1. Title


2. Authors and affiliations and contact emails

Shaun Hargreaves Heap, Professor of Economics, Department of Political Economy, King’s College London, s.hargreavesheap@kcl.ac.uk;
Christel Koop, Associate Professor of Public Policy, Department of Political Economy, King’s College London, christel.koop@kcl.ac.uk;
Konstantinos Matakos, Associate Professor of Economics, Department of Political Economy, King’s College London, konstantinos.matakos@kcl.ac.uk;
Asli Unan, PhD candidate, Department of Political Economy, King’s College London, asli.unan@kcl.ac.uk;
Nina Weber, PhD Candidate, Department of Political Economy, King’s College London, nina.s.weber@kcl.ac.uk

3. Abstract

At the onset of large-scale health crises such as the recent COVID-19 pandemic, the unavailability of reliable medicine-based responses implies that the role of non-pharmaceutical interventions (NPIs) and public health policies are essential in containing the impact to individuals and societies. Understanding the trade-offs that different policies entail and how those are communicated to citizens whose active compliance is asked is of paramount importance. This is because the measures that reduce the peak demands on the healthcare system from coronavirus, like reduced travelling and banning some public events, will have economic costs. Hence, governments face many difficult (and crucial) policy trade-offs in their efforts to stop the COVID-19 pandemic. How much should economic and social life be restricted to prevent transmission? Should these restrictions be targeted at particular groups or applied universally? Should restrictions be enforced or enacted voluntarily? It is well recognised that the success of any policy intervention in this (or any) area depends in part on how well the policy is positioned in these trade-offs to match citizen preferences because this affects compliance (see Department of Health and Social Care 2020). However, little is known about citizen preferences over these possible dimensions and trade-offs of Covid-19 policy. Our study addresses this gap for the UK and US by conducting a unique online conjoint survey experiment in two waves to identify citizen preferences. In particular, we present each respondent with four pairs of randomly constructed policy options (fully randomizing the order/values/sequence of attributes and questions) that vary on seven attributes and ask them which of the two they prefer. We also elicit respondents’ preferences over such policy trade-offs, and we examine how information provision on the economic and public health consequences of possible mitigation strategies affects their position over those trade-offs. We are also exploring citizens’ preferences on how to distribute the induced financial burden across generations and classes. The findings of this study will help understand citizen preferences over the policy trade-offs governments are currently facing and can inform policymaking in dealing with health crises.

4. Data description

We recruit participants using Prolific Academic, an online survey platform. This allows us to access an immediately available representative sample of the UK and US populations. As respondents need to visualize the alternative “policy profiles”, we prefer an online conjoint survey experiment over a telephone-based one. We use minimum quotas for characteristics such as age, gender, region and working status, and adjust our sample using post-stratification weighting. Respondents take about 15 minutes to answer the questions.
5. **JEL codes for the project**
C90, D64, D78, D81, D91, I18,

6. **Keywords**
Covid-19 pandemic, policy trade-offs, citizen preferences, policy implementation, information, intergenerational inequality, survey experiment.