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THE HEALTH–ECONOMY DIVIDE:

A STRUCTURAL ANALYSIS OF SECTORAL AFFECTEDNESS AND COVID-19 POLICY PREFERENCES IN EUROPE

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REGROUP
REBUILDING GOVERNANCE AND RESILIENCE OUT OF THE PANDEMIC

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REGROUP

REBUILDING GOVERNANCE AND
RESILIENCE OUT OF THE PANDEMIC

Culminating more than a decade of crisis in Europe, the Covid-19 pandemic has opened an important window of opportunity for institutional and policy change, not only at the "reactive" level of emergency responses, but also to tackle more broadly the many socio-political challenges caused or exacerbated by Covid-19. Building on this premise, the Horizon Europe project REGROUP (*Rebuilding governance and resilience out of the pandemic*) aims to: 1) provide the European Union with a body of actionable advice on how to rebuild post-pandemic governance and public policies in an effective and democratic way; anchored to 2) a map of the socio-political dynamics and consequences of Covid-19; and 3) an empirically-informed normative evaluation of the pandemic.

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Abstract

The Covid-19 health emergency and the resulting economic crisis hit European societies asymmetrically, which led to divergent preferences over the policies addressing the emergency. This paper analyses how different economic sectors were affected based on the "essentiality" and "physicality" of their activities, and how the level of affectedness--job losses, furloughs, decreased working hours and salaries--opposed the interests in favour of reopening the economy against the lockdowns dictated by health concerns. We combine a structural approach with an examination of the impact of party identification on citizens' preferences, and posit that the parties that mobilise groups negatively affected by previous crises take positions toward the economic end of the continuum, in line with the preferences of an electorate that has been negatively affected by the pandemic. Our explanatory models integrate other structural (age, education) and political (trust, attitudes on expertise) factors in an effort to assess if the health–economy divide reordered the European cleavage structure towards material, rather than cultural and post-material, concerns.

Keywords: Covid-19; economic sectors; health–economy; cleavages; parties; voters

Introduction: The politics in the policy of Covid-19

Not since the Second World War has Europe faced a life-and-death issue similar to the emergency caused by the 2020 Covid-19 virus. Consequently, the latter's economic impact has been brutal and confronted governments with decisions of unprecedented gravity. While many of these decisions were presented as necessary measures based on expert advice and scientific evidence and dictated by the uncertainty about the virus's true lethality, rather than as a matter of policy choice, they did cause deep divisions over policy preferences in European societies. These divisions further complicated the cleavages that had emerged from the sequence of previous emergencies in Europe, such as the financial and the migration crises.

The goal of this paper is to exclusively address the politics of Covid-19 - namely, the politicization of the policies related to the pandemic and the resulting contestation of the measures that prioritized either public health and the sustainability of countries' health infrastructures or the national economies by saving jobs, maintaining salaries and avoiding closures. The analysis presented in this paper takes a structural approach based on the pandemic's asymmetric impact on different economic sectors, and the additional effect that the lockdown policies exerted on the sectors depending on the latter's essentiality (the degree to which individual citizens and the social system need them) and physicality (the degree to which they rely on personal contact and a particular spatial location). The pandemic's differentiated impact across socio-economic sectors has created a new "health-economy" dimension that opposes the interests in favour of keeping economic activities running to those in favour, or at least tolerant, of closures meant to limit the contagion, and therefore prioritizing public health. Our main research questions ask to what extent different groups have been differentially affected, and whether this differentiated impact has generated different policy preferences. It also inquires whether this new divide is politicized along the alignments produced by the aforementioned crises (if it overlaps with them) or if it cuts across them (Hutter and Kriesi 2019). Based on countries' sectoral structure, our results can begin to explain country differences in the degree to which they favour health or economy policies.

While many recent studies have focused on individual preferences (Galasso et al. 2020, Jennings et al. 2021, and Hegewald and Schraff 2022) and party positions (Wondreys and Mudde 2020 and Rovny et al. 2022, among others), to the best of our knowledge, no systematic study has examined how different socio-economic groups were affected by the pandemic and how this differentiated affectedness has influenced policy preferences. Our paper shows that the pandemic's impact on economic sectors depended on the lat-

ter's essentiality for individuals' well-being and the overall societal functioning, as well as on how strongly their activities were constrained by physical contact and a specific location. So far, the literature has overlooked these structural factors, which is unfortunate because they could represent a re-ordering of the ideological space, which has the potential to revert the widely acknowledged trends towards post-material values and cultural issues (Inglehart 1977, Ignazi 1992, Kitschelt 1994, 1995, Hooghe, Marks and Wilson 2002). Therefore, our paper also contributes to the existing literature by making an effort to predict citizens' policy preferences over Covid-19 through factors related to the virus, such as the pandemic's economic impact, rather than unrelated factors, such as individuals' trust and partisanship (Altiparmakis et al. 2021), authoritarian vs libertarian attitudes and left-right positions (Brouard et al. 2022). Indeed, while pre-existing attitudes and preferences are important, studies on policy preferences over the handling of the pandemic should not ignore the very factors that the pandemic created.

Our paper follows a three-step analysis based on four basic hypotheses. First, we hypothesize and examine the extent to which sectors were economically affected by the pandemic (in terms of jobs and salary losses, furloughs, decreases in working hours, etc.) based on whether they are essential and/or physical. The more essential and less physically constrained a sector is, the less affected it is. We then use the degree of affectedness to predict individuals' policy preferences on the health-economy continuum. Finally, we assess the overlap between parties' positions on the health-economy dimension and the positions of the economic sectors these parties traditionally mobilize, focusing on populist, opposition parties. While they are often location-constrained and physical (therefore highly affected), they are also often essential. These steps allow us to complement our sectoral approach with elements of a politicization perspective. Furthermore, our main data source (the European Social Survey) allows us to include other structural (e.g. age and level of education) and political/attitudinal (e.g. trust and attitudes toward expertise) variables.

Our focus on the health – economy dimension stems from our desire to contribute to the pandemic literature by shifting away from the existing emphasis on containment measures. Vaccination campaigns were not immediately available when the emergency first hit and remained unavailable for a long while. Covid-19 passes were much less controversial than lockdowns, which had a serious economic impact and created the most contestation.

The paper proceeds as follows. In the first section, we theorize affectedness in terms of essentiality and physicality and formulate hypotheses about these two characteristics' impact on the degree of sectoral affectedness and, as a second step, about the latter's impact on individuals' policy preferences. We complement our structural analysis of policy preferences with hypotheses about the effects of party identification and other

structural and political variables. The following section discusses our data and the models we use. The results section covers the three steps of our analysis: it identifies the determinants of sectoral affectedness, sheds light on the latter's impact on citizens' policy preferences, and presents the competing model of party identification. The conclusion discusses how the health – economy dimension over matters of life and death reversed the European cleavage structure, which has recently shifted away from the left-right redistribution axis towards the cultural axis.

Sectoral affectedness: A structural approach to Covid-19 policy preferences

The European ideological space, in the last two decades, has been reshaped by a sequence of major emergencies, or "crises" (Zeitlin, Nicoli and Laffan 2019). The Covid-19 emergency adds an important dimension of individual preferences and party positions to this ideological space and it is still unclear if the health-economy dimension overlaps or cuts across other dimensions. Covid-19 represents, in many aspects, a fast-burning crisis and an event characterized, even more than previous crises, by "alarm and an urgent demand for political action" (Seabrooke and Tsingou 2022). Not surprisingly, this urgency resulted in an immediate and great degree of academic interest, with studies on various aspects of the societal impact of the pandemic mushrooming already during the first wave in 2020. Taking stock of the literature on the implications of Covid-19 for democratic societies and limiting our scope to Europe, one can isolate a number of major streams of research.

