

Messaging and the Political Symbolism of the Face Mask

Opinion is one of the most basic forms of the expression of political ideology. Opinions can be expressed verbally or through actions. In the case of the COVID-19 pandemic, a particularly perplexing issue in the United States involved the development of polarized opinions toward the act of wearing a mask. In the spring of 2020, public health officials in the United States issued new guidance about the use of facial coverings to mitigate the spread of COVID-19 (in February of 2020, the CDC advised against using masks. Then, on April 3, the CDC issued new recommendation to wear a facial covering due to findings indicating asymptomatic individuals could be carriers of COVID-19.)

Despite the updated, science-based recommendations, public response quickly became divided. The use of masks became an unlikely symbolic expression of political ideology. Why did use of the mask—a public health recommendation—become an expression of political ideology in the U.S.?

This analysis examines messaging about the use of masks to better understand their development as a political symbol, and the influence of messaging on public attitudes. Specifically, this analysis examines the role of messaging from President Donald Trump in influencing public response to recommendations related to masks during the spring and summer of 2020. The analysis finds the president's messaging about masks reinforced preexisting ideological division in the U.S. In addition, this analysis asserts an understanding of political ideology is important in predicting responses to public health recommendations.

Partisan divisions are often a function ideological division. Thus, a fuller understanding of political ideology is useful in understanding partisan division, and in explaining the role of messaging in influencing attitudes and opinions. Political ideology provides a framework for

understanding public opinion. A wide body of research across multiple disciplines has analyzed the concept of ideology and defined it as a broad concept. For example, scholars note ideology has varying definitions, and can incorporate a variety of meanings.¹ Ideology, as a general term, refers to the sum of values and attitudes. Political ideology refers to the sum of values and attitudes related to politics and government. It is described as a deep psychological attachment because it is rooted in values.² Values are deeply held beliefs that have a significant influence on political predispositions.³ General values inform specific attitudes, and opinions are the expression of these attitudes. The general values that contribute to political ideology inform attitudes about specific government actions and policies. In the current context, this implies individuals' general values about government will inform their specific attitudes toward government response to COVID-19. Thus, understanding values and attitudes is important to understanding political ideology, and its role in explaining public response to government initiatives.

Scholarship has long recognized the significance of socialization in explaining the development of values and political ideology.⁴ Ideological views about the role of government develop across time. The values that contribute to attitudes about the proper role of government are largely the result of learning.⁵ Researchers posit socialization is a lifelong process.⁶ Political socialization refers to the long process of “largely informal learning that almost everyone experiences throughout life as a consequence of interactions with parents, family, friends, neighbors, peers, colleagues, and so forth.”⁷

Agents of socialization are the people, processes, and institutions that influence each individual, and contribute to the evolution of values. Research has shown agents of socialization have a demonstrated influence on the development of political ideology.⁸ Since agents of

socialization influence attitudes, it follows agents of socialization influence attitudes about COVID-19. President Trump represents an agent of socialization whose messages reinforced preexisting attitudes. The news media, and how media portrayed the president's messaging, also represents a relevant agent of socialization. Studies have long found news media can have a strong influence on political attitudes.⁹ Attitudes are influenced by a variety of factors, including salience. How does issue salience influence attitudes? Salience refers to personal importance.¹⁰ Individuals are more likely to have a strong view about a policy if the policy affects their lives personally.¹¹ COVID-19 is a highly transmissible virus that contributed to hundreds of thousands of deaths in 2020. The virus also led to one of the largest disruptions of the economy in U.S. history. Thus, COVID-19 is arguably the most salient public health and economic issue in a century. Since the virus and its consequences are highly salient, the public should be expected to have strong attitudes toward relevant government initiatives and other related messaging about COVID-19.

Attitudes have both a cognitive and affective component. In other words, attitudes are influenced by both information and emotion. The cognitive component develops from consuming information. It is important to note the information that has a cognitive impact on attitudes can be inaccurate, and information can influence the cognitive component of attitudes whether the information is accurate or inaccurate. The affective component of attitude refers to the emotional component—feelings about a particular issue. The emotional component can be especially influential on attitudes in the context of salient issues. When an individual views a policy as salient, emotional appeals to influence a person's attitude can be quite powerful.¹² Opinions are the expression of attitudes. Public response to recommendations about COVID-19 varied in 2020. Attitudes toward the recommendation to wear a mask, which is described as a

political symbol, are of particular interest to the current analysis. Absent politics, a mask might be best understood as one of a series of interventions and mitigation strategies put forth by public health experts. The mask became a political symbol in the U.S. when the public began to perceive its use as connected to political ideology.

Symbols are useful to understanding political ideology for a variety of reasons. “They represent, in simplified form, complex ideas, reducing them to simple images which convey the complexity they represent.”¹³ Political symbols are as old and diverse as politics.¹⁴ They can be described as an object, person, word, performance, or gesture that represents a political institution, hierarchy, movement, belief, or ideology.¹⁵ Symbols can represent both unity and political division. They can express ideologies of intolerance and even hatred. Symbols can also be active, in that actions can serve as symbols. For example, symbolic action can be viewed as an act of legitimate civil disobedience.

