The Credibility of Party Policy Rhetoric

Survey Experimental Evidence

Pablo Fernandez-Vazquez*

*Postdoctoral Fellow, Juan March - Carlos III Institute, Madrid. Email: pablo.fernandezvz@gmail.com. Website: http://pablofernandezvazquez.com

Abstract

This paper analyzes how a party's policy statements affect voters' perceptions of where the party stands on a given issue. I argue that voters do not take a party's statements at face value because these messages can be a strategic tool to win elections. Voters discount popular statements because they may respond to vote-seeking incentives rather than reflect the party's sincere views. Espousing unpopular policies has less instrumental value in obtaining more votes and therefore is more credible. I have tested this argument with a survey experiment fielded in the United Kingdom that exposes respondents to Conservative and Labour Party statements on immigration and the National Health Service. I report evidence that popular statements tend to have a weaker effect on voter perceptions than unpopular ones. This finding suggests a paradox: the more a party needs to change its reputation in order to gain votes, the stronger the voters' skepticism.

Keywords: Voter Updating; Party Communication; Spatial Competition; Survey Experiment; Crowd-Sourced Text Analysis; Great Britain.

Supplementary materials are available in an Online Appendix. Replication files are available in the JOP Data Archive on Dataverse (http://thedata.harvard.edu/dvn/dv/jop). All research involving human subjects was conducted in compliance with relevant laws and was deemed exempt by New York University's University Committee on Activities Involving Human Subjects and by Vanderbilt University's Institutional Review Board.

Politicians spend much of their time making speeches, giving press conferences, and participating in debates. Politicians talk, and some of their messages express views on policy issues. From a normative point of view, this political communication should help citizens make informed voting decisions. Yet, several studies report a weak relationship between changes in the policies that parties propose in their campaigns, as captured in election manifestos, and voter perceptions of party positions (Adams, Ezrow and Somer-Topcu, 2011; Fernandez-Vazquez, 2014).

This paper helps account for this weak correlation. I argue that voters do not always take a party's rhetoric at face value because they consider the party's motivation for issuing that message. Specifically, voters discount party statements that are popular with the public because these statements may respond to a vote-seeking strategy rather than reflect the party's sincere preferences. An unpopular statement, in contrast, is less likely to be motivated by the pursuit of votes and thus voters regard it to be a more credible signal of what the party actually stands for. Hence, this paper highlights how the effectiveness of party rhetoric hinges on its credibility (see also Bawn and Somer-Topcu, 2012).

To test this argument, I have fielded two parallel survey experiments in the United Kingdom (UK). Respondents are exposed to actual statements made by the two main political parties, Conservative and Labour. Each respondent places the party on the issue scale *before* and *after* observing the statement. The experiments focus on the two most important issues in the UK: Immigration and the National Health Service (NHS). On both issues, a policy option is clearly more popular among voters than the other: a tough immigration policy is more popular than a soft one, and a generous funding of the NHS is more popular than spending controls (Source: April 2016 wave of the British Election Internet Panel Study).

I report evidence that a statement espousing the popular position on the issue tends to have a weaker impact on voter perceptions than an unpopular statement. The difference is more pronounced when the party with stronger vote-seeking incentives adopts the popular

position. This suggests a paradox: the more a party needs to change its issue reputation, the more skeptical voters are. This finding helps explain why issue ownership tends to be stable (Petrocik, 1996).

Argument

The seminal work of Downs (1957) highlights how a party's policy statements can be a *strategic* tool to obtain some goal, typically a greater vote share. These policy statements, moreover, are not binding: Once in office, the winning party can implement different policies (Stokes, 2001). Hence, political parties have incentives to campaign on popular policies in order to obtain more votes, even when these stances do not reflect the party's actual views on the issue. As a result, a party's statement may not be an unbiased signal of what the party actually stands for.

This paper argues that, given the strategic nature of party rhetoric, voters do not take a party's statements at face value. Specifically, voters discount popular statements as less credible than unpopular ones. While a popular stance can be part of a vote-seeking strategy, an unpopular statement has less value in obtaining votes and thus becomes a stronger signal of the party's preferences. As a result, popular statements have a weaker effect on voter perceptions of party positions. The argument implies, moreover, that discounting is more pronounced the stronger the party's vote-seeking incentives to change its image on that issue.

This study focuses on two issues for which UK public opinion has a clear leaning: Immigration and the NHS. For these issues voters can easily identify the most popular policy option. On immigration, most voters favor an anti-immigration policy. On a 0 to 10 scale where 0 means "I prefer many fewer immigrants" and 10 "I prefer many more", 0 is the modal voter preference and 3 is the median. With respect to the NHS, the popular option is to increase funding for this service: most voters consider that cuts have gone too far and the

service has worsened.[1] Regarding the two main UK parties, Labour is seen as softer on immigration than the Conservatives and thus faces stronger pressures to change its image. Similarly, the Conservatives are seen as less committed to the NHS than Labour.[2] Consequently, the argument predicts that voter discounting of popular statements should be deeper for the Labour Party on immigration and for the Conservatives on the NHS.

Survey Experiment

Two survey experiments were fielded in August 2015, one focusing on immigration and the other on the NHS. Respondents in both experiments are exposed to a real issue statement made by the Conservative Party and another made by Labour. The statement is either pro or anti-immigration in the immigration experiment, pro or anti-NHS in the NHS one. Respondents place the party on the relevant issue scale *before* and *after* observing the statement. Placements are measured on a 0-10 scale. For immigration, 0 means "close borders for new immigrants" and 10 means "open borders". For the NHS, 0 means "decrease NHS funding" and 10 means "increase NHS funding".

The statement in each treatment condition was selected using crowdsourcing. First, I identified speeches made by prominent politicians from each party and selected excerpts dealing with immigration flows or NHS funding. Second, I followed Benoit et al. (2016) and crowdsourced the coding of these statements to estimate both the position and the clarity

[1] Source: 2015 British Election Study (wave 7). See Online Appendix (section A.1).

[2] The Online Appendix reports the perceived position of Labour and the Conservatives on these issues.

of the message.[3] The statement selected for each condition has a clear meaning and reflects a distinct position on the issue. Table I presents the immigration statements.[4]

Table I: Statements in each treatment condition. Immigration.

	anti-immigration	**pro-immigration**
Conservative	"The number of migrants we are seeing is far higher than our local authorities, our schools and our hospitals can cope with. So many people, so fast, is placing real burdens on our public services."	"Our openness is part of who we are. We should celebrate it. We should never allow anyone to demonise it. We are Great Britain because of immigration, not in spite of it."
Labour	"People want there to be control of immigration. And I agree. That means strengthening our borders, with proper entry and exit checks. And we will introduce those checks."	"Over many centuries Britain has benefited from the ideas and talents of those who have come here from abroad. We need migration to get the top talent and investment we need, for our world class universities to compete internationally, or to meet skills shortages in the NHS."