First, there are a number of studies that look at how political authorities and institutions have responded, from a governance perspective, to one of the largest public health crises of the past hundred years. This crisis has triggered "unprecedented responses" (Cheibub, Hong and Przeworski 2020), both at European Union (Salvati 2021; Truchlewski, Schelkle and Ganderson 2021; Ferrera, Kriesi and Schelkle 2023) and national level (Engler et al. 2021), where the measures implemented showed significant heterogeneity (Hale et al. 2020). Most of the still ongoing research on the pandemic, however, focuses on the politics of Covid-19, which is more relevant to the approach taken in this paper. In general, these works aim at explaining the different levels of compliance to the mitigation measures put in place by national authorities (Brouard et al. 2022). A very common angle of this stream or research, based mostly on survey and experimental, individual-level data, is the "rally around the flag" effect, i.e. the tendency of public opinion to become more favourable toward political leaders in times of crises. Studies find that both fear and pre-existing levels of political trust (Van der Meer, Steenvoorden and Ouattara 2023) and mistrust (Jennings et al. 2021) explain it, but

socio-demographic (Hegewald and Schraff 2022) and psychological correlates (Brouard, Vasilopoulos and Becher 2020, Galasso et al. 2020) have a significant impact as well. Yet, this effect disappears rather quickly (Johansson, Hopmann and Shehata 2021; Mazza and Scipioni 2022). Finally, other studies focus on political parties, explaining how they react and politicize the pandemic, finding out that ideology powerfully predicts how parties, both in government and in opposition, responded to the pandemic (Rovny et al. 2022), and that the difference between populist parties and radical right parties, especially in government, and mainstream parties is less prominent than expected (Wondreys and Mudde 2020, Ringe and Rennó 2023).

A central element of most of these studies is that preferences towards Covid-related containment measures, be they at party- or individual-level, tend to be explained by pre-existing factors, not related to the pandemic itself. While some contributions (Kritzinger et al. 2021; Van der Meer et al 2023) have a structural component, our approach makes this component the core of the analysis: we look at how being affected by the pandemic leads to diverging – or not – preferences towards Covid-19 mitigation measures, and how this affectedness interacts with the non-structural factors on which the literature has focused so far, from party identification (Ladini and Maggini 2022), party cues (Slothuus, R.and M. Bisgaard, 2021), trust (Kritzinger et al. 2021; Schraff 2021; Van der Meer, Steenvoorden and Ouattara 2023), ideology and partisanship (Altiparmakis et al. 2021), to more personal inclinations (Hegewald and Schraff 2022, Brouard, Vasilopoulos and Becher 2020, Galasso et al. 2020). Our study also stands out in its comparative research design, whereas a great share of the immediate academic production in the wake of the pandemic is based on single-country researches: for instance, Germany (Tepe et al. 2020), Netherlands (Schraff 2021), Italy (Ladini and Maggini 2022; Capati, Improta and Trastulli 2022), France (Brouard et al. 2020), Spain (Royo 2020) and Sweden (Gustavsson and Taghizadeh 2023).

Our approach aims therefore to act as a counterweight to approaches uniquely based on politicization by parties and other actors, in particular to studies on populist reactions to pandemic, as well as to purely individual approaches. Furthermore, it aims to act as a counterweight to approaches based on “rally around the flag” by stressing divisions, especially from a structural perspective, in society. Finally, it aims at a comparative perspective covering all EU member states. Most importantly, however, the following analysis aims at taking the crisis itself seriously and consider the impact of Covid-19 related factors rather than factors created by previous transformations. For this, we develop a specific model based on the nature of economic sectors.

The conceptual model of the paper starts by considering Covid-19 as a critical juncture (Rokkan 1970, Capoccia and Kelemen 2011). Covid-19 creates a health emergency that has devastating economic consequences for European societies. Covid-19, however, has

a differentiated impact across countries and socio-economic groups. This impact leads to a policy response on the part of political and institutional actors. This response is contentious and different responses are in competition, supported by different regional and social constituencies. Leaving aside for the moment national differences, the sectoral model posits that the different degree to which groups have been affected by the pandemic matters for the understanding of divides regarding policy responses. In other words, individuals' and groups' policy preferences are determined by the degree of affectedness of their socio-economic group.[1] Assuming that everyone has been affected by the pandemic, the model states that preferences diverge between those that have been more affected and those that have been less affected. As will be clarified in the methodological section of the paper, the design focusses on preferences at a moment when they are least likely to be influenced by the containment measures put in place by governments to avoid the risk of endogeneity and circularity in the argument.

The argument is sectoral but one based on economic professional categories rather than classes. The economic impact of Covid-19 has been to a prevalent extent a sectoral one and to a lesser extent a class one. For example, in the hospitality sector (including hotels and restaurants) the pandemic has negatively affected job and profit of ownership, management, etc. all the way to waiters and cooks. As a consequence, the structure approach of the analysis in this paper is theorized differently than those based on class (Oesch 2013).[2] The pandemic has affected entire professional activities across class lines. It is true that when a sector is affected, lower income workers are more at risk than high income owners or managers.[3] Yet we posit and test empirically that policy preferences about the response to the impact of the pandemic vary across professional categories based on the degree to which these professional categories have been affected economically more than across class.

The concept of *affectedness* is at the core of our analysis. On the one hand, we relate the degree of affectedness to the nature of economic activities. Given the type of economic activities, it can be expected that sectors are more or less affected by the policy response given to the pandemic. On the other hand, we relate the degree of affectedness of professional sectors to preferences in regard to health and economic policies. As mentioned, affectedness is intended economically and includes job losses, decreases in salary and hours worked, being furloughed, etc.[4] We consider that the "ranking" in

1 The conceptualization and the following analysis are restricted to economic affectedness. One reason is maintaining a parsimonious conceptualization. The main reason, however, is that economic affectedness in the large majority of cases captures health affectedness. Where the health risk is high (for example, in jobs like teachers or cashiers), also the economic risk is high. There are exceptions (doctors), but generally a social group with a high health risks is highly likely to be also affected economically.

2 Our approach is more similar to those that have identified winners and losers of previous economic or migration emergencies (Kriesi 2008).

3 They are also more at risk through "skill specificity" and therefore less likely to be able to transfer them to other sectors (Pardos-Prado and Xena 2019).

4 Operationalization (measurement and data) is detailed in the next methodological section.

the degree of affectedness between sectors remains similar across welfare generosity, efficiency of the health systems and social protection in different countries (further research will use systematic containment data to strengthen this part of the analysis). In other words, if sector A is more affected than sector B, this remains true whether it is in a country with a strong or weak safety net (although, obviously, the two sectors A would be affected differently, and the same for the two sectors B). In addition, we not only attempt to mitigate endogeneity and circularity risks through the design as discussed in the methodological section below.

When can we expect a sector to be more or less affected? A parsimonious way to think about it is to consider the extent to which a sector is essential and, crucially in the case of a contagious pandemic, the extent to which it is based on physical contact. A sector is less at risk of lockdown, closure and economic loss if it is an essential sector for the functioning of society. We define the two concepts as follows:

- *Essentiality* is defined as a matter of survival at both individual and systemic level.[5] For example, care workers are essential for certain individuals, while power grid workers are essential for the social system to work. The same applies for sectors that do not rely on physical contact.

- *Physicality* is defined as the degree to which an activity is constrained by space and contact or, on the contrary, can transcend location. For example, an activity that can be performed from one's bedroom via an internet connection clearly transcends location. Conceptually, it is a more general and abstract notion than the distinction between object-processing or symbol-processing activity.[6]

Table 1: Affectedness by type of economic activity

Physicality	Essentiality	
	No	*Yes*
High	Highest affectedness (4)	High affectedness (3)
Low	Low affectedness (2)	Lowest affectedness (1)

5 This concept of essentiality is not unrelated to Maslow's pyramid of needs (1943), although this refers to individual needs primarily and not systemic ones. It is therefore also not unrelated to the distinction between material and post-material values (Inglehart 1977). In the operationalization we related to policy to support our coding of sectors in terms of essentiality.