Previous studies have found symbols can be understood in terms of both meaning and manipulation. It is important to emphasize both concepts in order to fully understand the power of symbols in the context of political ideology.¹⁶ Symbols can be manipulated to suit a particular point of view, and they can have more than one meaning. Symbols are better defined as multivocal, meaning they can have different meanings for different groups, particularly when it comes to controversial symbols.¹⁷

Face masks represent a political symbol that may be viewed differently by different groups of people. For some, the decision to not wear a mask might be viewed as an act of civil disobedience. For others, the decision to not wear a mask might be interpreted as part of a culture of individualism, or even narcissism. John Lasch, in his seminal 1979 book, *The Culture of Narcissism* notes, “To live for the moment is the prevailing passion—to live for yourself, not for

your predecessors or posterity.”¹⁸ In 2020, wearing a mask was first described as an action a person could take primarily to protect the community rather than one’s self.¹⁹ Since this public health messaging specifically called on Americans to take actions to protect others, wearing a mask became a symbol attached to the concept of individualism versus empathy. Gill and Angosto-Ferrandez posit when political symbols have multiple meanings, the group that does a better job at controlling the message about the symbol is more likely to have the political advantage.²⁰ The messages of President Trump are important in understanding the multivocal nature of the symbol of the face mask because the president participated in assigning the meaning of the symbol.

The following section examines the president's messaging about masks between April 3 and July 20.²¹ During this period, President Trump presented both verbal messages and other signals to the public about masks. First, an analysis of the president's messaging at the White House Corona Virus Task Force daily briefings is presented. Next, the period between April 3 and July 20 is examined to identify the president's messaging about masks outside the Task Force briefings. Finally, public opinion about the use of masks is analyzed to better understand the relationship between the president's messaging and public attitudes about the use of masks.

The White House Task Force Daily Briefings

The first case of COVID-19 in the U.S. was confirmed January 21, 2020.²² President Trump announced the establishment of the White House Coronavirus Task Force January 29. Twelve individuals were initially appointed to the Task Force.²³ The Task Force was first led by Secretary of Health and Human Services Alex Azar. While there was no public mission statement attributed to the Task Force, the White House Press Secretary office issued a statement January 29, stating President Trump:

Charged the Task Force with leading the United States Government response to the novel 2019 coronavirus and with keeping him apprised of developments. It is composed of subject matter experts from the White House and several United States Government agencies, and it includes some of the Nation's foremost experts on infectious diseases. The Task Force will lead the Administration's efforts to monitor, contain, and mitigate the spread of the virus, while ensuring that the American people have the most accurate and up-to-date health and travel information.²⁴

President Trump tapped Vice President Mike Pence to lead the Task Force February 26, and added four members.²⁵ Five additional members were added during the first week of March, and five members were added May 15.²⁶ Beyond these appointees, other government officials occasionally attended the Task Force briefings to provide information to the public.²⁷ The Task Force began to give daily on-camera briefings March 14, and their briefings were televised live most days between March 16 and April 24.²⁸ The Task Force briefings were most often held in the James S. Brady Press Briefing Room at the White House.²⁹ The length of the briefings varied. The longest briefing, two hours and twenty-three minutes, occurred April 13. The shortest briefing, which was the last daily briefing, held April 24, lasted twenty-one minutes. The structure of the Task Force briefings typically included prepared remarks from the president and members of the Task Force, followed by questions from members of the White House Press Corp and other reporters in attendance. The president began nearly all of the briefings. Next, he typically asked the vice president or other members of the Task Force in attendance to come to the podium to also deliver prepared remarks. The president then returned to the podium and led the call on reporters, who asked questions of both the president and members of the Task Force.

Masks first became relevant to U.S. government response to COVID-19 February 12. The Center for Disease Control advised the public not to wear masks.³⁰ This early advice was based on two factors. First, to protect the supply of masks, particularly N95 masks, among health care workers. This advice accompanied a second factor—limited evidence about the efficacy of

masks in stopping the spread of COVID-19 among symptomatic individuals. Early guidance suggested the better way to stop the spread was to practice social distancing and to encourage symptomatic people to self-quarantine.³¹

The president's early messaging about masks was generally in the context of mask production and ensuring supply for health care workers. President Trump directly addressed public use of masks March 30, in response to a reporter's question about the "roadmap for recovery" issued by former Food and Drug Administration Commissioner Scott Gottlieb, noting the plan recommended public use of masks.³² President Trump responded:

Well, we haven't discussed it to that extent, but it's certainly something we could discuss. We're getting certainly the number of masks that you'd need. We are in the process of talking about things. I saw his suggestion on that. So we'll take a look at it. For a period of time, not forever. I mean, you know, we want our country back. We're not going to be wearing masks forever, but it could be for a short period of time. After we get back into gear, people could—I could see something like that happening for a period of time, but I would hope it would be a very limited period of time. Doctors—they'll come back and say, "for the rest of our lives, we have to wear masks."³³

The president went on to give a lengthy statement about the number of masks being produced and questioned why hospitals in New York City were using so many masks. President Trump's statement, which he first directed at Governor Andrew Cuomo and Mayor Bill de Blasio during the March 29 Task Force briefing, changed the focus from public use of masks to a series of statements about the potentially nefarious misuse of masks in NYC hospitals.³⁴ The next day the president was asked if masks were being preserved for health care workers or if COVID-19 did not transmit primarily through the air. The president first called on White House Coronavirus Response Coordinator, Dr. Deborah Birx, to answer the question, who reemphasized then current guidelines, which focused on mask use by those in infected households. While neither Dr. Birx nor President Trump clarified the risk of airborne transmission, the president added:

And just about masks, you can get a mask, but you could also do—I mean, most people have scarves, and scarves are very good. And they can use a scarf. And we're only talking about a limited period of time. But—and it says in the recommendations, you can use—you can substitute a scarf for a mask. So if people feel that—and I think, you know, some people disagree with the mask for various reasons, and some people don't. But you could wear a scarf. You can do the masks if it makes you feel better. We have no objection to it, and some people recommend it.

