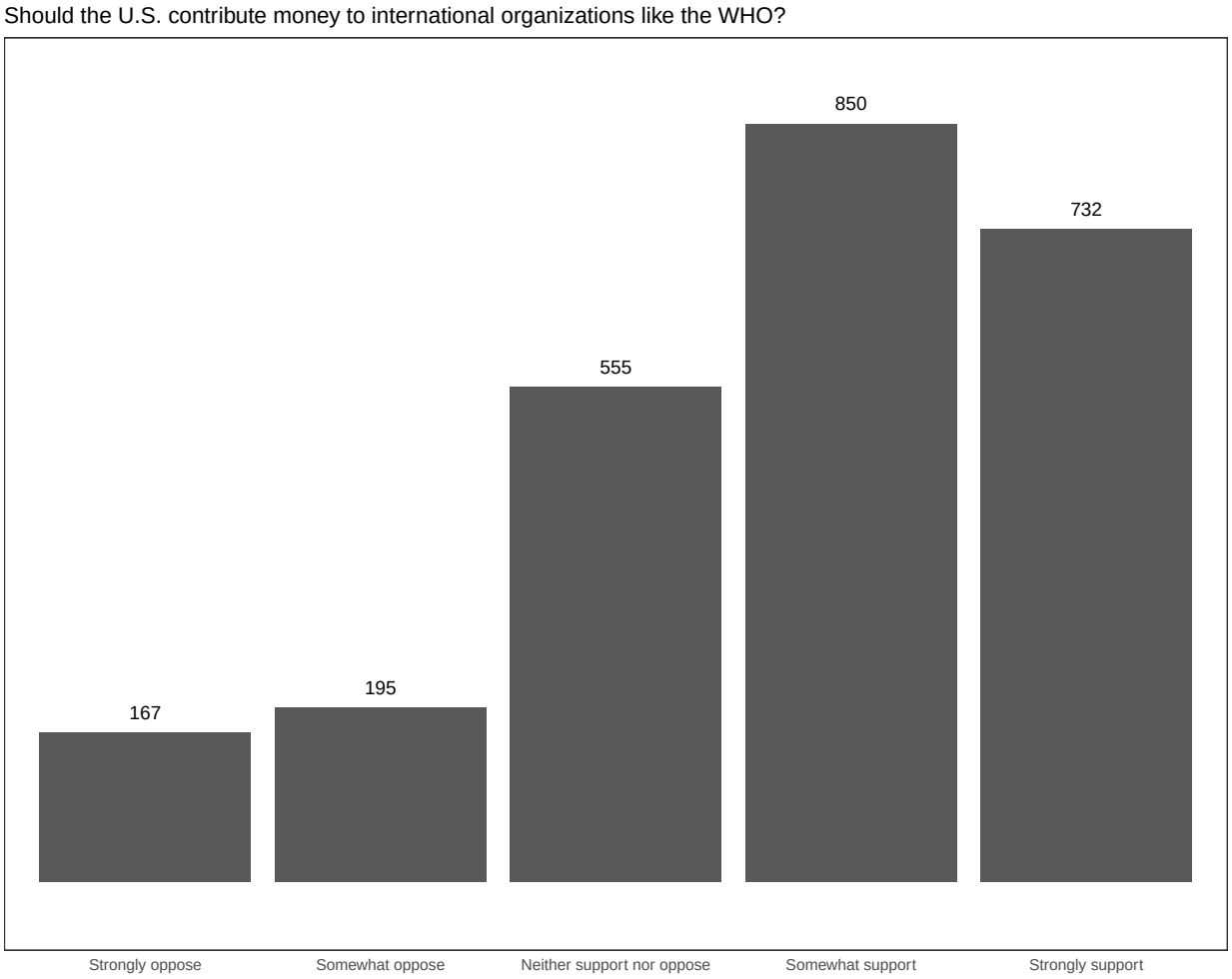

Figure 1: Histogram of *IO Contributions*. N=2502

On a scale of 1 to 10, should the top priority of the U.S. be to...