To capture how respondents interpret each statement, a post-treatment manipulation check asks the participant to place the meaning of the statement on the same 0-10 scale. In addition, the last survey question prompts respondents to identify the popular position on the issue.[5] With this information I create an indicator variable, *popular*, which indicates whether, according to the respondent, the party statement reflects the popular position on that issue.

Both survey experiments were administered to a convenience sample of British adults recruited through CrowdFlower, a MTurk-style platform that can enlist survey respondents and compensate them for their participation.[6] The Online Appendix presents a robustness check ruling out the possibility that the findings of this paper are the product of the non-representative nature of the survey sample.

[3]Full results for the crowdsourced coding are reported in the Online Appendix.

[4]The statements selected for the NHS are reported in section A.2 of the Online Appendix.

[5]The item reads: "Irrespective of your own position, what is the option most British citizens espouse?".

[6]Compared to MTurk, CrowdFlower has a superior capacity to recruit participants outside of the USA.

This survey experiment has an advantage over previous observational studies (e.g. Adams, Ezrow and Somer-Topcu, 2011). The design disentangles the discounting of popular statements from two factors that can also explain why party rhetoric may fail to change perceptions: lack of exposure and lack of understanding. Regarding the first factor, respondents are explicitly encouraged to read the party's statement (Mutz, 2011).[7] Regarding the second, the statements selected for the experiment were previously classified as clear by crowd coders. Relative to the experimental work of Tomz and Van Houweling (2012), moreover, this design maximizes the level of external validity by using actual statements and party labels. Finally, the survey design improves on Lupu (2013) in how it makes it possible to gauge the impact of policy statements controlling for voters' prior perceptions.

Evidence

I estimate the effect of the policy statement on respondents' perceptions of where the party stands by regressing the *post-treatment* perception on the *pre-treatment* perception and the position expressed in the statement.[8] In order to test the argument that respondents discount popular statements, I interact both the statement position and the pre-treatment perception with an indicator that the statement espouses the popular option on that issue:

$$\begin{aligned} \text{post-treatment perception} = \alpha + \beta_1 \,\text{statement} + \beta_2 \,\text{pre-treatment perception} + \\ \beta_3 \,\text{statement} * \text{popular} + \beta_4 \,\text{pre-treatment perception} * \text{popular} + \beta_5 \,\text{popular} + \epsilon \end{aligned} \tag{1}$$

The variable *Statement* indicates the issue position expressed in the statement, as interpreted by the respondent. *Pre-treatment perception* reflects the respondent's opinion *before*

[7] Figure A7 in the Online Appendix reports a screenshot of how the treatment is presented.

[8] The Appendix reports manipulation check and across-subject results.

observing the statement. Logically, the higher the impact of the *Statement*, the lower the coefficient for *Pre-treatment perception* because it captures the stability in the respondent's opinion. *Popular* is a dummy variable defined as follows: For a respondent who thinks that most UK voters are anti-immigration, *Popular* equals 1 if the statement expresses an anti-immigration position and 0 otherwise.[9] For a respondent who believes that most voters are pro-immigration, *Popular* takes the value of 1 if the statement is pro-immigration.[10] The same rule applies to the the NHS. The argument predicts that popular statements will have a weaker impact on perceptions. Hence, the interaction coefficient for *statement * popular* should be negative and that for *pre-treatment perception * popular* should be positive.

Table II reports the regression results. The estimates show that the content of the statement affects the post-treatment perception of the party, particularly for Labour. This is consistent with previous work that shows that policy rhetoric is more effective for opposition parties than governing ones (Bawn and Somer-Topcu, 2012). Most importantly, there is evidence that the magnitude of the impact depends on whether the statement espouses a popular or an unpopular position. For both parties and for both issues, the interaction coefficient *statement * popular* is negative and *pre-treatment perception * popular* is positive. This suggests that a popular message decreases the effect of the statement and reinforces the importance of the previous belief. Interaction coefficients are larger in absolute magnitude and statistically significant when the party faces strong electoral incentives to shift positions: the Labour Party on immigration and the Conservatives on the NHS.[11] To facilitate the interpretation of regression estimates, Figure 1 plots the marginal effect of popular and

[9] If the respondent places the statement at 4 or lower on the 0 to 10 immigration scale.

[10] If the respondent places the statement at at 6 or higher on the 0 to 10 immigration scale.

[11] The p value for all three interaction coefficients marked with the † symbol is 0.06. These p values drop below 0.05 if demographic controls are included in the equation (see table A.7 in the Online Appendix).

unpopular statements. Taken together, these results support the argument that voters are less responsive to vote-seeking party statements.

Table II: The effect of popular vs unpopular statements. Regression results.

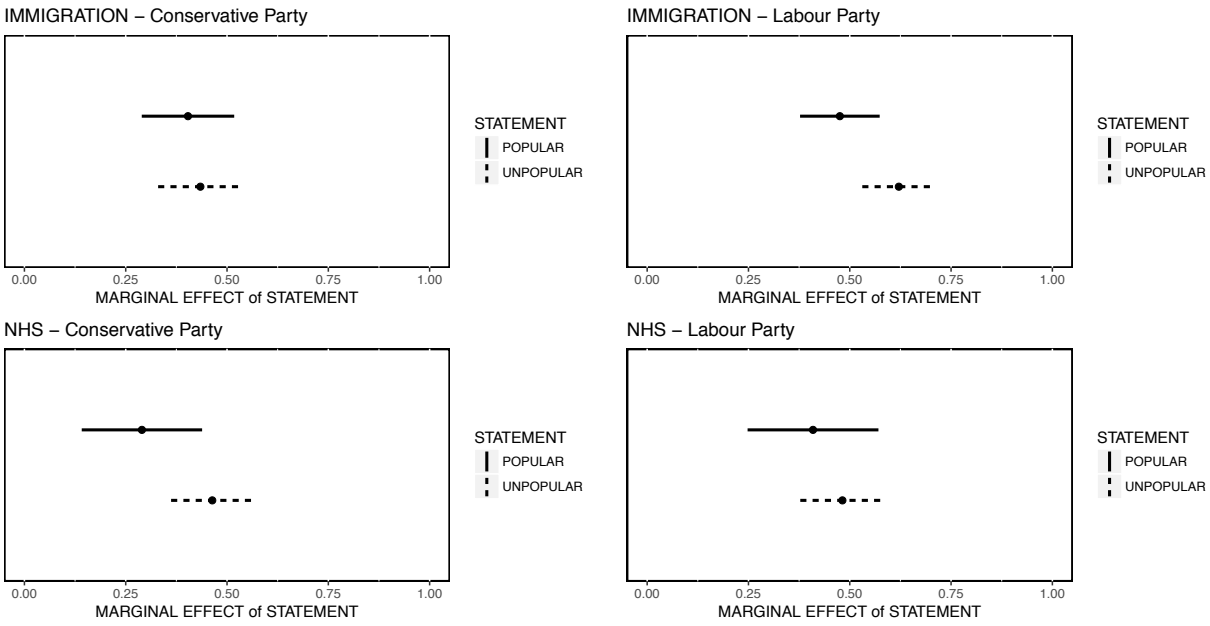
	Immigration		**NHS**	
	CONSERVATIVE	LABOUR	CONSERVATIVE	LABOUR
Statement	0.43 ∗	0.62 ∗	0.46 ∗	0.48 ∗
	(0.1)	(0.1)	(0.1)	(0.1)
Statement X popular	-0.03	-0.15 ∗	-0.17 †	-0.1
	(0.07)	(0.07)	(0.09)	(0.1)
Pre-treatment perception	0.35 ∗	0.37 ∗	0.50 ∗	0.35 ∗
	(0.1)	(0.04)	(0.1)	(0.1)
Pre-treatment perception X popular	0.07	0.13 †	0.13 †	0.06
	(0.08)	(0.07)	(0.07)	(0.08)
popular	-0.16	0.4	0.4	0.4
	(0.5)	(0.5)	(0.7)	(0.8)
Intercept	1 ∗	-0.1	0.1	0.9 †
	(0.4)	(0.4)	(0.2)	(0.5)
R^2	0.44	0.58	0.60	0.49
N	452	452	401	401