The formal release of new guidance about masks took place at the beginning of the Task Force briefing April 3. The president said in his prepared remarks:

And today, also, the CDC is announcing additional steps Americans can take to defend against the transmission of the virus. From recent studies, we know that the transmission from individuals without symptoms is playing a more significant role in the spread of the virus than previously understood. So you don't seem to have symptoms and it still gets transferred.

In light of these studies, the CDC is advising the use of non-medical cloth face covering as an additional voluntary public health measure... So it's voluntary; you don't have to do it. They suggested for a period of time. But this is voluntary. I don't think I'm going to be doing it. So with the masks, it's going to be, really, a voluntary thing. You can do it. You don't have to do it. I'm choosing not to do it, but some people may want to do it, and that's okay. It may be good. Probably will. They're making a recommendation. It's only a recommendation. It's voluntary.³⁵

The president finished his prepared remarks and introduced Vice President Pence, who gave a lengthy and substantive update of the Task Force's progress but did not discuss masks. Rather, the Vice President noted at the end of his statement: "We have available for questions the head of the CDC today to speak about the new guidance on cloth face coverings." The Vice President then introduced Dr. Birx, followed by Secretary Azar, who both delivered substantive prepared remarks. Neither Dr. Birx nor Secretary Azar discussed masks. The president then invited questions from members of the White House Press Corp and other reporters in attendance. The first question asked for clarification about mask policy, and why the president opposed wearing a mask. President Trump responded:

Well, I just don't want to wear one myself. It's a recommendation; they recommend it. I'm feeling good. I just don't want to be doing—I don't know, somehow sitting in the Oval Office behind that beautiful Resolute Desk—the great Resolute Desk—I think wearing a face mask as I greet presidents, prime ministers, dictators, kings, queens, I don't know. Somehow, I don't see it for myself. I just—I just don't. Maybe I'll change my mind, but this will pass and hopefully it'll pass very quickly. Now, with that being said, if somebody wants to—I mean, most people can just make something out of a certain material. So it's very well designated, it's very simple to do. I won't be doing it personally. It's a recommendation. Okay?³⁶

The president asked Surgeon General Jerome Adams if he would like to add more information.

Dr. Adams gave a lengthy statement that included substantive information about the evolution in recommendations about the use of masks. He was the only member of the Task Force who provided information on April 3 about the new guidelines.³⁷ In sum, the April 3 messaging about masks was mixed. The president provided new guidance about the use of masks, and the reason for the new guidance. Yet the information was not emphasized in the prepared remarks delivered by members of the Task Force and was only addressed due to a reporter's question. In addition, the president indicated he would likely not follow the guidance.

President Trump attended all twenty of the Task Force briefings between April 3 and April 24. A content analysis of the Briefings indicates the president included messaging about masks in his prepared remarks during sixteen of the twenty briefings. The amount of attention the president gave to masks in his prepared remarks varied. The president delivered lengthy remarks about masks during six briefings.³⁸ The president delivered brief remarks about masks at nine of the briefings and delivered no remarks about masks at four briefings.³⁹ The content of the president's prepared remarks focused on mask production and distribution, and regularly addressed the federal government's role in producing and distributing masks, and the private companies assisting in this effort.

The president did, in his prepared remarks, briefly reference the public health

recommendation to wear masks April 4, as part of a statement about the delivery of 180 million N95 masks. The president stated, “But we need the masks. We don't want other people getting it, and that's why we're—that's why we're instituting a lot of Defense Production Act, you could call it, retaliations because that's what it is; it's a retaliation.” This messaging suggests the president supported invoking the Defense Production Act for the production and delivery of masks as a form of retaliation against the virus. At the same time, the president’s support of the use of masks as a form of retaliation against the virus was consistently described as voluntary.

The president did not discuss masks in the context of the April 3 public health recommendation in his prepared remarks again until April 22 when he stated, “Wash your hands, avoid close physical contact as much as possible, and wear a face covering when distancing is impractical.” The next day the president stated, in his prepared remarks: “To keep America gaining momentum, every citizen needs to maintain the vigilance. And we all understand that very well; we've gone over it many, many times. This includes practicing good hygiene, maintaining social distance, and the voluntary use of face coverings.” Finally, during his prepared statement on April 24, the last day of the daily Task Force briefing, the president noted in his prepared remarks, “We ask every American to maintain vigilance and hygiene, social distancing, and voluntary use of face coverings.”

The analysis of the president's messaging about masks during his prepared remarks at the Task Force briefings is important to gaining understanding of its potential influence on public attitudes. First, the president addressed masks in most of his prepared remarks. This suggests the president felt it was important to present information to the public about masks. However, the focus of the president's messaging was on production and distribution. Following the April 3 recommendation, the president addressed masks in the context of a public health

recommendation during his prepared remarks on only four occasions; April 4, 22, 23, and 24.

The limited attention given by the president to reinforcing the public health recommendation to wear a mask can be interpreted as mixed messaging.

The White House Task Force Briefings: Questions from Reporters

The president did not reinforce the public health recommendation about masks in most of his prepared remarks during the nineteen briefings following April 3. Members of the White House Press Corp (WHPC), however, did ask questions about the use of masks during the briefings. The questions asked by reporters, and the president's responses, provide an additional opportunity to analyze the president's messaging about the use of masks. The exchanges also provide an opportunity to analyze the tone of the Task Force briefings, and the media's portrayal of the president's messages.

The tone of the briefings was often contentious. The tone is important in explaining public attitudes toward the information. Recall attitudes are influenced by both affective and cognitive components. The information presented at the briefings represents the cognitive component of public attitudes toward masks. The tone of the briefings represents the affective component. The combativeness was especially notable between the president and members of the WHPC. For example, on April 3 President Trump responded to a question about the strategic national stockpile from CBS reporter Weijia Jiang by stating: "It's such a basic simple question and you try and make it sound so bad. You ought to be, you ought to be ashamed, you know what? You ought to be ashamed."