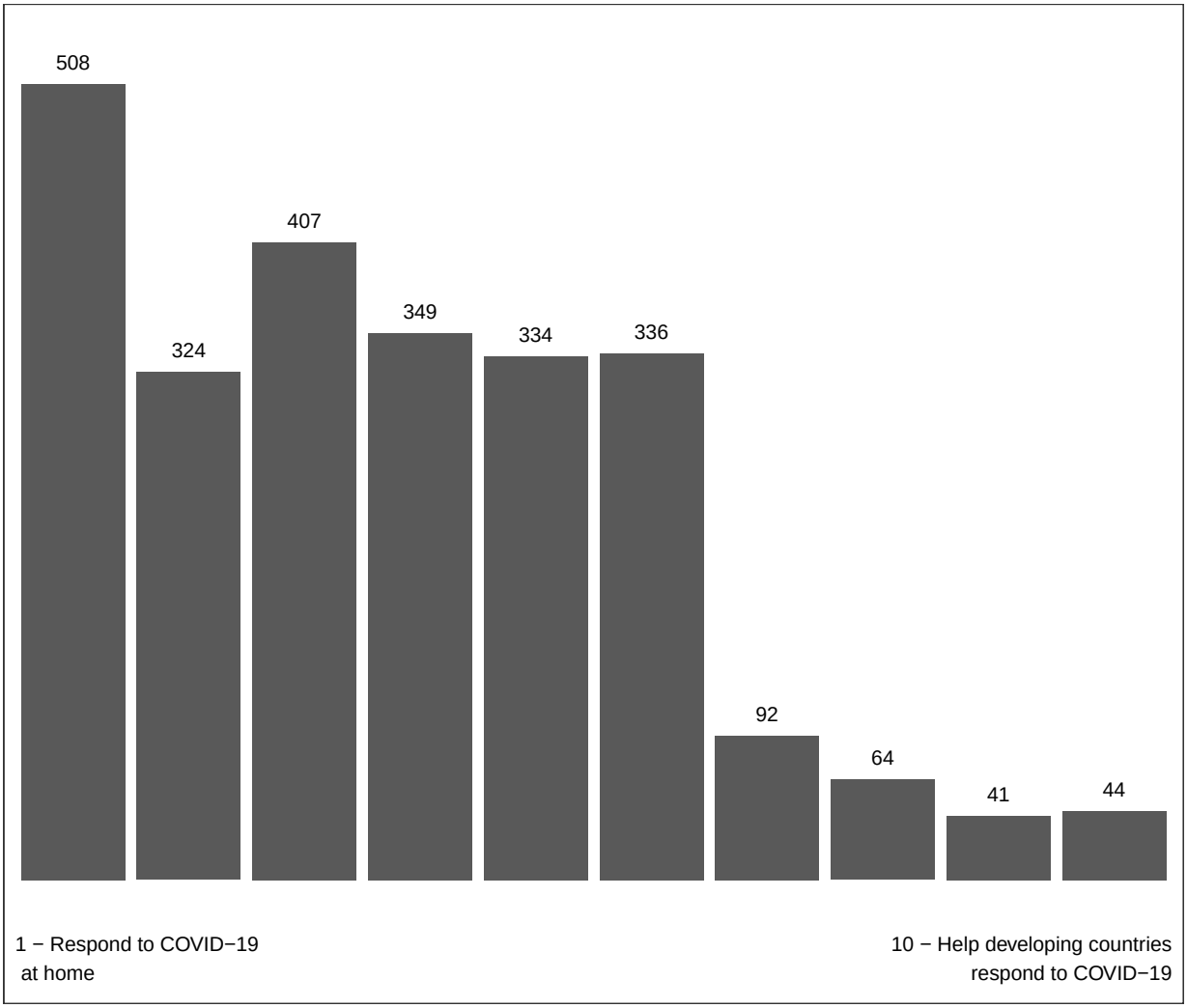

Figure 2: Histogram of *Foreign Aid*. N=2502