Standard errors in parentheses. p-values: †< 10%, ∗< 5%

The discounting of popular statements has consequences for party competition. The vast majority of respondents agree that an anti-immigration policy and a pro-NHS one are the popular options on these issues (86% and 94% of respondents, respectively).[12] Hence, the discounting of popular statements should imply that anti-immigration and pro-NHS statements have a weaker effect on perceptions than pro-immigration or anti-NHS stances. The evidence reported in section A.7 of the Online Appendix confirms this prediction: It shows that anti-immigration and pro-NHS statements (the popular policy options) tend to have a weaker effect on post-treatment perceptions. These differences are statistically significant except for the Conservatives on immigration, a party that is already perceived as

[12]The Online Appendix (section A.6) provides further details.

Figure 1: The marginal effect of a policy statement, depending on whether it is popular or unpopular.



tough on immigration and therefore does not face strong vote-seeking pressures to change its reputation.

The Online Appendix presents several robustness checks. I show that the results obtained with this convenience sample can be extrapolated to the UK population as a whole. I also confirm that the findings are robust to specifying several demographic and attitudinal controls, like party identification. Finally, I rule out the alternative explanation that some statements are discounted not because they espouse popular policies, but because they deviate significantly from the party's issue reputation. All these empirical analyses confirm the empirical patterns reported in the main text.

Discussion

This paper suggests that voters do not take party statements at face value. Popular messages have a weaker effect on perceptions, particularly if the party has vote-seeking incentives

to change its issue position. Hence, voters take into account the party's motivations when reacting to the party's platform. This supports the argument that voters are more responsive to party behavior that is costly (Fortunato and Stevenson, 2013; Bawn and Somer-Topcu, 2012) and helps explain the stability of party reputations (Dalton and McAllister, 2015).

The discounting of popular statements reduces the capacity of political parties to change their reputation on an issue: The stronger the party's electoral pressures to shift positions, the stronger the voters' skepticism. This identifies a mechanism that helps account for the stability of issue ownership over time (Petrocik, 1996): The disadvantaged party is constrained in its capacity to credibly shift its issue reputation towards the position of the advantaged party.

A natural extension of this paper is to analyze whether the choice of issue statements has consequences for voters' opinions about the party's valence characteristics. If voters discount popular statements because they may respond to opportunistic motivations, they may also conclude that a party that promises popular policies is less principled than one that expresses unpopular positions. Building on Tomz and Van Houweling (2012), who have shown that candidates that shift positions obtain worse valence evaluations than consistent ones, the testable prediction would be that shifting stances towards the popular option on an issue is more costly for a party's valence than moving towards an unpopular position. The logic of this argument implies that supporting popular policies can paradoxically reduce the ability of the party to get elected.

Acknowledgements

I am grateful to Eric Dickson, Pat Egan, Jonathan Ladd, Michael Laver, Thomas Meyer, Phil Paolino, Zeynep Somer-Topcu, Lukas Stoetzer, Joshua Tucker, and Simon Weschle, participants in the Perceptions of Party Positions workshop at the University of Texas at

Austin, and participants in seminars at Rice University and the University of Pittsburgh for comments on previous versions of this manuscript. All errors are my own.

References

Adams, James, Lawrence Ezrow and Zeynep Somer-Topcu. 2011. "Is Anybody Listening? Evidence that Voters do not Respond to European Parties' Policy Programmes." *American Journal of Political Science* 55(2):370–382.

Bawn, Kathleen and Zeynep Somer-Topcu. 2012. "Government versus Opposition at the Polls: How Governing Status Affects the Impact of Policy Positions." *American Journal of Political Science* 56(2):433–446.

Benoit, Kenneth, Drew Conway, Benjamin Lauderdale, Michael Laver and Slava Mikhaylov. 2016. "Crowd-sourced Text Analysis." *American Political Science Review* 110(2):278–295.

Dalton, Russell J. and Ian McAllister. 2015. "Random Walk or Planned Excursion? Continuity and Change in the Left-Right Positions of Political Parties." *Comparative Political Studies* 48(6):759–787.

Downs, Anthony. 1957. *An Economic Theory of Democracy*. New York: Harper & Row.

Fernandez-Vazquez, Pablo. 2014. "And Yet It Moves The Effect of Election Platforms on Party Policy Images." *Comparative Political Studies* 47(14):1919–1944.

Fortunato, David and Randolph T. Stevenson. 2013. "Perceptions of Partisan Ideologies: The Effect of Coalition Participation." *American Journal of Political Science* 57(2):459–477.

Lupu, Noam. 2013. "Party Brands and Partisanship: Theory with Evidence from a Survey Experiment in Argentina." *American Journal of Political Science* 57(1):49–64.

Mutz, Diana C. 2011. *Population-Based Survey Experiments.* Princeton University Press.

Petrocik, John R. 1996. "Issue Ownership in Presidential Elections, with a 1980 Case Study." *American Journal of Political Science* 40(3):825–850.

Stokes, Susan C. 2001. *Mandates and Democracy: Neoliberalism by Surprise in Latin America.* Cambridge: Cambridge University Press.

Tomz, Michael and Robert P. Van Houweling. 2012. "Candidate Repositioning." Stanford University and UC Berkeley.