Three days later, April 6, Fox News reporter Kristin Fisher asked the president a question about testing limitations. The president criticized Fisher for "being so horrid in the way you ask a question." Later in the same briefing the president told ABC News Jon Karl "Look, you're a

third-rate reporter. And what you just said is a disgrace, OK?” The president concluded his statement to Karl by adding “You will never make it.”

The president’s negative relationship with the news media preceded the pandemic. In 2017 the president made 320 references to ‘fake news’ in his public remarks.⁴⁰ The president also criticized the news media as an institution. Between Inauguration Day and October 2019, the president referred to the news media as “the enemy of the people” thirty-six times.⁴¹ Research suggests when individuals are faced with information about which they have little understanding, they are most likely to accept information that supports their existing ideological beliefs.⁴² This example of confirmation bias suggests the public’s willingness to accept public health information about a virus few people understood was influenced by their ideological view toward the president and his messaging.

The president received his first question from reporters about the use of masks at the April 6 briefing. The president was asked if members of the Task Force were considering wearing masks, noting the Department of Defense was moving in the direction of wearing masks, and former Vice President Joe Biden was wearing masks. The president responded:

Well, it was voluntary, as I saw it yesterday. And certainly, if they'd want to, I would—I would encourage it. I would have absolutely no problem with that if they wanted. We had a long meeting today. There's good separation. But the task force meets, and I would certainly have absolutely no problem if they wanted to. I think, frankly, it's something, at least for a period of time, where it might be advisable. And you know, it's advisory. And we'll see what happens.

A reporter followed up the question by asking if the First Lady had advised the president to wear a facial covering. The president responded:

No, she feels that way. She feels that—I—I would wear one. I mean, I just—generally, I'm not in a—like, I should—would you like me to wear one right now and answer your question? That would be a little awkward, I guess. But, no, I mean—again, I would wear one if it was—if I thought it was important. She—she thinks—she likes the idea of wearing it, yeah. She does. A lot of people do. Again, it's a recommendation, and I

understand that recommendation and I'm okay with it.

Both statements reinforce the message that masks are recommended. However, the president noted he would only wear one if he thought it was important, and emphasized the recommendation was voluntary. Reporters at the Task Force briefings did not ask the president another question about wearing masks until April 16. This briefing is especially relevant to understanding President Trump's messaging about masks because the focus of the president's prepared statements on April 16 was how to safely reopen the states. The president specifically called on citizens to use “all their weapons in this war” throughout the process of reopening the states. The president then defined these weapons as, “vigorous hygiene, teleworking when possible, staying at home if you feel sick, maintaining social distance, sanitizing commonly used surfaces, and being highly conscious of their surroundings. Those are our weapons, and they're very powerful weapons indeed.”

The president did not include masks in his list of weapons against COVID-19. Not including masks in the list represents mixed messaging about the April 3 public health recommendation. The president went on to discuss masks during the question-and-answer portion of the April 16 meeting in response to a more general question about reopening the states. The president stated:

But we have large sections of the country right now that can start thinking about opening. There'll be some mitigation and they'll keep it going for a period of time—including masks, by the way—in areas that you wouldn't even think. I asked a question today. I said, “Why would they wear masks in Wyoming or Montana or North Dakota?” And that's if somebody should come in from an area that isn't so successful, in terms of what they've done.

The following day, the president responded to a similar question from a reporter with similar language: “That's one of the reasons I was asking Tony, two days ago, about masks. Well, why in Wyoming or Montana would they have to wear masks? Their numbers are very good. The

reason is, if somebody comes from outside—you know, which is very severe. But it's, again—and it's going to be up to them. It's a recommendation, but we'll see.” The president's responses demonstrate his understanding that the reason to wear masks in less populated areas is due to people traveling to less populated areas from areas more impacted by COVID-19. This messaging is consistent with the April 3 recommendation.

On April 20, President Trump was asked a specific question about the influence of his messaging toward masks. C-Span reporter Yamiche Alcindor questioned the president about a family she had recently interviewed, who implied President Trump's views toward the virus had influenced their behavior. Alcindor stated:

They went to a funeral in mid-March, and they said mainly because the President wasn't taking it seriously. He said, “If the President had had a mask on, if he was saying we should stay home, then I would have stayed home. Instead I had family members... I just want to—and he said his family members were sick because they were—they were listening to you. Do you feel like or are you concerned that downplaying the virus maybe—got some people sick?”

The president began his response by stating: “And a lot of people love Trump, right? A lot of people love me. You see them all the time, right? I guess I'm here for a reason, you know? To the best of my knowledge, I won. And I think we're going to win again. I think we're going to win in a landslide. But just so you understand, you're talking about March, right?” The president went on to provide a lengthy response that outlined his administration's efforts prior to March, focusing on the travel bans against China and Europe. The president did not address masks or the impacted family in his response. This messaging can be considered mixed because he did not provide guidance about the public health recommendation to wear a mask.

The president did not respond directly to any question about the recommendation to wear a mask during the remaining three Task Force briefings. It is relevant to note in the weeks following the April 3 briefing, neither the President nor the Vice President wore masks at any

Task Force briefing. The public, when comparing the president's verbal messages with his actions, received mixed messages about masks. Other members of the Task Force, particularly Dr. Birx and Dr. Anthony Fauci, regularly wore masks at the Task Force briefings and at other public events during May, June, and July. The public, when comparing the president's actions with those of other members of the Task Force, received contradictory messaging about masks. The daily briefings ended without notice after April 24.⁴³ The information presented during the Task Force briefings, and the tone of the briefings, are important in lending understanding to what was developing outside the briefings, escalating division in attitudes about the use of masks. The following section analyzes the president's messaging about masks outside the Task Force briefings.