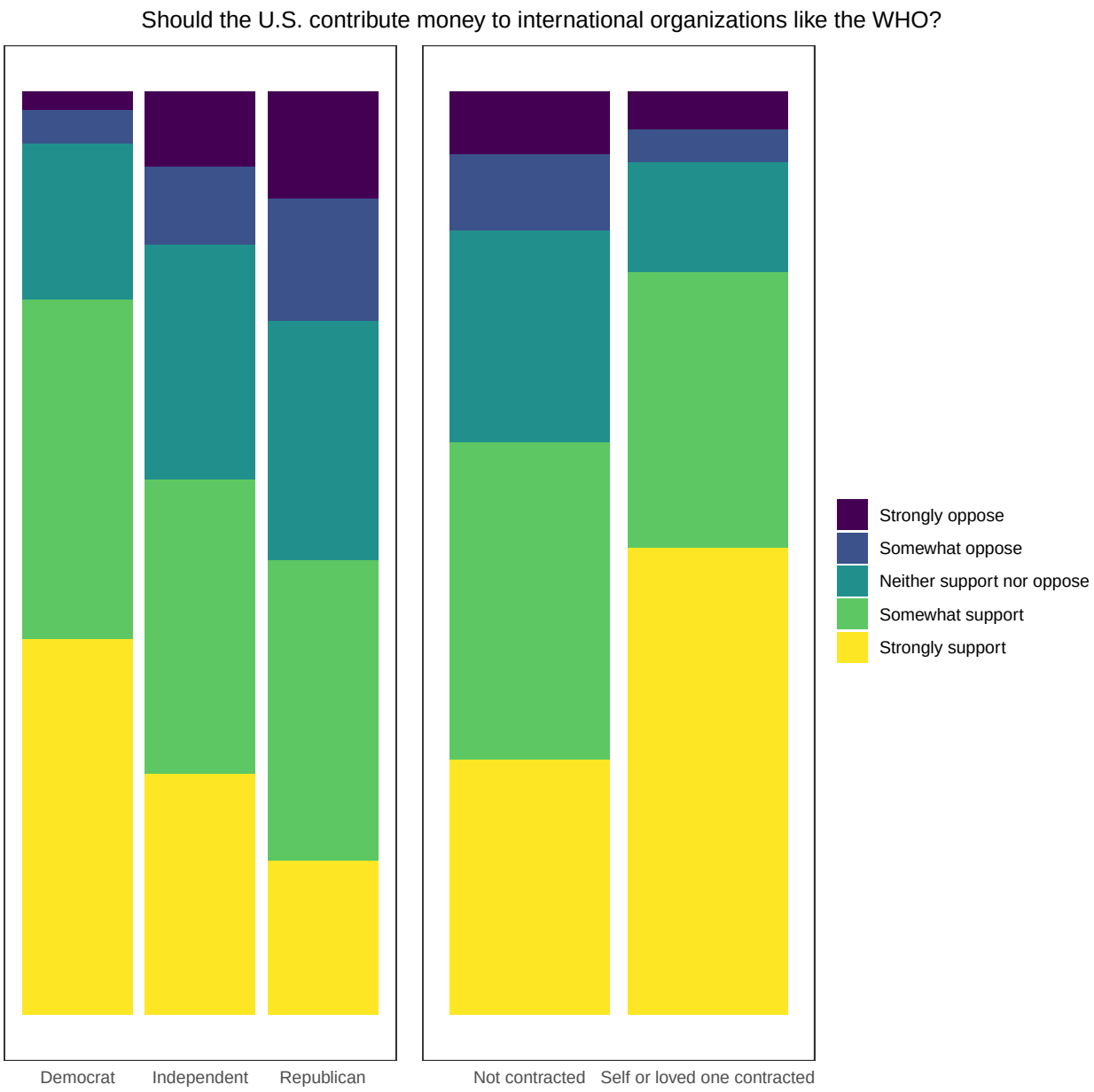

Figure 3: Determinants of *IO Contributions*. N=2502