Biographical Information

Pablo Fernandez-Vazquez is a Postdoctoral Fellow at the Juan March - Carlos III Institute. 28903 Getafe (Madrid) Spain.

Online Appendix

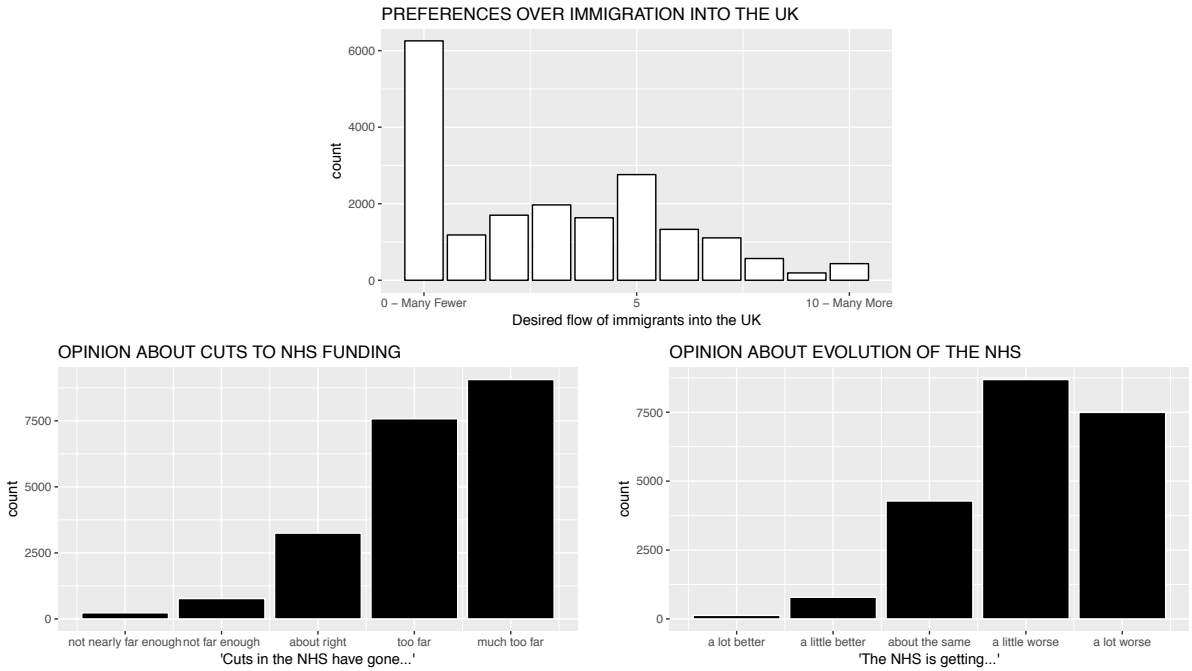
A.1 Public Opinion on Immigration and the NHS: Further Details

Figure A1 describes the distribution of voter preferences in the UK on the issues of immigration and the National Health Service (NHS). The data source in both cases is the seventh wave of the British Election Study Internet Panel.[1] The top row plot refers to public opinion about immigration. On a scale where 0 means that "there should be many fewer" immigrants and 10 means that "there should be many more", the median response is 3, and one third of all participants place themselves on the most extreme anti-immigration position. Indeed, demanding "many fewer" immigrants appears to be the modal option not only in England, but also in Wales and Scotland (Figure A2). Regarding the National Health Service, a vast majority of respondents consider that government funding for the NHS is insufficient: 72% declare that cuts in NHS spending have gone too far and more than 3 in 4 respondents also believe that the NHS has gotten worse (Figure A1, bottom row). Taken together, this evidence indicates that a wide majority of the British public supports immigration restrictions and a more generous funding of the National Health Service.

Figure A3 reports the perceived placement of the Conservative and the Labour parties on both issues. The Conservative Party is seen as tougher on immigration than Labour. This means that the Conservative Party is placed closer to the median voter on this issue than Labour. As a result, the Labour Party faces stronger vote-seeking pressures to change its issue reputation than the Conservatives. The opposite occurs with respect to the issue of funding for the National Health Service. The Labour Party tends to be placed closer to the median voter on this issue, i.e., more commmitted to public funding for this service. Hence,

[1] Data and documentation for Wave 7 of the British Election Study Internet Panel can be found at www.britishelectionstudy.com/data-object/wave-7-of-the-2014-2017-british-election-study-internet-panel/. [Last accessed January 4th 2017]

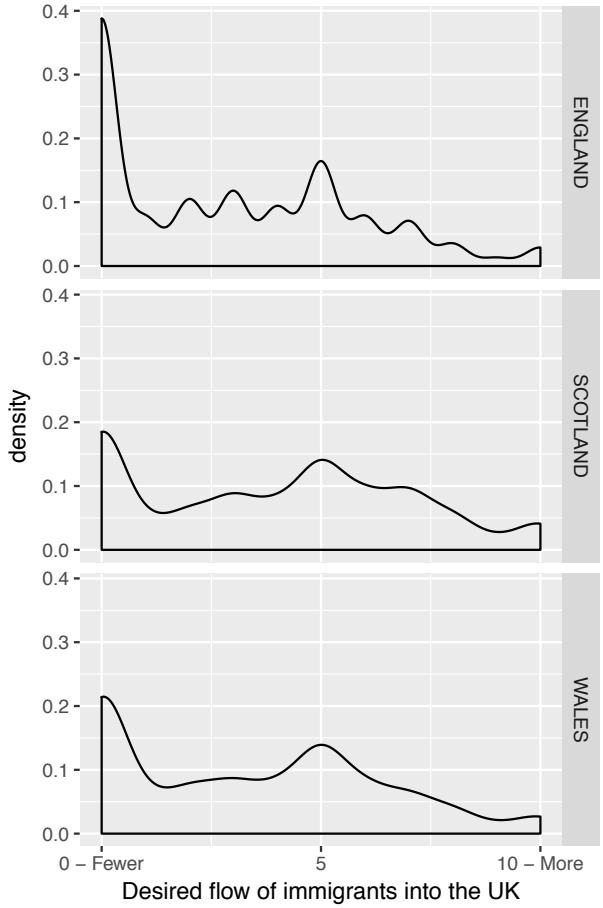
Figure A1: British public opinion on immigration and health care.



NOTES: The data source is the British Election Study Internet Panel, wave 7. Weights have been applied to match a representative sample of the UK public. Figure in the top row refers to preferences about immigration. The two figures in the bottom row regard the National Health Service.