6 We define as physically-transcending activity also a sector that has a high degree of "adaptability", i.e. an activity that is contact intensive and constrained by location but that can smoothly transition to transcend location and avoid contact. An example are teaching activities moving from classroom to online. Physicality also includes what one could call "dependency", meaning a sector relying on supply-chains, the production and delivery of instruments and materials which certain activities depend on.

Crossing the two dimensions of essentiality and physicality (Table 1) produces four levels of affectedness that we can use (1) to explain the level of affectedness across professional sectors, and (2) to explain policy preferences from a structural point of view. By adding information about party identification and the policy position of parties, we can measure the spatial proximity between preferences given by structural conditions and individuals' and parties' position on Covid-19 related policies. Finally, by seeing how important sectors are for given countries (say, tourism in Greece as opposed to financial services in the Netherlands), one can extend, comparatively, the results national policies in addressing the Covid-19 emergency.

We take three steps in the formulation of hypotheses.

In a first step, we aim to explain affectedness by the nature of sectoral activity. We hypothesize that affectedness ranges highest for the dyad high physicality-non-essentiality (score 4 in Table 1) followed by the dyad high physicality-essentiality (score 3), as such occupations are constrained by physicality in spite of their essentiality. Affectedness is low for the dyad low physicality-non essentiality (score 2), as even when it is not essential, an occupation that is not constrained by physicality can still continue to function. Essentiality is thus subordinate to physicality. Finally, affectedness is lowest for the dyad low physicality-essentiality (score 1). Examples of the first dyad are the tourist industry, food and beverages service activities (bars and restaurants) and real estate. Also highly affected are essential activities that, however, are physically constraint such as many manufacturing activities, postal and courier activities, and health activities. On the other hand, activities such as translation services, programming and broadcasting, and gambling and betting were affected to a lower degree. Finally, economic activities such as financial service activities, public administration and telecommunications were the least affected as they are not constrained by physicality yet essential for the system's functioning. This leads to the following set of hypotheses:

> H1a *If citizens are active in non-essential occupations with high physicality, then they tend to be affected the most by the pandemic.*
>
> H1b *If citizens are active in essential occupations with low physicality, then they tend to be affected the least by the pandemic.*
>
> H1c *If citizens are active in non-essential occupation but with low physicality, then they tend to be affected to a low degree by the pandemic.*
>
> H1d *If citizens are active in essential occupations but with high physicality, then they tend to be affected by a high degree by the pandemic.*

As mentioned, one can extend these statements to regions or countries: regions in which a large amount of citizens are in occupations where physicality is high and essentiality is low, tend to be more affected by the pandemic. On the contrary, countries

relying on activities that are low on physicality and still essential, tend to be the least affected. It is just the "ecological" variant of the individual level hypotheses.[7]

In a second step, we use the degree of affectedness (1–4 from Table 1) as the main explanatory variable to predict policy preferences regarding lockdowns. In line with a range of previous analyses (e.g. Hargreaves et al. (2020), Kochańczyk and Lipniacki (2021), Oana et al. (2021)), we conceptualize Covid-19 related policy preferences along a continuum between a "health" pole and an "economy" pole. On the "health" pole, one finds preferences for policies that prioritize the health of citizens and the sustainability of public and private health systems.[8] On the "economy" pole, one finds preferences to keep the economy running, that is, ensure mobility, keep shops open, not restrict transportation, etc. Being a continuum with two poles, they constitute a trade-off.[9] According to the model above, we expect a structural effect on policy preferences. The core variable is again affectedness but in this case as an independent, rather than a dependent (as in the previous step), variable. Citizens in economic sectors that have been negatively affected by the pandemic, will prefer to keep the economy running even if this has health risks and costs for the health system. They will be against lockdowns. We therefore formulate the following hypothesis.

> H2 *The stronger citizens are affected by the pandemic, the more likely they are to have preferences toward the "economy" pole.*

From Table 1, it follows that preferences toward the "economy" pole are higher for citizens employed in sectors with high physicality-non-essentiality (score 4 in Table 1) and high physicality-essentiality (score 3), whereas preferences toward the "health" pole are higher for citizens employed in sectors with low physicality-non essentiality (score 2) and low physicality-essentiality (score 1) As before, this can be extended to regions and countries, whereby the highest affected regions will have preferences toward the "economy" pole and vice versa. The analysis based on the affectedness of economic sectors, however, does not exhaust the range of structural factors. For this reason, affectedness needs to be related to a number of other structural factors. First, while our understanding of economic structure is a sectoral one, we also consider the possibility that class plays a role, i.e. that citizens with higher incomes and wealth have policy preferences that are different from less affluent citizens. Second, as the pandemic pre-

7 This not being the core of the paper, we show evidence in the Online Appendix.

8 Pandemic mitigation measures do not only include lockdown but also mask wearing, compulsory vaccination, social distancing among other things. The timing of the survey avoids the risk that preferences are influenced by mitigatiation measures and, as mentioned, we assume a similar distribution of preferences across different contexts of mitigation measures. Further research needs to take the risk of endogeneity and circularity into account more systematically..

9 While trade-off variables are sometimes considered problematic when used as dependent variables, in this case it captures precisely the dilemma that citizens and policy makers faced. On "health-economy trade-off" see Carrieri et al. (2021), Kochańczyk and Lipniacki (2021), Jaccard (2022) and, Oana et al. (2021). Socci et al. (2022) speak of "trade-off between health and economics" whereas Hargreaves et al. (2020) of "health-wealth trade-off". More colourful is Chorus et al. (2020) who use "diabolical dilemma".

sented health risks mainly for the elderly, a generational effect on preferences should not be excluded. Third, citizens with higher levels of education may have preferences for lockdowns that relate to a better understanding of the long-term consequences of policies and be less exposed to "fake" accounts and have a higher trust in science and expertise (Bertsou and Caramani 2022). We do not formulate specific hypotheses for these factors as the focus is on affectedness as resulting from the essentiality and physicality of professional sectors.

In a third step, we link sectoral affectedness and citizens' policy preferences to political factors. So far we have treated the structural approach in a deterministic way: the nature of the professional sector determines the degree of affectedness, which in turn determines policy preferences on the health–economy continuum. The last step in the analysis is to move away from the deterministic perspective and take into account how actors politicize and frame such preferences. Preferences for Covid-19 policies may be driven by party identification and parties' discourse. Parties that mobilize disaffected voters that had already experiences hardship during previous crises are more likely to adopt policy positions that are immediately "responsive" toward the demands of the most affected citizens. On the contrary, parties that take a "responsible" and long-term policy position are more likely to mobilize citizens that are less affected by the pandemic because they are active in non-physically or location constrained sectors. This distinction overlaps to some extent with that between anti-establishment populist parties that find themselves in opposition on the one hand, and mainstream parties with executive functions on the other.[10] On the two-dimensional ideological map with a horizontal left–right redistributive/economic and vertical GAL–TAN cultural axis (Kitschelt 1994, 1995, Hooghe and Marks 2009, Kriesi et al. 2008), we would expect citizens affected by the pandemic to be located in the lower-right quadrant. Party identification factors may be reinforced by specific attitudes, in particular trust toward government agencies and experts (especially in the health and economy areas).

Two aspects need to be considered in regard to party identification. First, the relationship between affectedness and party identification. We hypothesize that affected citizens identify with parties of the "losers" of previous crises, i.e. populist parties. Second, the relationship between party identification and policy preference. We insert party identification as a competing explanation to the structural one performed in the second step. It is the parties' policy position on the health–economy dimension that may explain – as opposed to the degree of affectedness – citizens' policy preferences. This brings us to formulate the two following hypotheses:

H3 *The stronger citizens are affected by the pandemic, the more likely they are*

10 On the distinction between responsiveness and responsibility, see Mair (2013), Bardi et al. (2014). Populist representation is closer to a responsive type whereas technocratic, expert representation is closer to a responsible type (Caramani 2017).

to identify with populist parties with similar policy positions.

