

1 **Can correlation between Governor’s party and COVID-19 morbidity be explained by the**
2 **differences in COVID-19 mitigation policies in the states?**

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13 Drs. Dupont, Chirumamilla, and Paras posed questions about our recent research brief
14 “Governor's Party, Policies, and COVID 19 Outcomes: Further Evidence of an Effect” which we
15 are happy to answer here.¹
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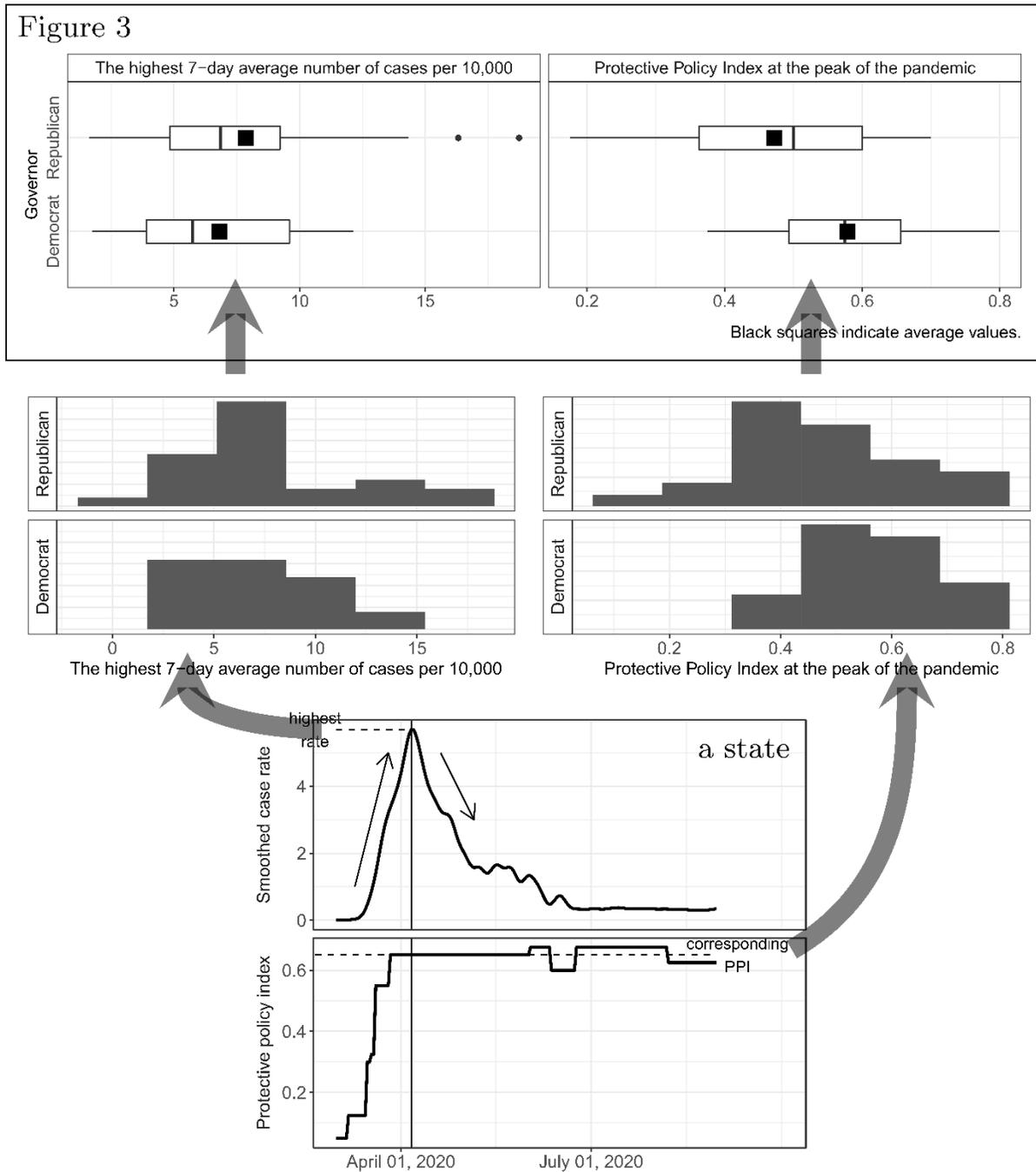
17 Dupont et al. raise the concern that our findings do not establish causality. We would like there
18 to be no confusion: as explicitly stated in our original paper, we do not make a causal claim but
19 rather test hypotheses (what the letter calls “an a priori conclusion”). Building on Neelon et al.’s
20 findings of a correlation between Governor’s party and COVID-19 morbidity and mortality,² we
21 hypothesized that at least a part of this correlation can be explained by the differences in
22 COVID-19 mitigation policies made at the state level. To test this, we conducted an
23 observational study, as an experimental design is neither feasible nor ethical in the study of
24 health policies. To be specific, the analysis included two parts. We quantified the association
25 between policy stringency and the rate of state’s infection spread and, separately, compared
26 policy stringencies achieved in republican and democrat-led states. The brief reports the model-
27 implied difference in the rate of COVID-19 spread that corresponds to the average policy
28 difference.
29