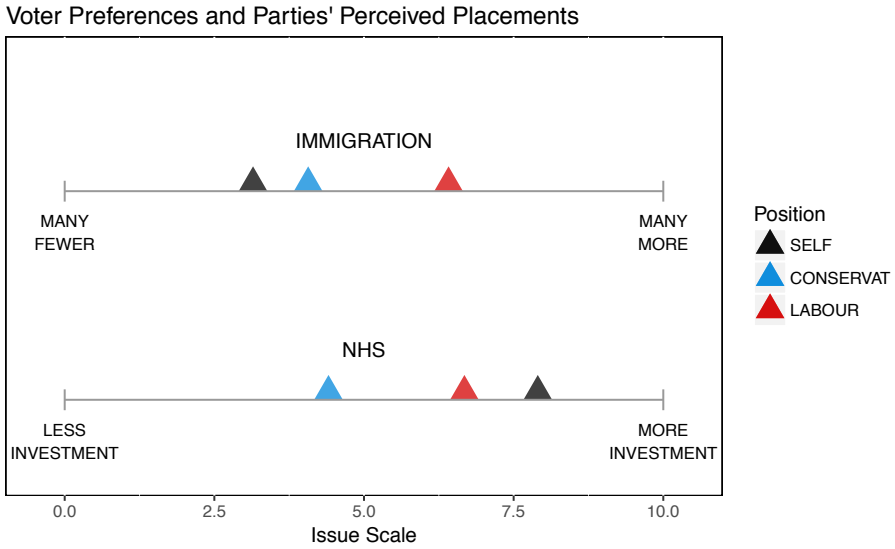
regarding the NHS the Conservative Party has stronger electoral incentives to change its issue image than Labour.

Figure A2: Public opinion on immigration flows into the UK, by country in Great Britain.



NOTES: The data source is the British Election Study Internet Panel, wave 7. Kernel Density Plot.

Figure A3



SOURCE: British Election Study 2015 and Survey Experiment

NOTES: Average respondent self-placement (in black) and average placements of the Conservative (blue) and Labour (red) parties. The source for immigration placements is the seventh wave of te British Election Study Internet Panel. For the NHS, the source is the convenience sample recruited for the survey experiment. These are respondents' perceptions *before* the treatment.

A.2 Crowdsourced Selection of Issue Statements

The procedure to select the party statement in each treatment group has been the following. First, I have identified recent speeches made by prominent members of each party and extracted short statements expressing the party's view on the issue.[2] Second, I have crowdsourced the scaling of these texts in order to identify the appropriate statement for each manipulation. Using crowdsourcing to code political text is an approach that Benoit et al. (2016) have employed with promising results. I have thus employed the same recruiting platform that they use, CrowdFlower, and requested online contributors to complete three tasks: to place several party statements on the 0-10 issue scales above, to evaluate the message's clarity, and to assess whether the message could make the party more popular among voters.

Figure A4 plots how coders interpreted the issue position expressed in each statement coded as well as whether they classified the message as clear or not. The horizontal axis scales the average issue position that coders attribute to the statement, while the vertical dimension indicates the proportion of respondents who consider that the meaning of the message is clear. Each circle represents one of the statements coded. Blue circles refer to messages expressed by Conservative politicians while red circles refer to Labour statements. Filled circles indicate the statements that I selected for each treatment group and each party.

[2]The source for Conservative Party immigration statements is a November 2014 speech given by Prime Minister David Cameron—Cameron November 2014—, while the source of Labour Party immigration statements are speeches made by its then leader Ed Miliband and other members of his shadow cabinet between March 2014 and April 2015. Links can be found here: Miliband December 2014, Miliband April 2015, Hartman March 2014, Cooper November 2014, and Balls September 2014. Regarding funding for the National Health Service, I have collected speeches by the Conservative Prime Minister and his Chancellor of the Exchequer —links available here: Osborne December 2014, Osborne September 2014, Osborne April 2015, Cameron May 2015, and Cameron May 2015—, and statements made by the Labour leader and some shadow cabinet members —links here: Balls September 2014, Burnham September 2014, Miliband September 2014, and Miliband November 2014. Note that these speeches were broadcast to the mass media and therefore are addressed to the general public.

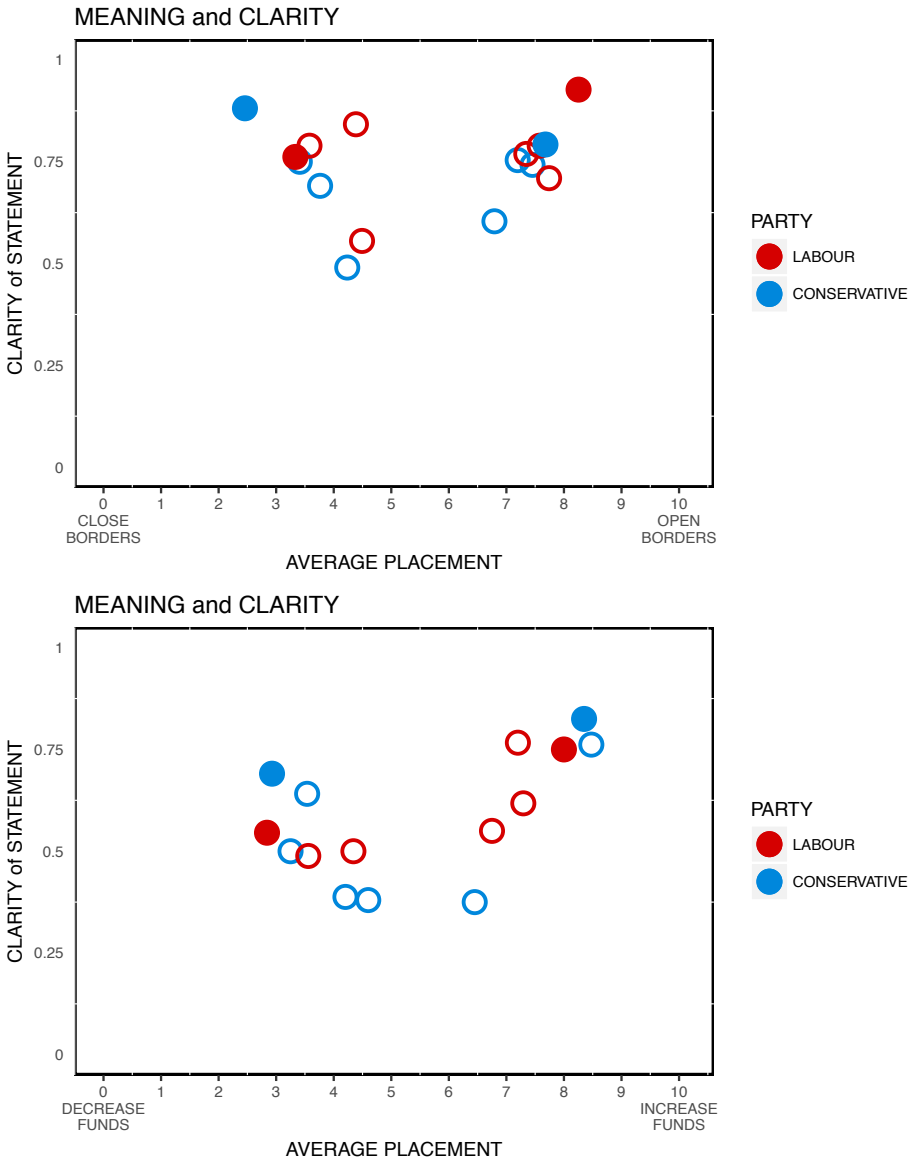
As can be seen in the figure, the statement chosen for each experimental condition represents the most extreme message of all coded statements.[3] On immigration, the leftmost filled circle for each party indicates the statement assigned to the the anti-immigration treatment group. The rightmost filled circle is assigned to the pro-immigration treatment group. Similarly, the leftmost filled NHS statement indicates the statement selected for the anti-NHS condition and the rightmost filled circle the one for the pro-NHS treatment group.[4] This selection criterion ensures that each party's pair of statements reflects distinct positions on each issue. Selected statements also have a clear meaning for most coders.