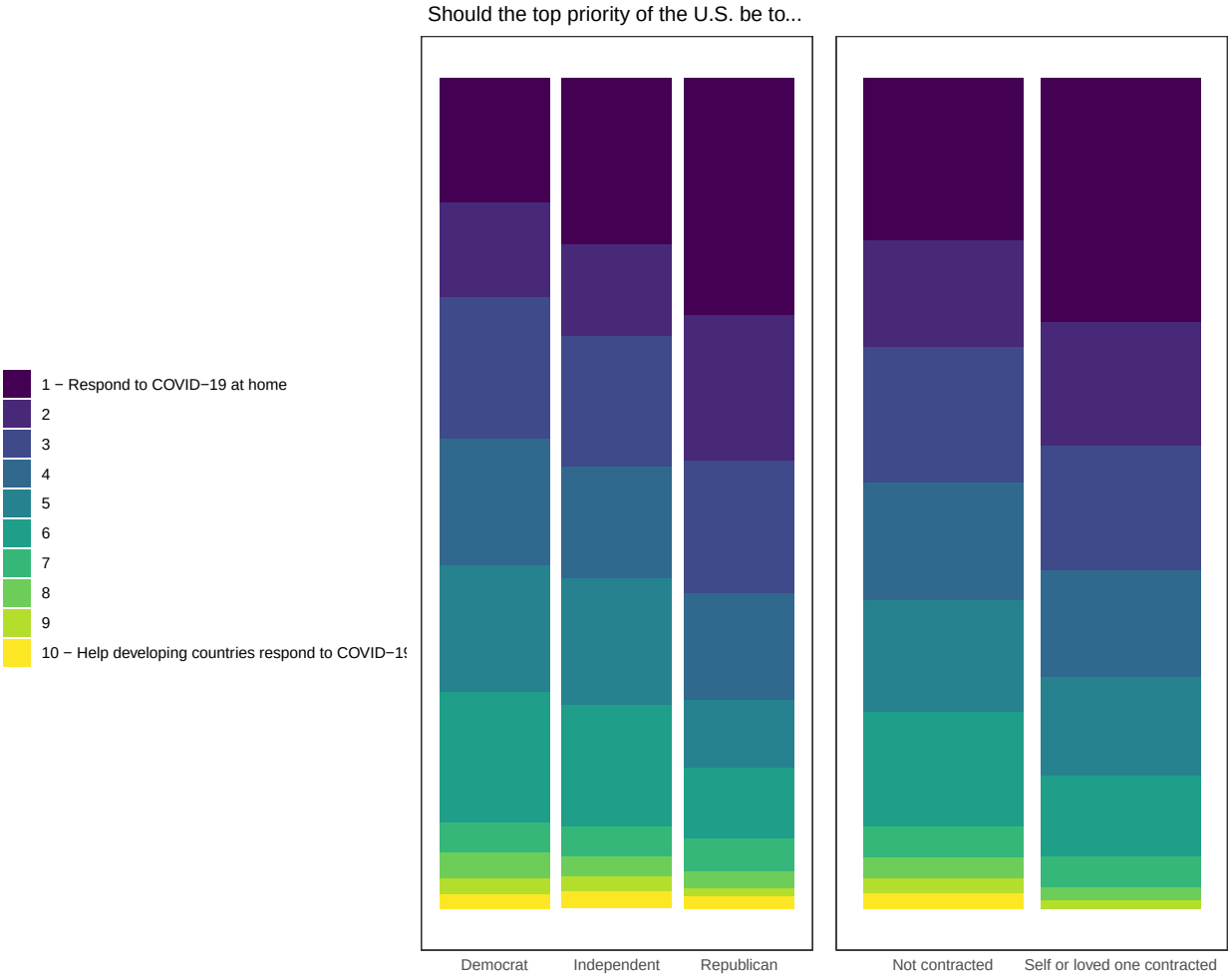

Figure 4: Determinants of *Foreign Aid*. N=2502