Leaders' pandemic policies engendered varying levels of trust

1 July 2021

As the COVID-19 pandemic exploded across the globe in early 2020, the world's leaders were faced with a flurry of tough moral dilemmas. Should schools and businesses shut down, and if so, for how long? Who should receive scarce resources, such as ventilators, when there wouldn't be enough for everyone? Should people be required to practice contact tracing to control the spread of infection? Should life-saving medicine be held for a country's own citizens or shared with those in greater need?

Some global leaders advocated for a utilitarian approach to these dilemmas: impartially maximizing the greatest good for the greatest number of people, even if that would come at the cost of harming a minority of the population. Utilitarianism, however, is a controversial way of making moral decisions and those who use this approach might not be viewed as trustworthy.

In a new study, Molly Crockett, an associate professor of psychology at Yale, examined whether people trust leaders who make utilitarian decisions during a pandemic. To find out, she and her co-first authors—Yale's Clara Colombatto and the University of Kent's Jim Everett—assembled a multidisciplinary team of 37 international researchers to study people's trust in leaders around the globe. In a series of online experiments conducted as cases surged late in 2020, the team asked nearly 24,000 people in 22 countries whether the endorsement or rejection of utilitarian policies impacted their trust in leaders.

The results, published July 1 in the journal Nature Human Behavior, show people had a nuanced view when judging the policy decisions of leaders. People tended to trust utilitarian leaders who sought to save the most lives around the globe, rather than favoring their own citizens. But they were far less willing to trust those whose policy decisions would sacrifice the well-being of some for the benefit of others.

For instance, a shortage of ventilators led some leaders to propose reserving them for younger people more likely to survive a severe case of COVID-19. People tended to distrust leaders who accepted this form of utilitarianism, known as instrumental harm. However, they bestowed more trust in those who would share scarce medicine in regions globally where it is most needed, an aspect of utilitarianism called impartial beneficence.

The results were consistent across the countries studied, which included Australia, Brazil, Canada, Chile, China, Denmark, France, Germany, India, Israel, Italy, the Kingdom of Saudi Arabia, Mexico, the Netherlands, Norway, Singapore, South Africa, South Korea, Spain, the United Arab Emirates, the United Kingdom, and the United States of America.
These patterns held regardless of whether or not people personally agreed with the leader's policy decision. "People do prefer leaders who agree with them on policies, but even after we control for individual policy preferences, people generally trust leaders who endorse impartial beneficence and distrust leaders who accept instrumental harm," said Colombatto, a Ph.D. student in the Department of Psychology.

Everett concluded, "When communicating during a crisis, leaders should be aware that utilitarian approaches to moral dilemmas can both erode and enhance trust—even when the leaders themselves doesn't have the power to resolve them."

**Pandemic choices: Do you trust leaders who make these?**

Researchers asked almost 24,000 people in 22 countries to read about moral dilemmas leaders faced during the COVID-19 pandemic. Two examples of those tough moral choices are below. After learning about the leaders' decisions, respondents were asked to rate how trustworthy they thought those leaders were, and to make decisions about whether to trust each leader with control of a group's financial resources. Subjects were also asked whether they would vote for a leader who took a particular policy position.

A demonstration of the trust rating survey is available here:

https://yalesurvey.ca1.qualtrics.com/jfe/form/SV_ekzXerwo4NHMzyK

**Medicine Dilemma**

**Non-Utilitarian Leader**

Imagine that the mayor of a major city in your region is arguing that U.S.-made medicine should be given to whoever needs it most, even if that means sending it to other countries.

This mayor said, "COVID-19 is a global pandemic that affects all humans equally. We need to be impartial and send treatment where it can achieve the greatest good."

Average self-reported trust: 4.57 out of 7; votes: 61.07%

**Utilitarian Leader**

Imagine that the mayor of a major city in your region is arguing that U.S.-made medicine should be reserved for treating American citizens.

This mayor said, "We have a right to use our own resources to help our own citizens before everyone else. Other countries can produce their own treatments for COVID-19."

Average self-reported trust: 3.93 out of 7; votes: 38.93%

**Ventilators Dilemma**

**Non-Utilitarian Leader**

Imagine that the mayor of a major city in your region is arguing that doctors should give everyone equal access to COVID treatment.

This mayor said, "It's not our place to choose who lives. Everyone has the same right to receive equal access to treatment, and we cannot abandon our most vulnerable in an effort to save more lives."

Average self-reported trust: 5.41 out of 7; votes: 85.15%

**Utilitarian Leader**

Imagine that the mayor of a major city in your region is arguing that younger and healthier people should be prioritized for COVID treatment.

This mayor said, "We have to think about how we can do the most good with the resources we have, and that means prioritizing those people who have the best chance of recovering and living a long and healthy life."

Average self-reported trust: 2.97 out of 7; votes: 14.85%

**More information: Nature Human Behavior**