Figure A5 provides additional information. It plots the issue position attributed to each coded statement and the proportion of coders who consider that the statement "can make the party more *popular* among voters". Again, the two filled circles for each party indicate the statements selected for each treatment group. This plot shows that there is a strong relationship between the issue position expressed in the statement and the probability that it is perceived as electorally beneficial: crowd coders tend to perceive anti-immigration statements as more popular than pro-immigration ones, and the same happens for pro-NHS statements relative to anti-NHS ones. Table A1 displays the text of the selected manipulation statements.

[3]There is one exception, the pro-NHS Conservative statement: there is another message with a slightly more extreme meaning, but it was not considered to be clear enough and therefore I decided not to use it.

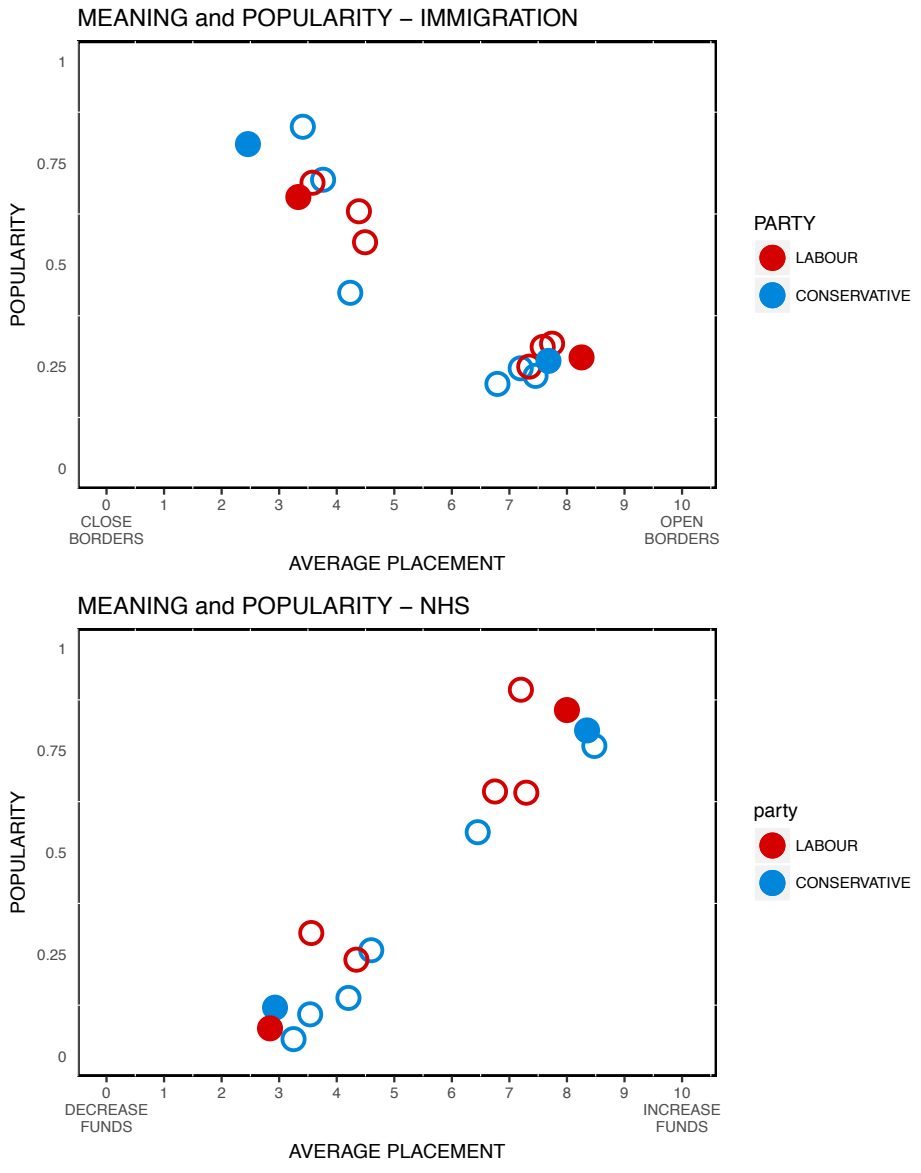
[4]Please, note that the terms 'leftmost' and 'rightmost' in this description make no reference to the left-right ideological dimension.

Figure A4: The choice of manipulation texts. Top row: Immigration flows. Bottom row: Government funding of the National Health Service.



NOTES: Average issue position expressed in the statement (horizontal axis) and perceived clarity of its meaning (vertical axis). Conservative and Labour statements are denoted by the blue and red color, respectively. The pair of statements eventually selected as manipulations are indicated by filled circles. Those what were not chosen are represented by hollow circles.

Figure A5: Position expressed in the statement and proportion of coders who think that the statement "can make the party more popular among voters". Top row: Immigration flows. Bottom row: Government funding of the National Health Service.



NOTES: Average issue position expressed in the statement (horizontal axis) and proportion of coders who judge that the statement "can make the party more popular among voters" (vertical axis). Conservative and Labour statements are denoted by the blue and red color, respectively. The pair of statements eventually selected as manipulations are indicated by filled circles. Those what were not chosen are represented by hollow circles.

Table A1: Policy statements selected for each treatment group.