30 The letter also inquires about our measure of case counts. As cited in our research brief, the data
31 source is the Centers for Disease Control and Prevention (reference 8 in the original work). We
32 published the code and data to further facilitate the replication of our analyses.³
33

34 Our measure of mitigation policy stringency, the Protective Policy Index, is constructed for a
35 global sub-national sample entirely from the COVID-19 policies that carry behavioral public
36 health mandates for the populations and captures the level of policy effort by political
37 incumbents to reduce the spread of infection. This effort, policy stringency, substantially varied
38 across American states. The authors of the brief are among the authors of the dataset, as cited in
39 the brief. As the pandemic started less than two years ago, this index is indeed relatively new.

40 Our first peer-reviewed publications based on the data in the first wave of this dataset were in
 41 July and September 2020.^{4,5} The data has been referenced or used by scholars other than
 42 ourselves in over 20 studies with peer reviewed publications in public health, public policy, and
 43 social sciences.

44



45

46 Figure 1. The construction of Figure 3

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48 Regarding Figure 3, we are happy to offer more detail. The figure presents stringency of policies
49 at pandemic peaks which occurred at different times in different states. Such stringency
50 illustrates a government's choice of mitigation effort in the direst situation. We used box plots to
51 show the distributions of these peak stringencies conditional on governor's party.

52

53 We hope these clarifications help and would be glad to continue the discussion in greater depth.
54 Our goals are full transparency and replicability and to start, rather than close, a conversation on
55 the political and institutional determinants of public health outcomes in the pandemic.

56

57 Sincerely,

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59 Olga Shvetsova, PhD, Andrei Zhirnov, PhD, Frank Giannelli, PhD, PA-C, Michael Catalano,
60 MA, and Olivia Catalano, MHA

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62 **References**

63

64 1. Shvetsova O, Zhirnov A, Giannelli FR, Catalano MA, Catalano O. Governor's party, policies,
65 and COVID-19 outcomes: Further evidence of an effect [published online ahead of print, 2021
66 Oct 11]. *Am J Prev Med.* 2021; S0749-3797(21)00506-7.
67 <https://doi.org/10.1016/j.amepre.2021.09.003>

68

69 2. Neelon B, Mutiso F, Mueller NT, Pearce JL, Benjamin-Neelon SE. Associations between
70 governor political affiliation and COVID-19 cases, deaths, and testing in the U.S. *Am J Prev*
71 *Med.* 2021; (61): 115-119. <https://doi.org/10.1016/j.amepre.2021.01.034>

72

73 3. Shvetsova O, Zhirnov A, Giannelli FR, Catalano MA, Catalano O. Replication materials for
74 “Governor's Party, Policies, and COVID-19 Outcomes”.
75 <https://github.com/andreizhirnov/governors-PPI-cases>. doi: 10.5281/zenodo.5781342

76

77 4. Adeel AB, Catalano M, Catalano O, Gibson G, Muftuoglu E, Riggs T, Sezgin MH, Shvetsova
78 O, Tahir N, VanDusky-Allen J, Zhao T. COVID-19 policy response and the rise of the sub-
79 national governments. *Canadian Public Policy.* 2020 Dec 1;46(4):565-84.
80 <https://doi.org/10.3138/cpp.2020-101>

81

82 5. Shvetsova O, Zhirnov A, VanDusky-Allen J, Adeel AB, Catalano MA, Catalano O, Giannelli
83 FR, Muftuoglu E, Riggs T, Sezgin MH, Tahir N, and Zhao T. Institutional origins of protective
84 COVID-19 public health policy responses: Informational and authority redundancies and policy
85 stringency. *Journal of Political Institutions and Political Economy.* 2020; 1(4): 585-613.
86 <http://dx.doi.org/10.1561/113.00000023>