H4 *The closer citizens identify with populist parties, the more likely they are to have preferences toward the "economy" pole.*

These three theoretical steps from which we derive four main hypotheses give the structure of the empirical analysis. We test the impact of the nature of the sector in terms of essentiality and physicality on affectedness. We use affectedness (and other structural variables) to predict policy preference on the health–economy dimension. We assess the degree of overlap between affectedness and party identification to disentangle the effect of party identification (and other political variables) on policy preference as distinct from the structural effect of affectedness.

Data and methods: Measuring sectors' affectedness and citizens' policy preferences

Our analysis relies on data from several sources. We use individual-level data from the 10th wave of the European Social Survey (ESS) to identify the groups of European citizens most strongly affected by the pandemic and assess their political views and policy preferences for dealing with the Covid-19 emergency. The national surveys took place between September 2020 and May 2022, with most of the data collected in the summer of 2021, when many European countries were past their first Covid-19 waves and well into secondary and tertiary waves of contagion. While this timing does not coincide with the very first disruptions caused by the pandemic and comes after the invention and first deployment of several vaccines against Covid-19, it does overlap with a period in which mask mandates, social distancing protocols, and even some border closures were still in place. If anything, this lag between the outbreak of the pandemic and the fielding of the surveys makes our tests more conservative. It is reasonable to imagine that with the passage of time and the accumulation of economic hardship, people's initial shock and caution gave way to weariness, if not outright rejection of the aforementioned measures, as the protests throughout Europe signalled.[11] Nevertheless, the data suggest that this was not the case: significant majorities in all countries under study declared a clear preference for government policies protecting public health, which is evident in the mean of the variable. We therefore expect that the effects we describe would have been stronger at the very onset of the pandemic in March and April of 2020.

Our preliminary results are based on data from 17 countries: Bulgaria, Czechia, Estonia, Finland, France, Greece, Croatia, Hungary, Iceland, Italy, Lithuania, the Netherlands,

11 See, for example, Breeden's (2021) report on Covid-related protests in France and Italy and Eddy's (2021) article about similar protests in Austria.

Norway, Portugal, Slovenia, Slovakia, and Switzerland. Eventually, we plan to include all members of the European Union that participated in the ESS's 10th wave, Iceland, the United Kingdom, and Switzerland upon the full release of the 10th wave. Furthermore, we use data from two additional sources to assess the mobilization hypothesis: the PopuList (Rooduijn et al., 2019), which codes populist parties in Europe, and the 2020 special edition of the Chapel Hill Expert Surveys on European parties' positions on Covid-19-related policy issues (Rovny et al., 2022). The full list of parties in our sample coded as populist can be found in Table A2 of the appendix.

We test our first hypothesis on the sectoral effects of the pandemic using logit models with and without country dummies. Our dependent variable, *affected by the pandemic*, is a dummy variable that takes the value of 1 if participants reported being made redundant or losing their job, experiencing income loss, having their hours reduced, being furloughed, or being forced into unpaid leave/holiday.

Table 2: The consequences of the pandemic on respondents' work and income (Question K19 of the 10th wave of the European Social Survey)

Options	*N*	*%*
1. Lost job	695	2.27
2. Lost income	2,526	8.24
3. Reduced hours	1,980	6.46
4. Furloughed	776	6.89
5. Unpaid leave	776	2.53
6. None of the above	15,047	49.10
7. Never in work[12]	2,781	9.08
Overall respondents	30,644	100.00

Respondents could mark multiple options. A total of 5,655 out of all 30,644 respondents in our initial sample marked that they had suffered any of these consequences. Table 2 presents the exact counts. The sum of the first five rows in column 2 exceeds 5,655 because some people marked more than one option; however, surprisingly few respondents did so. Indeed, the most striking aspect of the data is how few individuals

12 We did not include this option into our operationalization of our independent variable "affected by the pandemic" because it does not allow us to unequivocally attribute respondents' inability to find work to the pandemic, nor can we freely assume that the respondents were looking for work (i.e., were officially unemployed) without additional data explicitly stating so.

declared that they had been affected by the pandemic in any of the aforementioned ways: almost half of our sample marked that they had suffered none of the disruptions described above and another third selected neither "none of the above," nor any of the five options. We remain agnostic about the reasons for these respondents' answers but suspect that the paradigm shift in fiscal policy allowed member states to divert considerable resources to job retention schemes, thus generating a gap between the early descriptions of the effects of the pandemic and the declared effect it had on workers (Müller et al. 2022).

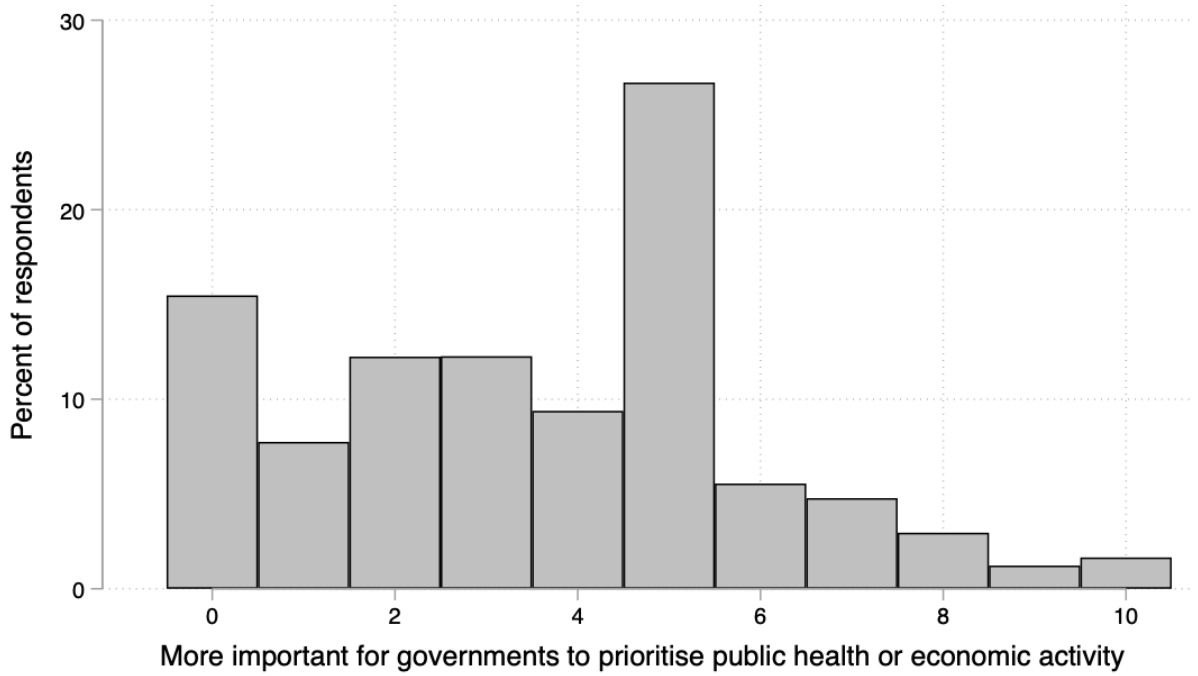
Our main independent variable is respondents' category of employment, which we theorized in section 2 and construct based on a question about the industry respondents' firms belong to (variable *nacer2*). The variable is ordinal and ranges from 1 (essential, non-physical – the category we theorize as least affected by the pandemic), to 4 (non-essential, physical – the one we naturally assume to have been most influenced by the COVID-19 outbreak). As a reminder, we coded the different industries ourselves but also followed the US Center for Disease Control and Prevention and the Italian Council of Ministers' guidelines[13] about different sectors' essentiality. The full classification of economic activities according to the two identified dimensions (physicality and essentiality) can be found in table A1 of the appendix. The results in Table 4 use the essential, non-physical category as a baseline.