	IMMIGRATION ISSUE	
	anti-immigration	**pro-immigration**
Conservative	"The number of migrants we are seeing is far higher than our local authorities, our schools and our hospitals can cope with. So many people, so fast, is placing real burdens on our public services."	"Our openness is part of who we are. We should celebrate it. We should never allow anyone to demonise it. We are Great Britain because of immigration, not in spite of it."
Labour	"People want there to be control of immigration. And I agree. That means strengthening our borders, with proper entry and exit checks. And we will introduce those checks."	"Over many centuries Britain has benefited from the ideas and talents of those who have come here from abroad. We need migration to get the top talent and investment we need, for our world class universities to compete internationally, or to meet skills shortages in the NHS."
	NATIONAL HEALTH SERVICE ISSUE	
	anti-NHS	**pro-NHS**
Conservative	"We're going to have to go on controlling spending. This year I can confirm that we will be spending £10 billion less than set out in our original plans."	"We will secure the future of the National Health Service by increasing the health budget, integrating healthcare and social care, and ensuring the National Health Service works on a 7 day basis."
Labour	"We will continue to face tough spending constraints. We are setting out how we can save money [in the NHS]"	"It is time to care about our NHS. So we will set aside resources so that we can have in our NHS 3,000 more midwives, 5,000 more care workers, 8,000 more GPs and 20,000 more nurses. An NHS with time to care."

NOTES: *Anti-immigration* denotes statements in favor of restricting new immigration flows while *Pro-immigration* indicates messages advocating easing the entry of new immigrants. *anti-NHS* denotes statements in favor of reducing government spending in the National Health Service, while *pro-NHS* indicates messages advocating higher spending in the NHS.

A.3 Screenshots of Most Important Survey Experiment Items

This section presents screenshots of the most important questionnaire items in the survey experiment. Figure A6 presents the question that captures respondents' pre-treatment perceptions of where each party stands on the relevant issue. Figure A7 reports the appearance of the experimental manipulation: it shows how respondents are exposed to the party's issue statement. Following Mutz (2011), participants are encouraged to read the text by being asked to indicate the word that is *not* included in the statement. Figure A8 presents the manipulation check: after providing their post-treatment perception of where the party stands on the issue dimension, respondents are shown the issue statement again and are asked to evaluate the issue position that the statement advocates. The last screenshot captures the respondent's opinion about which option is the most popular on an issue: pro or anti-immigration; pro or anti-NHS (Figure A9).

Figure A6: Questionnaire item capturing respondents' pre-treatment perceptions of where parties stand on the issue. Example: Conservative Party on the issue of government regulation of immigration flows.

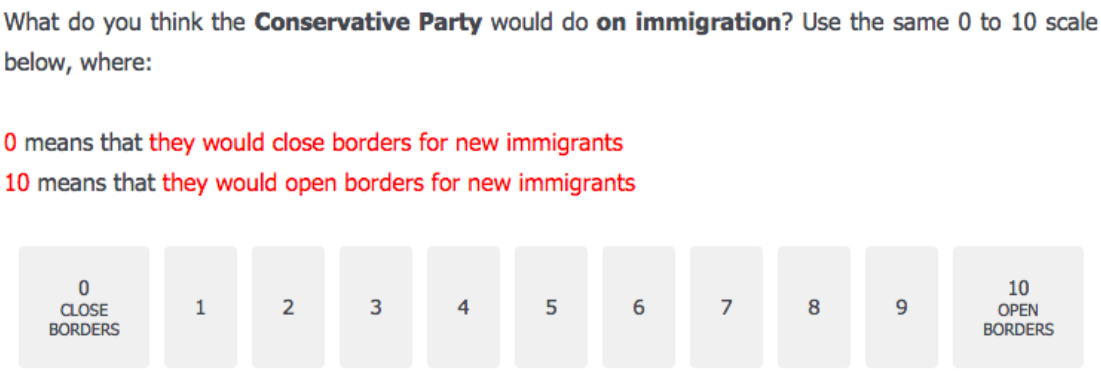


Figure A7: Example of how respondents are exposed to the experimental condition: Statement on immigration by the Conservative party favoring restricting entry of new immigrants. Includes a follow-up question to motivate respondents to read the text.

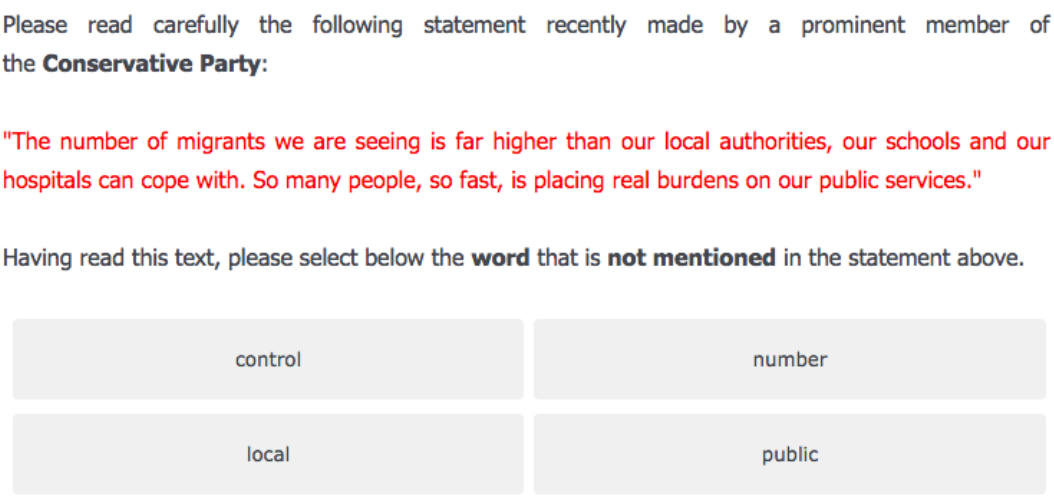
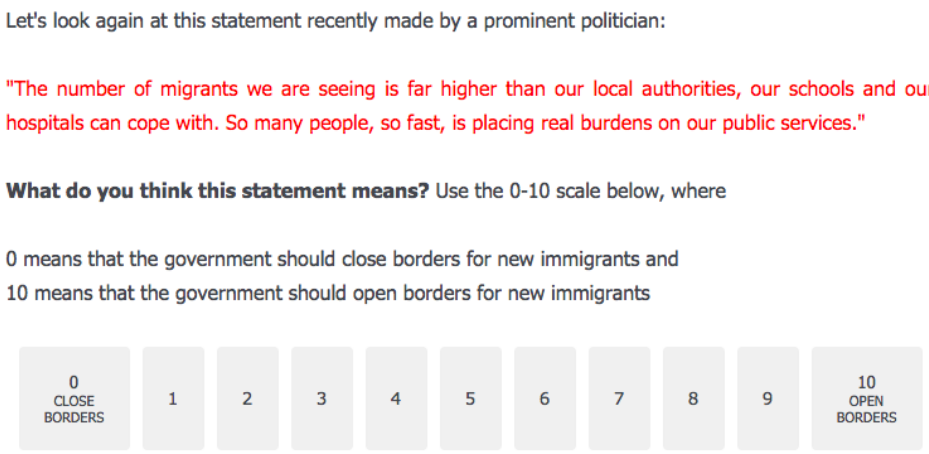
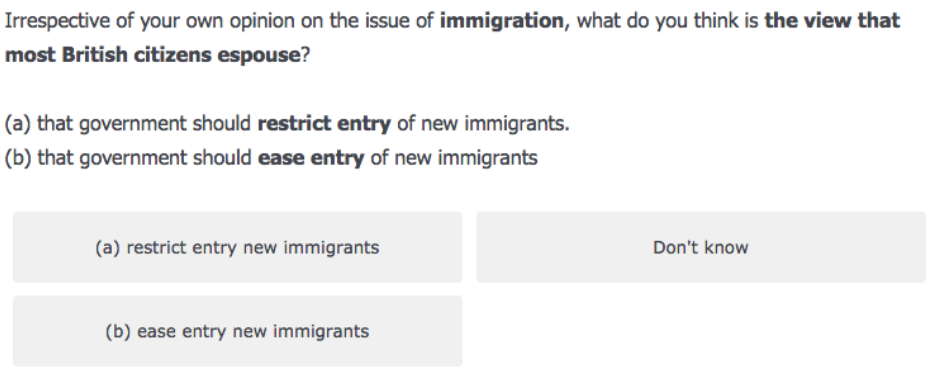