The President's Public Events & Travel

The president attended and spoke at eighty-six events beyond the Task Force briefings between April 3 and the week ending July 25. Appendix A presents a description of the purpose and location of each of the events. Appendix A indicates President Trump appeared on camera with press present at six events in April, fifty-three events in May, twenty-seven events in June, and twenty-nine events between July 1 and July 25. Each public event provided the president an opportunity to reinforce the April 3 public health recommendation to wear a mask. The president publicly wore a facial covering at one of the eighty-six events. The president's decision to not wear a mask represents inconsistent messaging. The president did not travel beyond the White House grounds for the first five weeks following the April 3 recommendation. However, the president hosted sixteen press-attended events at the White House.⁴⁴ The president did not wear a mask at any White House event. The president resumed travel beyond the White House May 9, with a visit to the Lincoln Memorial. The president traveled domestically throughout May, June,

and July. Presidential trips are accompanied and documented by the traveling press corps, and thus present an additional opportunity to examine the president's messaging about masks.

Appendix A demonstrates President Trump traveled to twenty-three events beyond the White House between May 9 and July 25.⁴⁵ He traveled to multiple states including Arizona, Pennsylvania, Michigan, Florida, Maine, Texas, New York, Oklahoma, Wisconsin, South Dakota, Florida, and Georgia. The president engaged with and was observed by the media in multiple settings at many events.⁴⁶ Column D of Appendix A demonstrates the president spoke with the press a total of 115 times across the eighty-six events. The president did not wear a mask in public at any event until he wore a mask to Walter Reed Medical Center July 11. The president, by not wearing a mask during 114 of 115 public appearances outside the Task Force briefings, did not model behavior consistent with the April 3 recommendation.

The President's Public Comments

The president's public comments at events outside the briefings contained mixed messaging about the mask recommendation. For example, April 28, five days after the Task Force briefings ceased, the president hosted an event in the East Room to support small businesses and discuss the Paycheck Protection Program.⁴⁷ The president, in asking a small business owner and her family to approach the podium, made a joke about one family member's use of a mask.⁴⁸ The levity by which the president referenced masks can be interpreted as mixed messaging. In addition, those attending the April 28 East Room event did not wear masks, nor did the president, or other administration officials participating in the event. It is also relevant to note that while the Vice President's comments are beyond the scope of the present analysis, the April 28 East Room event took place the same day Vice President Pence toured the Mayo Clinic without wearing a mask. The sum of the president's levity, lack of mask usage in the East Room,

and media attention toward the Vice President's Mayo Clinic trip demonstrate mixed messaging about the April 3 recommendation.

Mixed messaging outside the Task Force briefings continued in May. President Trump visited a Ford plant in Ypsilanti, Michigan May 21. Reporters asked the president why he was not wearing a mask. "I wore one in this back area, but I didn't want to give the press the pleasure of seeing it," replied the president.⁴⁹ The comment can be interpreted as a slight against news media, and a signal that it was more important to the president to prevent media from capturing his image in a mask than to model the April 3 recommendation for the public. The president's contradictory messaging was reinforced four days later when the president criticized his political opponent, former Vice President Joe Biden, via Twitter May 25. President Trump retweeted a post from Fox News's Brit Hume, which showed a photo of then presidential candidate Biden wearing a mask during a war memorial visit. The caption read: "This might help explain why Trump doesn't like to wear a mask in public." The president was asked about the tweet the next day and responded he found it "very unusual" the Vice President had worn a mask outside. "I wasn't criticizing him at all," Trump said of Biden. "Why would I do anything like that?"⁵⁰ The president then asked the reporter if he was being "politically correct" for not removing his mask to ask his question. The president made multiple negative references to Biden's use of his mask in 2020.⁵¹ The president's politicization of the mask contradicted the April 3 recommendation.

President Trump presented messaging consistent with the April 3 recommendation July 1. The president, during an interview with Fox Business was asked why he did not wear mask. The president noted there was less reason for him to wear a mask because he was tested often, as were the people around him. The president went on to emphasize that he was not against masks, stating: "Actually, I had a mask on. I sort of liked the way I looked, okay? I thought it was okay.

It was a dark, black mask, and I thought it looked okay. Looked like the Lone Ranger. But, no, I have no problem with that. I think—and if people feel good about it, they should do it.” The president's positive messaging about the look of masks can be interpreted as reinforcing the April 3 recommendation. However, the president's statement that people should only wear masks if they feel good about contradicted the recommendation.

The president was photographed in a mask during his trip to Walter Reed Medical Center July 11. The president stated, “I think when you’re in a hospital, especially in that particular setting, where you’re talking to a lot of soldiers and people that, in some cases, just got off the operating tables, I think it’s a great thing to wear a mask. I’ve never been against masks, but I do believe they have a time and a place.”⁵² This event is the first time the president was seen publicly in a mask. The president’s messaging during this event reinforced the April 3 recommendation. During the weeks following the trip to Walter Reed, President Trump continued to send messages consistent with the April 3 public health recommendation. July 20 President Trump posted a photograph of himself on Twitter wearing a mask. The president described wearing a mask as patriotic, stating: “We are United in our effort to defeat the Invisible China Virus, and many people say that it is Patriotic to wear a face mask when you can’t socially distance. There is nobody more Patriotic than me, your favorite President!” This message was consistent with the April 3 recommendation.