We include a standard battery of demographic controls – gender (coded 1 for male and 0 for female), age, and education (measured in years) – as well as country dummies. We also apply the weights supplied by the ESS (variable *pspwght*).

The second part of our analysis explores the determinants of European citizens' policy preferences for dealing with the pandemic through standard OLS models with country dummies. We operationalize our main dependent variable through question K4a, which asks respondents whether the government should prioritize public health or economic activity when fighting a pandemic. Responses are measured on an 11-point scale ranging from 0 (the government should prioritize public health) to 10 (the government should prioritize economic activity). Figure 1 presents the distribution of responses for all 17 countries in our analysis and clearly indicates that most the surveyed selected options closer to the health extreme. Unfortunately, many participants failed to answer this question, which severely reduces our sample size (from 30,644 to 14,118). Nevertheless, we are still able to obtain statistical leverage.

13 The latter can be accessed here: https://www.tcnotiziario.it/Articolo/Index?settings=eVI4OTh2ZlBBRlZBZEljejlzZTdZMGJwQ2ZYUVMxWDFLeUh4T0pVZUF1dGdXMWJlbkV2MjFESFJDRGtWNER6R21mMzgzSkdsQVhadUhmS3pIc1dTSXByTUc0WHRVMVFLZm91ZXhkbzNvYUE9.

Figure 1: Distribution of preferences on the health-economy dimension



The main independent variable for this test is the previously described *affected by the pandemic* dummy (the dependent variable in our first test), coded as 1 if respondents declared that they had experienced any loss of employment, reduction in income or working hours, furlough or forced leave as a result of the pandemic. We use a dummy, rather than a count of how many distinct consequences of the pandemic an individual has suffered (lost job, furlough, loss of income, loss of working hours), because very few people declared that they had fallen victim to multiple negative effects (1,098 individuals) and we lose little variation by making this choice. Furthermore, this approach allows us to avoid the problem of double counting – a significant proportion of the aforementioned 1,098 individuals declared that they had both lost their jobs and lost income and/or income hours as a result of the pandemic. The former clearly encompasses that latter two consequences, which would have presented challenges to the interpretation of our results.

In addition, we include a number of controls designed to examine the validity of potential alternative explanations of individuals' policy preferences. To explore the effects of respondents' pre-existing attitudes, we control for their ideological positions on the left-right scale (measured on an 11-point scale from extreme left (0) to extreme right (10)), trust in scientists (question B12a, with answers ranging from 0 (no trust) to 10 (strong trust)), and general trust in people (question A4, measured in the same way). We also assess the mobilization hypothesis that people's attitudes on the health-economy dimension were largely shaped by their preferred political actors.

Table 3: Summary statistics of the variables in our analysis

Variable	*N*	*Mean*	*Std. dev.*	*Min.*	*Max.*
Preference on the health-economy dimension	14,118	3.581	2.430	0	10
Affected by the pandemic	30,644	0.185	0.388	0	1
Category of affectedness	26,523	2.999	0.904	1	4
Left-right scale	26,699	5.272	2.310	0	10
Income	23,772	5.436	2.687	1	10
Trust in scientists	24,188	7.083	2.197	0	10
Interest in politics	30,588	2.262	0.908	1	4
Party position: economic openness vs. virus containment	10,436	7.235	1.603	1	9.667
Trust in people	30,545	5.034	2.517	0	10
Populist vote	17,241	0.318	0.466	0	1
Age	30,411	50.730	18.405	15	90
Male	30,644	0.462	0.499	0	1
Education	30,122	12.970	4.057	0	55

We coded respondents' past votes for populist parties by combining their answers to the question which party they had voted for in the last national elections with the PopuList list of populist parties. The *populist vote* variable assumes the value of 1 if they had voted for a populist party and 0 if they had chosen a different party. Furthermore, we generated a variable that coded the position of the respondents' preferred party[14] on the economic openness vs. virus containment dimension by combining data from the ESS and the 2020 SPEED CHES-Covid dataset. The resulting variable ranges from 0 (the party prioritized keeping the economy open) to 10 (it prioritized containing the virus). We also include a standard battery of controls, including income (measured in deciles), interest in politics (measured on a 4-point scale, with 1 denoting no interest and 4 standing for strong interest), education, age, and gender. Once again, our results use the weights supplied by the ESS.

14 The exact ESS question asks respondents if they feel closer to any one party than to all other parties in their countries and a follow-up question identifies the party they feel closer to.

Finally, we use another logit model to test our third hypothesis that those affected by the pandemic are more likely to feel closer to populist parties. We operationalize our dependent variable—populist closeness—by once again combining the data about the party each respondent feels closer to with the PopuList coding of populist parties in Europe. As in our test of hypothesis 2, *affected by the pandemic* is our main independent variable. We control for age, gender, education, income, ideological position, trust in science, and interest in politics, and include country dummies and the standard weights supplied by the ESS.

Table 3 provides the summary statistics of all variables in our models. The next section presents our preliminary results.

Results: The link between affectedness, policy preferences and party identification

Table 4 presents the results of our first test that individuals' category of employment shaped their likelihood of experiencing any work-related adverse effects of the pandemic. The full model predicting affectedness with country dummies can be consulted in Table A3 of the Appendix.

Table 4: Determinants of pandemic affectedness, logit results

	Model 1	*Model 1 with country dummies*
non-essential, non-physical	0.310***	0.361***
	(0.09)	(0.09)
essential, physical	0.375***	0.403***
	(0.08)	(0.08)
non-essential, physical	0.846***	0.887***
	(0.08)	(0.09)
male	-0.011	-0.031
	(0.04)	(0.04)
age	-0.032***	-0.036***
	(0.01)	(0.001)
education	0.008*	0.018***
	(0.005)	(0.005)
constant	-0.423***	-0.802***

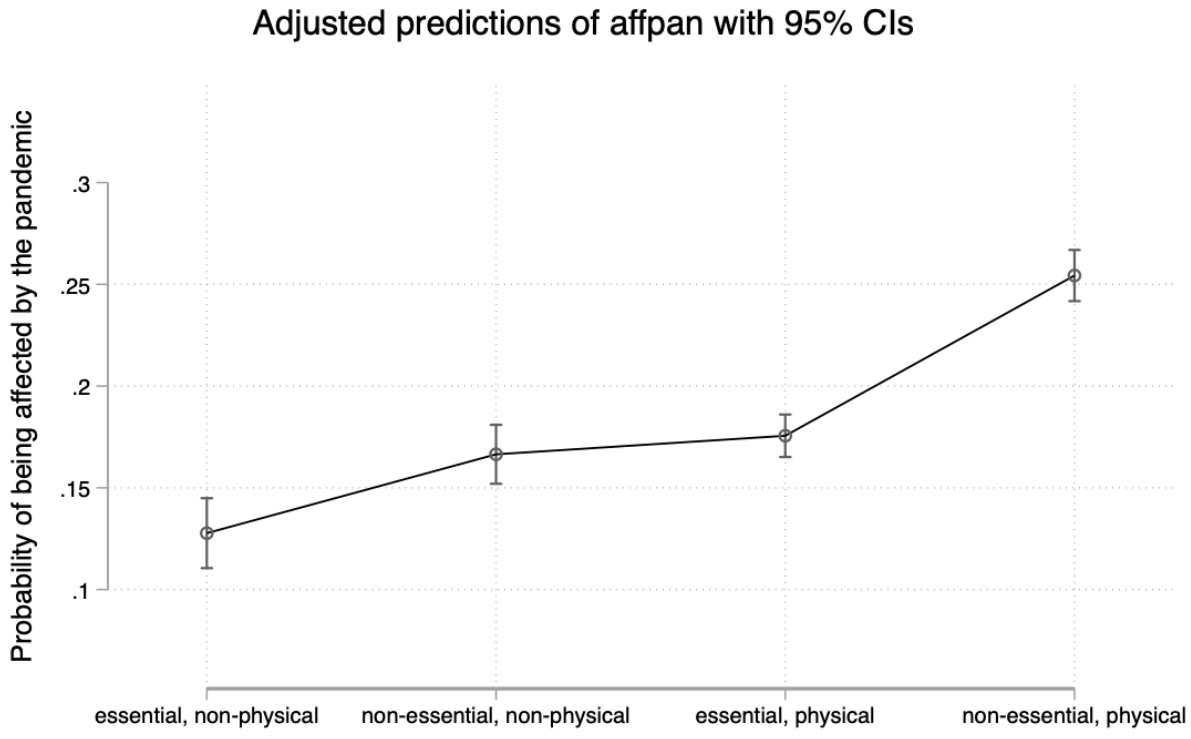
	(0.12)	(0.15)
Pseudo R-squared	0.06	0.10
Number of observations	26,074	24,307

*p<0.1; ** p<0.05; *** p<0.01

The results clearly suggest that belonging to any of the three categories we theorized as more affected by the Covid-19 mitigation measures raises the probability of unemployment, reduced income or working hours, and/or forced leave or furlough vis-à-vis the baseline category (essential, non-physical). These effects are highly significant at the 1 per cent level.

To facilitate interpretation, Figure 2 plots the probability of a man of average age and education being affected by the pandemic for all four different categories of employment: 1. essential, non-physical, 2. non-essential, non-physical, 3. essential, physical, and 4. non-essential, physical. This probability starts at 0.13 for the baseline category and almost doubles to 0.26 for non-essential, physical industries. We can also appreciate that the non-essential, non-physical and the essential, physical categories are virtually indistinguishable from one another, although they are set apart from the other two categories.

Figure 2. Probability of being affected by the pandemic for categories of employ-



These results demonstrate that individuals' sectoral occupation had a significant impact on their ability to maintain their jobs and income during the pandemic.

In addition to sector of employment, age and education also significantly predict the probability of being affected by the pandemic. Age returns a negatively signed coefficient – older people were less likely to become unemployed, furloughed or forced into unpaid leave, or see their incomes reduced, as a direct consequence of the pandemic. This result is unsurprising given the employment structure in Europe, where young people frequently hold temporary contracts and jobs in the more volatile services industry (reference). The magnitude of the effect is relatively small. Surprisingly, education has a slight positive effect on the likelihood of being affected by the pandemic. This result is highly significant at the 1% level.

Table 5 Determinants of European citizens' policy preferences towards the economy pole of health-economy dimension of dealing with the pandemic (OLS models)

	Model 1	*Model 2*	*Model 3*
affected by the pandemic	-0.025	0.154	0.088
	(0.13)	(0.08)	(0.09)
left-right scale	0.081***	0.088***	0.087***
	(0.02)	(0.01)	(0.02)
income	0.020	0.022*	0.018
	(0.02)	(0.01)	(0.02)
trust in scientists	-0.078***	-0.100***	-0.119***
	(0.03)	(0.02)	(0.02)
political interest	-0.021	0.102**	0.145***
	(0.06)	(0.04)	(0.05)
party position: economic openness vs. virus containment	-0.043		
	(0.04)		
trust in people		0.061***	
		(0.02)	
populist vote			-0.142
			(0.10)
age	-0.005*	-0.010***	-0.011***
	(0.003)	(0.002)	(0.002)
male	0.107	0.231***	0.121
	(0.10)	(0.06)	(0.08)
education	0.025*	0.013	0.021*

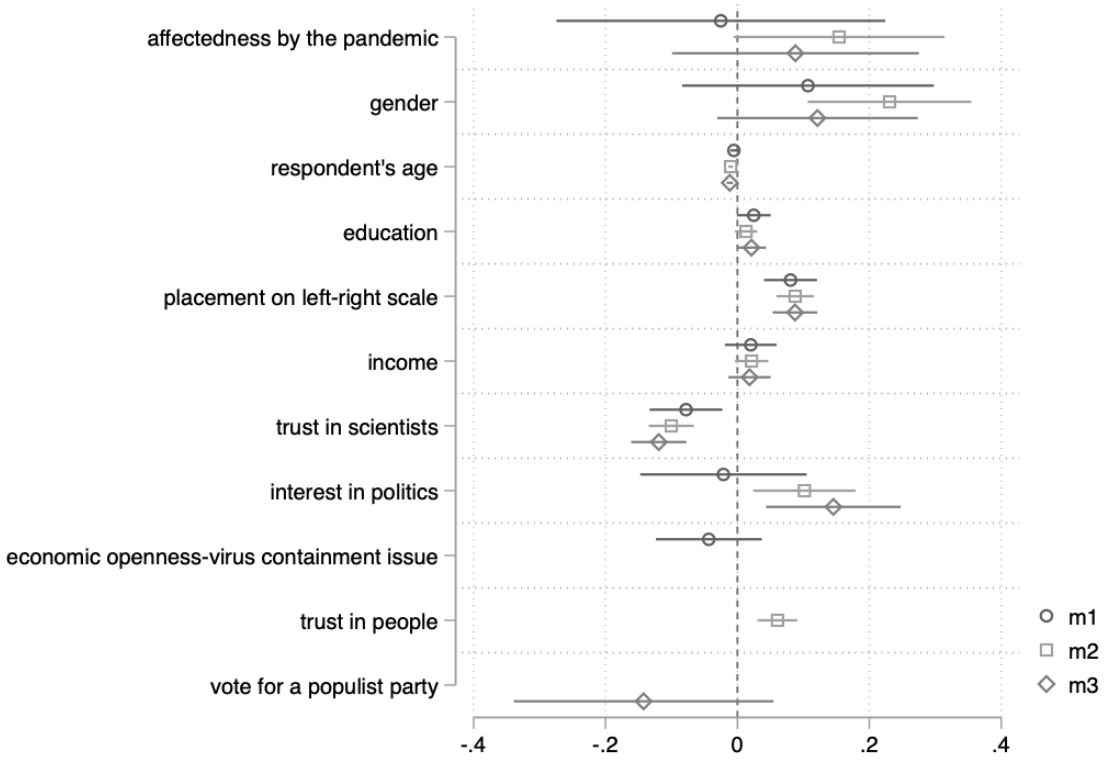
	(0.01)	(0.009)	(0.01)
constant	4.071***	3.357***	3.942***
	(0.48)	(0.24)	(0.32)
R-squared	0.03	0.05	0.05
Number of observations	3,338	8,123	5,435

*p<0.1; ** p<0.05; *** p<0.01

The possibility that some of the citizens left their job to avoid working, rather than being affected by the pandemic, cannot be excluded by these results.

Shifting our focus to our next hypothesis, Table 5 presents the results of three models that explore the determinants of individuals' policy preferences for dealing with the pandemic. For ease of interpretation, Figure 2 plots the coefficients of our independent variables. The first and the third models also test variations of the mobilization hypothesis, while the second model includes a variable for respondents' general trust in people. We note here the reduced explained variance and the already mentioned small sample size (something to be addressed in revisions of the paper). The full model predicting policy preferences with country dummies can be consulted in Table A4 of the Appendix.

Figure 3: Coefficient plots at the 95% level of significance



One result that immediately stands out is that those who were negatively affected by the pandemic do not significantly differ in their policy preferences from the respondents who did not declare any adverse consequences. Our dummy *affected by the pandemic* fails to reach statistical significance in any of the three models. Moreover, it is inconsistently signed, which further suggests that this result is not robust to different model specifications. Therefore, the results did not lend support to our hypothesis about the structural determinants of European citizens' policy preferences during the pandemic.

In contrast, two of the most significant predictors of individuals' policy preferences for dealing with the pandemic are attitudinal: ideological orientation and trust in scientists. Right-leaning respondents were more likely to prioritize economic activity than their left-leaning counterparts in all three models. The size of the effect is relatively modest: moving from a center-left (4) to a center-right (7) position on the ideological scale results in a quarter-of-a-point shift in favor of the economy. The effect of trust in scientists is slightly larger and in the opposite direction: greater trust (moving from 3 to 8) is associated with a stronger (by about 0.5 points) preference for prioritizing public health.