The previous sections have presented President Trump's messaging about face masks from April 3 through July 20. The president presented mixed messages about the use of masks from the White House, while traveling, via Twitter, and in response to reporters' questions. During this period of time the public developed opinions about the use of masks. States and local units of government made decisions about initiating mask recommendations and mandates. Did

the president's mixed messaging impact public attitudes about the use of facial coverings? The following section analyzes public opinion about the use of masks.

Public Opinion and Masks

Public opinion toward masks can be observed. A variety of polls related to masks support the premise that attitudes about masks are related to political ideology. Table 1 presents public opinion data about attitudes toward masks from April 6 through August 2.⁵³ The data indicate a majority of Americans reported wearing masks beginning in late April, and continued to report mask usage throughout May, June, and July. Reported usage among Americans increased the most between late April and early May.

Table 1: Mask Attitudes and Public Opinion

<u>Polling Period</u>	<u>% Report Wearing Masks by Party Affiliation</u>		
4/ 6 – 4/12	D 61	I 46	R 42
4 /27 – 5/3	D 90	I 78	R 61
5/18 – 5/24	D 96	I 82	R 67
6/8 – 6/14	D 98	I 80	R 67
6/29 – 7/5	D 99	I 83	R 74
7/20 – 8/2	D 99	I 91	R 80

Table 1 also indicates there are significant differences in reported use based on party identity. Party identification refers to the political party with whom an individual identifies. The U.S. has a two-party system, which leads Americans all along the ideological spectrum to choose between the Democratic and Republican parties, or to identify as an Independent. According to Gallup, in 2020, 29 percent of Americans identified as Republican, 30 percent as Democrats, and 39 percent as Independent.⁵⁴

Sixty-one percent of Democrats reported wearing a mask the week following the April 3 public health recommendation. In other words, Democrats were 15 percent more likely to report

wearing a mask than Independents, and 19 percent more likely to report wearing a mask than Republicans in the week following the recommendation. During the two-week period that included the highest percentage increase, there is also marked difference in reported mask usage based on party identification. Ninety percent of Democrats reported using a mask during this period, which represents a 29 percent increase. Independents reported a 32 percent increase during these two weeks, while Republicans reported a 19 percent increase in mask use.

Following the large percentage increase in mask usage among all three groups in early May, the difference in reported usage among the three groups continued. Reported mask usage among Democrats stayed above 95 percent after late May. Usage reported by Independents varied during the remaining period of analysis, with reported usage dipping a bit in mid-June before increasing to 91 percent by early August. Republicans' reported mask usage increased the slowest out of the three groups. Following the increase in early May, reported usage among Republicans stayed below 70 percent until early July, and remained under 75 percent until early August.

Implications

The time period examined in this study is limited. Yet, the months included in the analysis are important to our understanding of the potential influence of the president's messaging on attitudes about mask usage in the U.S. Americans reported differences in mask usage in 2020. The data indicate these differences correlate with party identification: both self-reported Democrats and Independents were significantly more likely to wear a mask than Republicans.

Party identification can be described as the political representation of the deep psychological attachment of political ideology. When party identification is understood as a

manifestation of ideology, it assists in explaining the influence of messaging from political leaders on the cognitive and affective components of public attitudes. The difference in mask behavior between Republicans and non-Republicans suggests the mask became a political symbol.

Attributing a causal relationship between the president's messaging and an individual's decision to wear a mask is beyond the scope of this analysis. However, the data indicate there is something distinct about Republicans' attitudes about masks. The public polling data suggest the president's messaging may have impacted Republicans differently than non-Republicans. The data support the assertion the president's messages reinforced preexisting ideological divisions in the U.S.

The connection between mask usage and attitudes requires ongoing analysis. Different factors may have influenced the reasons why people wear masks. Major polling organizations have asked about reported public mask usage, each finding similar results.⁵⁵ These surveys provide a significant amount of information documenting differences in mask usage not only by party affiliation, but by age, race and ethnicity, socioeconomic status, and region. In addition to these self-reported results, a recent observational study in the U.S. examined mask behavior among retail shoppers and found gender, age, and region had a statistically significant influence on mask usage.⁵⁶ The regression analysis revealed younger Americans, men, and those from rural areas were less likely to wear a mask than older Americans, women, and those from suburban or urban areas. The authors note, "One of the most interesting findings of the current study is the evidence of drastically different mask-wearing behavior in rural areas compared with urban and suburban shoppers when mask requirements are not in place."⁵⁷ The authors found

suburban and urban shoppers were approximately four times more likely to wear a mask than rural shoppers, despite death rates.

Rural voters are more likely to vote Republican than Democrat. The PEW Research Center reports this trend has increased across the last decade. As of 2018, Republicans had a 16 percent advantage over Democrats among rural voters. The advantage is even more pronounced when controlling for race. The Republican advantage among white rural voters is 24 percent.⁵⁸ A significant implication of these findings is the expectation there will be less mask usage in locations more likely to vote for Republicans. This expectation is further supported by state-level data indicating during 2020 there were differences in levels of mask usage between states with Republican majority legislatures and states with Democratic majority legislatures. For example, The Institute for Health Metrics and Evaluation (IHME) conducted an analysis of mask usage throughout 2020.⁵⁹ Overall, the IHME found an increase in mask usage across the U.S. However, the increase varied in different regions. The IHME results indicate mask usage among states with Republican majority state legislatures increased at a much slower pace than states with Democratic majority state legislatures.

Messaging is a critical part of crafting public health recommendations acceptable to the political ideologies of a population. The recognition that messaging about masks created a political symbol has broad implications. It recognizes public health includes a political component. The response of government and the public to COVID-19 is an example of the intersection of physical science and social science. The data reported indicate an awareness of political ideology can contribute to the understanding of public health experts and others tasked with crafting public health recommendations. Public health officials may find it useful to consider political ideology as an important variable when constructing public health models and

making predictions.