The results also fail to lend support to the mobilization hypothesis. Although the effect of the position of respondents' preferred party is signed in the expected direction (the supporters of parties that prioritized economic openness were more likely to prioritize economic activity), it does not reach standard levels of statistical significance. In contrast, populist voters were more likely to prioritize public health, but this effect also comes out insignificant. Therefore, our results are not consistent with the mobilization hypothesis.

As expected, respondents who believed that people could be trusted were more likely to prioritize economic activity that those who believed that people could not be trusted (and consequently preferred policies that protect public health). The result is highly statistically significant at the 1% level.

The effects of our controls are largely in line with our expectations. Being most vulnerable to complications from Covid-19, older people naturally favoured the policies designed to protect the population from further contagion. The effect is highly significant but relatively modest in magnitude – across the different specifications, 70-year-olds were between a quarter and half a point more in favour of containment policies than 20-year-olds. Gender is a highly statistically significant predictor of policy preferences in model 2, with men being much more likely to favour economic activity than women, but fails to reach statistical significance in models 1 and 3. The effects of education and income are not consistent across the three models: income is weakly significant in model 2, while education is weakly significant in models 1 and 3.

Table 6: Determinants of European citizens' closeness to populist parties (logit model)

	Model without country dummies
affected by the pandemic	0.173*
	(0.10)
ideological position	0.281***
	(0.02)
trust in scientists	-0.115***
	(0.02)
income	-0.079***
	(0.02)
education	-0.018
	(0.01)
interest in politics	0.110**
	(0.05)
male	-0.289***
	(0.08)
age	-0.008***
	(0.002)
constant	-0.693**
	(0.31)
Pseudo R^2	0.294
Number of observations	7,637

*p<0.1; ** p<0.05; *** p<0.01

Interestingly, higher levels of education and income are associated with a preference for economic activity. Finally, the effect of political interest also is inconsistent: the coefficient is negatively signed in model 1 and positively signed in models 2 and 3, where it is also statistically significant: the respondents who declared being very interested in politics were more likely to prefer policies promoting economic activity. This result is unsurprising given the widely reported devastating effects of the pandemic.

Finally, Table 6 presents the determinants of European citizens' attachment to populist parties. As a reminder, the dependent variable in this analysis is populist closeness coded as a dummy variable, which equals 1 when the respondent declared that they felt closer to a populist party and 0 when they indicated that they were attached to a non-populist party. The results show that those affected by the pandemic were more

likely to mark that they felt closer to a populist party than to any other political party, but the effect barely reaches statistical significance at the 10% level. Once again, the two attitudinal variables – ideological position and trust in scientists – are highly significant predictors of the dependent variable. Right-leaning responders were significantly more likely to declare closeness to a populist party, while respondents who trusted scientists were less likely to do so. Income also reaches the highest levels of statistical significance: more well-to-do survey takers were less likely to sway in a populist direction. Surprisingly, while signed in the expected direction, education comes out insignificant. Populist sympathizers also tend to be more interested in politics, male, and younger.

Conclusion: Towards a material reordering of the European cleavage structure?

Our paper has shown how economic sectors were affected by the asymmetric economic impact of the Covid-19 pandemic, and explained how this "affectedness" interacted with other political factors in defining policy preferences over Covid-19 mitigation measures. Its distinct contribution stems from its focus on a structural approach, based on a novel conceptualization of affectedness as defined by two concepts: the essentiality and physicality of economic activities. It contributes to the broad scholarly debate on the politics of Covid-19, which tends to favour towards micro-level approaches that explain individuals' preferences based on pre-existing characteristics (e.g. trust explains the rally-around-the flag effect). We elaborate and test a number of hypotheses through quantitative models that use EES attitudinal and occupational data and party data (CHES and PopuList) from 17 European countries.

Our results can be summarized in three groups of macro-findings. First, individuals' nature of employment, as categorized in our affectedness typology, shaped their likelihood of experiencing any work-related adverse effects of the pandemic. Age and education also significantly predicted the probability of being economically affected by Covid-19, albeit in a counterintuitive manner. Second, citizens who were negatively affected by the pandemic do not significantly differ in their policy preferences from those who did not suffer economic consequences. We therefore fail to lend support to the hypothesis about the structural determinants of European citizens' policy preferences during the pandemic. Instead, two of the most significant predictors of individuals' policy preferences for dealing with the pandemic are attitudinal: ideological orientation and trust in scientists. Third, we find a weak but significant alignment between pandemic affectedness and identification with populist parties, which suggests that the Covid-19 emergency at least partially overlaps with the "winners–losers" fault line (Hutter and Kriesi 2019), which emerged from previous crises. All things considered, the European

cleavage structure does not seem to have witnessed a substantial reordering towards materialism, but rather a confirmation of pre-existing trends.

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Appendices

Appendix 1: Classification and coding of economic activities

Nacer2	Economic activity	Essentiality	Physicality	Affectedness
1	Crop and animal production, hunting and related service activities	1	1	2
2	Forestry and logging	0	1	1
3	Fishing and aquaculture	1	1	2
5	Mining of coal and lignite	1	1	2
6	Extraction of crude petroleum and natural gas	1	1	2
7	Mining of metal ores	0	1	1
8	Other mining and quarrying	0	1	1
9	Mining support service activities	0	1	1
10	Manufacture of food products	1	1	2
11	Manufacture of beverages	1	1	2
12	Manufacture of tobacco products	0	1	1
13	Manufacture of textiles	0	1	1
14	Manufacture of wearing apparel	0	1	1
15	Manufacture of leather and related products	0	1	1
16	Manufacture of wood and of products of wood and cork, except furniture; manufacture of articles of straw and plaiting ma	0	1	1
17	Manufacture of paper and paper products	1	1	2
18	Printing and reproduction of recorded media	0	1	1
19	Manufacture of coke and refined petroleum products	1	1	2
20	Manufacture of chemicals and chemical products	1	1	2
21	Manufacture of basic pharmaceutical products and pharmaceutical preparations	1	1	2
22	Manufacture of rubber and plastic products	1	1	2
23	Manufacture of other non-metallic mineral products	0	1	1
24	Manufacture of basic metals	1	1	2

25	Manufacture of fabricated metal products, except machinery and equipment	1	1	2
26	Manufacture of computer, electronic and optical products	0	1	1
27	Manufacture of electrical equipment	0	1	1
28	Manufacture of machinery and equipment n.e.c.	0	1	1
29	Manufacture of motor vehicles, trailers and semi-trailers	0	1	1
30	Manufacture of other transport equipment	0	1	1
31	Manufacture of furniture	0	1	1
32	Other manufacturing	0	1	1
33	Repair and installation of machinery and equipment	0	1	1
35	Electricity, gas, steam and air conditioning supply	1	1	2
36	Water collection, treatment and supply	1	1	2
37	Sewerage	1	1	2
38	Waste collection, treatment and disposal activities; materials recovery	1	1	2
39	Remediation activities and other waste management services	0	1	1
41	Construction of buildings	0	1	1
42	Civil engineering	0	1	1
43	Specialised construction activities	0	1	1
45	Wholesale and retail trade and repair of motor vehicles and motorcycles	0	1	1
46	Wholesale trade, except of motor vehicles and motorcycles	1	1	2
47	Retail trade, except of motor vehicles and motorcycles	1	1	2
49	Land transport and transport via pipelines	1	1	2
50	Water transport	1	1	2
51	Air transport	1	1	2
52	Warehousing and support activities for transportation	1	1	2
53	Postal and courier activities	1	1	2
55	Accommodation	0	1	1
56	Food and beverage service activities	0	1	1
58	Publishing activities	0	0	3