Future analyses might consider the role of messaging on issues beyond the scope of masks. What other COVID-19 public health information might be influenced by inconsistent messaging? For example, does public response toward decisions ranging from the reopening of schools to vaccines similarly mirror the political ideology of the public? What specific impact has messaging about masks had on the public health and economic impact of COVID-19 in the U.S.? The information presented in this analysis indicates understanding the relationship between messaging and political ideology is necessary to predict attitudes toward public health recommendations.

Appendix A – Presidential Events with On-Camera Remarks

Week	Event	Location	No. of On-Camera Remarks
4 – 11	America Cares: Small business relief update Participates in Easter Blessing	Roosevelt Room Oval Office	2
4 – 18	Meeting with recovered COVID-19 patients Remarks celebrating American truckers	Cabinet Room South Lawn	2
4 – 25	Tree planting ceremony Signing Ceremony: HR266	WH Lawn Oval Office	2
5 – 2	On camera news conference Meeting with Florida Governor Remarks on small business: Paycheck Protection Meeting with Louisiana Governor Round table with industry executives Meeting with New Jersey Governor Remarks on protecting U.S. seniors Remarks and departure for Camp David Presidential Recognition Ceremony Announces FDA approval of Remdesivir	Rose Garden Oval Office East Room Oval Office State Dining Room Oval Office East Room South Lawn Blue Room Oval Office	10
5 – 9	Participation in America Together: Returning to work Trip to Honeywell Mask Production Facility: 6*** Signs proclamation in honor of National Nurses Day Meeting with Iowa Governor Meeting with Texas Governor Remarks at White House National Day of Prayer Service Wreath laying ceremony 75th anniversary of VE Day Meeting with Republican members of Congress Meeting with Military Leadership, National Security Team	Lincoln Memorial Phoenix, AZ Oval Office Oval Office Oval Office Rose Garden WW II Memorial State Dining Room Cabinet Room	13
5 – 16	Remarks on COVID-19 testing Meeting with Colorado and North Dakota Governors	Rose Garden Cabinet Room	8

	Trip to Owens & Minor Inc. Distribution Center: 2 Remarks on vaccine development Remarks on U.S. Space Force flag, Armed Forces Day Proclamation Remarks at Hard Work, Heroism, and Hope ceremony Departs White House for Camp David	Allentown, PA Rose Garden Oval Office Rose Garden South Lawn	
5 – 23	White House Opportunity and Revitalization Council Meeting Round table with restaurant executives and industry leaders Remarks on farmers, ranchers, and food supply chain Policy lunch with Republican senators Cabinet meeting Meeting with Arkansas and Kansas Governors Trip to Ford Rawsunville Components Plant: 3 Rolling to Remember Ceremony honoring Veterans and POW/MIA	Cabinet Room State Dining Room Roosevelt Room Hart Senate Office East Room Cabinet Room Ypsilanti, MI Blue Room Balcony	10
5 – 30	Wreath Laying Ceremony at Arlington National Cemetery Memorial Day Ceremony at Fort McHenry National Monument Remarks on protecting seniors with diabetes Signs Executive Order on social media Press Conference Round table with industry executives on reopening 2 Trips to Kennedy Space Center for Space X Mission Launch: 6	Arlington, VA Baltimore, MD Rose Garden Oval Office Rose Garden State Dining Room Merritt Island, FL	12
6 – 6	Remarks in response to killing of George Floyd Leads officials on walk to St. John's Episcopal Church Press Conference Trip to Puritan Medical Products: 2	Rose Garden Washington, D.C. Rose Garden Guilford, ME	5
6 – 13	Trip to Gateway Church for economic recovery round table: 2 Remarks at 2020 West Point Graduation Ceremony	Dallas, TX West Point, NY	3
6 – 20	Round table on “Fighting For America's Seniors” Remarks and Executive Order: Safe Policing for Safe Communities Announces PREVENTS Task Force: Veterans and suicide Round table with Governors on reopening of small businesses Departs White House for Joint Base Andrews Trip to BOK Center for Make America Great Again rally: 2	Cabinet Room Rose Garden East Room State Dining Room South Lawn Tulsa, OK	7
6 – 27	Trip to border wall and Dream City Church: 3 Bilateral meeting with President Duda, Republic of Poland Joint press conference with President Duda Wreath laying ceremony at Korean War Veterans Memorial Trip to Fincantieri Marinette Marine: 3*** Remarks at American Workforce Policy Advisory Board Meeting	Yuma, San Luis, Phoenix, AZ Oval Office Rose Garden Washington, D.C. Marinette, WI East Room	12
7 – 4	Press Conference Remarks at Spirit of America Showcase Trip to Mt. Rushmore 2020 Fireworks Celebration: 3 4 th of July 2020 Salute to America event	Press Briefing Room Grand Foyer Keystone, SD South Lawn	6
7 – 11	Participates in 'National Dialogue to Safely Reopen Schools Joint Declaration with President Obrador, United Mexican States Joint statement with President Obrador, United Mexican States Signs Executive Order: White House Hispanic Prosperity Initiative Trips to Southern Command. Doral Jesus Worship Center: 5	East Room Rose Garden Rose Garden Rose Garden Doral, FL	10

	Trip to Walter Reed Medical Center**	Bethesda, MD	
7 – 18	Participates in round table: positive impact by law enforcement Press Conference Trip to UPS Hapeville Airport Hub: 3 Delivers remarks on rolling back regulations	East Room Rose Garden Atlanta, GA South Lawn	6
7 – 25	Participates in discussion of COVID-19 planning with media Press Conferences: 7/21, 7/22 Remarks on Operation Legend: Combatting violent crime Remarks on MLB Opening Day Delivers remarks on lowering drug prices. Executive Order Presents Presidential Medal of Freedom to Jim Ryun	Oval Office Briefing Room East Room South Lawn South Court Auditorium Blue Room	7
Total	86 Events		115 On-Camera Remarks
* Bolded events are those during which the president made multiple on camera appearances with remarks. ** Events during which the president publicly wore a mask. *** Number of public appearances at an event.			