59	Motion picture, video and television programme production, sound recording and music publishing activities	0	0	3
60	Programming and broadcasting activities	0	0	3
61	Telecommunications	1	1	2
62	Computer programming, consultancy and related activities	0	0	3
63	Information service activities	1	0	4
64	Financial service activities, except insurance and pension funding	0	0	3
65	Insurance, reinsurance and pension funding, except compulsory social security	0	0	3
66	Activities auxiliary to financial services and insurance activities	0	0	3
68	Real estate activities	0	1	1
69	Legal and accounting activities	1	0	4
70	Activities of head offices; management consultancy activities	0	0	3
71	Architectural and engineering activities; technical testing and analysis	0	1	1
72	Scientific research and development	0	0	3
73	Advertising and market research	0	0	3
74	Other professional, scientific and technical activities	0	0	3
75	Veterinary activities	1	1	2
77	Rental and leasing activities	0	1	1
78	Employment activities	0	0	3
79	Travel agency, tour operator and other reservation service and related activities	0	1	1
80	Security and investigation activities	1	1	2
81	Services to buildings and landscape activities	0	1	1
82	Office administrative, office support and other business support activities	0	0	3
84	Public administration and defense; compulsory social security	1	0	4
85	Education	0	0	3
86	Human health activities	1	1	2

87	Residential care activities	1	1	2
88	Social work activities without accommodation	1	1	2
90	Creative, arts and entertainment activities	0	1	1
91	Libraries, archives, museums and other cultural activities	0	1	1
92	Gambling and betting activities	0	0	3
93	Sports activities and amusement and recreation activities	0	1	1
94	Activities of membership organisations	0	1	1
95	Repair of computers and personal and household goods	0	1	1
96	Other personal service activities	0	1	1
97	Activities of households as employers of domestic personnel	0	1	1
98	Undifferentiated goods- and services-producing activities of private households for own use	0	1	1
99	Activities of extraterritorial organisations and bodies	0	0	3

Legend: Essentiality (yes=1; no=0); physicality (high=1; low=0).

Note: Activity number (first column) according to ESS dataset. Total number of most affected activities (score 1): 30 (34.1 per cent out of 88 activities). Total number of highly affected activities (score 2): 29 (44.3 per cent). Total number of low affected activities (score 3): 3 (3.4 per cent). Total number of least affected activities (score 4): 16 (18.2 per cent).

Sources: ATECO, Eurostat.

Appendix 2: List of parties coded as populist

Bulgaria	Citizens for a European Development of Bulgaria (GERB)
	There is such a people (ITN)
	VMRO
	National Front for the Salvation of Bulgaria (NFSB)-Volya (Will)
	Ataka
	Vazrazhdane
Croatia	Most
Czechia	ANO 2011
	Svoboda a prima demokracie (SPD)
Estonia	Eesti Konservatiivne Rahvaerakond (EKRE)
Finland	True Finns
	Blue Reform (SIN)
France	La France Insoumise (FI)
	Debout la France (DLF)
	Front National (FN)
Hungary	Fidesz
	Jobbik
Lithuania	The Way of Courage
	Centre Party-Nationalists
	Labour Party
Slovenia	The Left (Levica)
	List of Marjan Sarec (Lista Marjana Sarca)
	Slovenian Democratic Party (Slovenska Demokratska Stranka)
	Slovenian National Party (Slovenska Nacionalna Stranka)
Slovakia	Smer-SD
	Ordinary People Obycajni Ludia a Nezavisle Osobnosti (OLaNO)

	We Are Family (SME Rodina)
Switzerland	Swiss People's Party (SVP)
	Federal Democratic Union (EDU-UDF)
	Ticino League (LdT)
Greece	Left (ΣΥΡΙΖΑ)
	Greek Solution (Ελληνική Λύση)
	European Realistic Disobedience Front (MeRa25/ΜέΡΑ25)
Iceland	People's Party (Flokk fólksins)
	Centre Party (Miðflokkinn)
Italy	5 Star Movement (Movimento 5 Stelle)
	Lega
	Forza Italia
	Fratelli d'Italia con Giorgia Meloni
The Netherlands	Party for Freedom (PVV)
	Socialist Party (SP)
	Forum for Democracy (FvD)
Norway	Progress Party Fremskrittspartiet (FrP)
	Coastal Party Kystpartiet (Kp)
Portugal	Enough CHEGA!

Appendix 3: Full model predicting affectedness with country dummies

	Model 1 *with country dummies*
Non-essential, non-physical	0.361***
	(0.09)
Essential, physical	0.403***
	(0.08)
Non-essential, physical	0.887***
	(0.09)
Male	-0.031
	(0.04)
Age	-0.036***
	(0.001)
Education	0.018***
	(0.005)
Bulgaria	0.743***
	(0.11)
Czechia	0.914***
	(0.10)
Estonia	0.193*
	(0.11)
Finland	-0.209*
	(0.12)
Greece	1.350***
	(0.10)
Croatia	-0.540***
	(0.13)
Hungary	0.323***
	(0.11)
Iceland	0.282**
	(0.13)
Italy	0.713***
	(0.10)
Lithuania	0.543***
	(0.12)
the Netherlands	-0.104

	(0.11)
Norway	-0.044
	(0.14)
Portugal	0.916***
	(0.10)
Slovenia	0.493***
	(0.11)
Slovakia	0.759***
	(0.12)
constant	-0.802***
	(0.15)
Pseudo R-squared	0.10
Number of observations	24,307

Appendix 4: Full model predicting policy preferences with country dummies

	Model 1	*Model 2*	*Model 3*
Affected by the pandemic	-0.025	0.154	0.008
	(0.13)	(0.08)	(0.09)
Left-right scale	0.081***	0.088***	0.087***
	(0.02)	(0.01)	(0.02)
Income	0.020	0.022*	0.018
	(0.02)	(0.01)	(0.02)
Trust in scientists	-0.078***	-0.100***	-0.119***
	(0.03)	(0.02)	(0.02)
Political interest	-0.021	0.102**	0.145***
	(0.06)	(0.04)	(0.05)
Party position:	-0.043		
economic openness vs.	(0.04)		
virus containment			
Trust in people		0.061***	
		(0.02)	
Populist vote			-0.142
			(0.10)
Age	-0.005*	-0.010***	-0.011***
	(0.003)	(0.002)	(0.002)
Male	0.107	0.231***	0.121
	(0.10)	(0.06)	(0.08)
Education	0.025*	0.013	0.021*
	(0.01)	(0.009)	(0.01)
Bulgaria	-0.188	0.265*	0.145
	(0.21)	(0.15)	(0.20)
Finland	-0.284	-0.229*	-0.317*
	(0.22)	(0.13)	(0.17)
Greece	-0.336	-0.136	-0.342*
	(0.28)	(0.14)	(0.18)
Croatia	-0.293	0.352**	0.186
	(0.30)	(0.16)	(0.21)
Hungary	-0.272	0.116	0.024
	(0.22)	(0.14)	(0.18)

Iceland	omitted	-0.911***	-1.094***
		(0.15)	(0.18)
Italy	-0.284	0.110	-0.020
	(0.23)	(0.14)	(0.18)
Lithuania	0.135	0.335**	0.115
	(0.29)	(0.17)	(0.21)
the Netherlands	0.009	0.273**	0.235
	(0.19)	(0.13)	(0.16)
Norway	-0.511**	-0.448***	-0.587***
	(0.25)	(0.17)	(0.21)
Portugal	-0.695***	-0.420***	-0.716***
	(0.23)	(0.15)	(0.19)
Slovenia	-0.278	-0.169	-0.314
	(0.28)	(0.15)	(0.21)
Slovakia	-0.246	-0.285	-0.493**
	(0.29)	(0.18)	(0.21)
Constant	4.071***	3.357***	3.942***
	(0.48)	(0.24)	(0.32)
Pseudo R-squared	0.03	0.05	0.05
Number of observations	3,338	8,123	5,435