ENDNOTES

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- ¹⁹ Task Force briefing April 3, 2020. Transcript.
- ²⁰ Gill and Angosto-Ferrandez. 2018: 430.
- ²¹ April 3 is the date the White House Task Force issued a recommendation for the public to wear facial coverings. July 20 is the date President Trump tweeted an image of himself in a mask and called it “patriotic.”
- ²² Date first case of COVID-19 confirmed in the U.S.
- ²³ U.S. Secretary of Health & Human Services Alex Azar, United States Deputy Secretary of State Stephen Biegun, Senior Advisor to the White House Chief of Staff Robert Blair, Acting United States Deputy Secretary of Homeland Security, Director of the National Institute of Allergy and Infectious Diseases Anthony Fauci, Director of the Domestic Policy Council Joe Grogan, Executive Associate Director of the Office of Management and Budget Derek Kan, White House Deputy Chief of Staff for Policy Coordination Chris Liddell, National Security Advisor Robert O'Brien, Deputy National Security Council Advisor Mathew Pottinger, Director of the Centers of Disease Control and Prevention Robert Redfield, Acting Under Secretary of Transportation Policy.
- ²⁴ “Statement from the Press Secretary Regarding the President's Coronavirus Task Force,” Statements & Releases, The White House, updated January 29, 2020, <https://web.archive.org/web/20200303171648/https://www.whitehouse.gov/briefings-statements/statement-press-secretary-regarding-presidents-coronavirus-task-force/>.
- ²⁵ United States Global AIDS Coordinator Deborah Birx, Surgeon General of the United States Jerome Adams, Director of the National Economic Council Larry Kudlow, and Secretary of the Treasury Steven Mnuchin.
- ²⁶ Secretary of Housing and Urban Development Ben Carson, March 1. Director of the Office of Science and Technology Policy Kevin Droegemeier, March 1. Commissioner of Food and Drugs Stephen Hahn, March 1. Administrator of the Centers for Medicare and Medicaid Services Seema Verma, March 2. Secretary of Veterans Affairs Robert Willkie, March 2. Director of the National Institutes of Health Francis Collins, May 15. Administrator of the Health Resources and Services Administration Thomas Engels, May 15. Director for the Center for Biologics

Evaluation and Research Peter Marks, Secretary of Agriculture Sonny Perdue, May 15. Secretary of Labor Eugene Scalia, May 15.

²⁷ FEMA Administrator Pete Gaynor, Assistant Secretary for Health and Coronavirus Testing Coordinator Brett Giroir, Defense Production Act Coordinator Peter Navarro.

²⁸ The Task Force gave five on camera briefings before March 14 (March 2, March 4, March 6, March 9, and March 10). President Trump was present at the briefing on March 9. Briefings were not held March 28, April 11, and April 12. If President Trump did not attend the full briefing, Vice President Pence led the briefings. The Task Force stopped giving daily briefings April 25. The Task Force gave two additional briefings on May 15 and May 22. Future briefings were delivered by the president and did not include members of the Task Force.

²⁹ Briefings were on occasion held in the Rose Garden.

³⁰ “CDC does not currently recommend the use of face masks for the general public. This virus is not spreading in the community,” from “Transcript for CDC Telebriefing: CDC Update on Novel Coronavirus,” Center for Disease Control and Prevention, <https://www.cdc.gov/media/releases/2020/t0212-cdc-telebriefing-transcript.html>.

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³² Task Force briefing March 30, 2020. Transcript.

³³ All of the president’s comments from the Task Force Briefings are sourced from the Task Force transcripts.

³⁴ Task Force briefing March 29 and March 30, 2020. Transcript.

³⁵ Task Force briefing April 3, 2020. Transcript.

³⁶ Task Force briefing April 3, 2020. Transcript.

³⁷ Full comments can be found in the transcript of the April 3, 2020 White House Coronavirus Task Force briefing.

³⁸ For the purpose of this analysis, lengthy is defined as more than five full sentences. The president presented lengthy remarks on April 3, 4, 8, 10, 13, 19, and 23.

³⁹ For the purpose of this analysis brief is defined as five or fewer full sentences. The president presented brief remarks on April 5, 7, 15, 17, 18, 20, 21, 22, and 24. President Trump presented no information about masks in his prepared remarks on April 6, 9, 14, and 16.

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⁴³ President Trump announced the resumption of daily briefings to the press on July 20. During the new set of briefings, the president was the only speaker, addressed multiple policy areas, and neither public health, nor economic advisers were invited to attend or deliver remarks.

⁴⁴ See Appendix A.

⁴⁵ Trips beyond the White House are identified by the bold text.

⁴⁶ See Appendix A

⁴⁷ See Appendix A.

⁴⁸ “‘Put that mask on, the way you had it.’ The president smiled and shook his head, leading some attendees in the room to laugh,” from Robert Mackey, “Trump Jokes about Masks at White House as Pence Refuses to Wear One at Mayo Clinic,” *The Intercept*, updated April 28, 2020, <https://theintercept.com/2020/04/28/trump-mocks-mans-mask-white-house-pence-refuses-wear-one-mayo-clinic/>.

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