Figure A8: Manipulation check. Respondents are asked to evaluate the meaning of the party statement and place it on the immigration issue scale.



NOTES: Example of manipulation check for a Conservative Party statement reflecting an anti-immigration stance.

Figure A9: Opinion about the position that most British citizens espouse. Immigration flows. Screenshot.



A.4 How Respondents Interpreted the Issue Statements: Manipulation Check

The results from the manipulation check indicate that survey participants interpreted the Labour and Conservative statements in each experimental condition as expected. Table A2 reports how respondents mapped the meaning of each party message onto the corresponding issue scale. Each cell displays the average position that respondents attributed to each manipulation statement. It shows that participants placed pro-immigration messages closer to the "open borders" endpoint than anti-immigration ones. Similarly, pro-NHS statements are seen as more favorable to increasing NHS funding than those in the anti-NHS experimental condition. All these differences in the interpretation of each type of party declaration are large and statistically significant.

Respondents' understanding of each type of party declaration is such that parties' pre-treatment perceived positions lie in between each treatment and, therefore, both types of statements are being interpreted on average as a policy shift in the expected direction: anti-immigration statements as a movement towards tougher immigration controls and pro-immigration statements as a shift towards a looser immigration policy. The same applies to the National Health Service. Hence, the results of this manipulation check suggest that, if respondents do not fully update their placement of Labour and the Conservatives after observing their issue statements, it is not because they have failed to understand the meaning of these declarations. Discounting therefore becomes a more plausible reason to explain such a pattern.

Note that the identity of the party that authored the statement seems to matter for its interpretation: the Conservative anti-immigration statement tends to be seen as more anti-immigration than the Labour one. Likewise, the Labour pro-NHS statement is seen as more favorable to the National Health Service than the Conservative one. The empirical analysis

of the effect of statements takes this into account by using the perceived position expressed in the statement as the main predictor variable (equation 1 in the main text).

Table A2: Manipulation checks. Respondent placement of Labour and Conservative issue statements in each treatment condition.

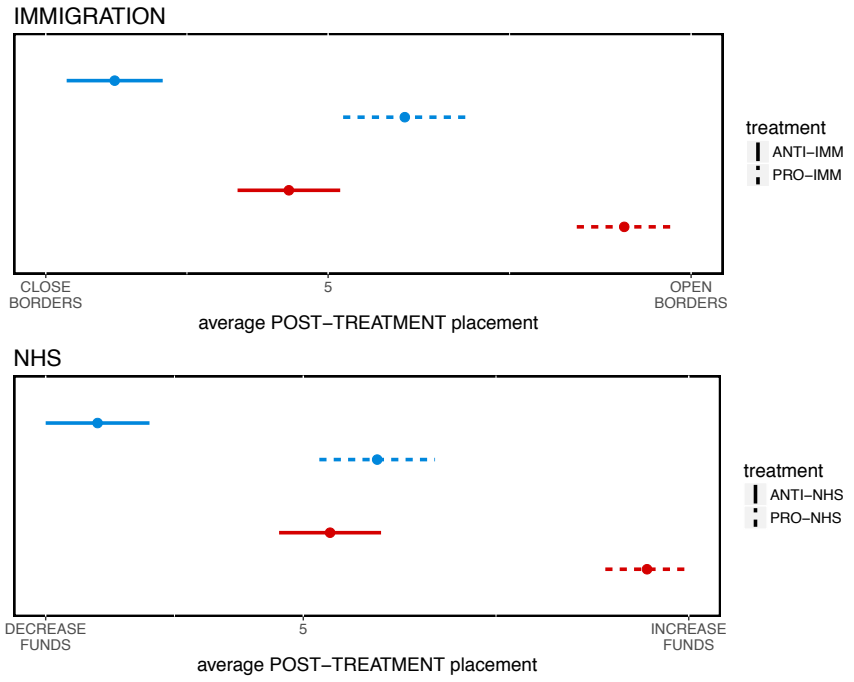
	IMMIGRATION			
	anti-immigration	pro-immigration	difference	pre-treatment party placement
Conservative	2.7	6.9	4.2*	4.2
Labour	4.1	7.5	3.4*	5.7
	NATIONAL HEALTH SERVICE			
	anti-NHS	pro-NHS	difference	pre-treatment party placement
Conservative	3.2	7	4.2*	4.4
Labour	4.2	7.8	3.4*	6.7

NOTE: Average placement on a 0-10 scale and difference in means t-test. Regarding immigration, 0 represents a "close borders" policy and 10 an "open borders" option. For NHS funding, the "decrease funding" alternative is captured by 0 while 10 indicates "increase funding". Pre-treatment party positions are also included on the rightmost column as reference. t-test p-values: $*< 5\%$

A.5 Across-Subjects Effects: Post-Treatment Placement of Parties after Observing the Statement

Figure A10 compares the average post-treatment placement of Labour and the Conservative Party across experimental groups (*across-subjects* effects). This graph shows that respondents' perceptions of where each party stands on the issue diverge after observing the party's message. Those who read a party statement defending immigration subsequently see the party as more open to immigration than those exposed to a proposal to restrict it. Statements on NHS funding generate a similar split in post-treatment opinions. This pattern, moreover, holds for both the Labour and Conservative parties. Taken together, these *across-subjects* results indicate that party statements can change respondents' beliefs about party positions.

Figure A10: Across-subjects comparison. Average post-treatment party placement on immigration and the NHS with 95% confidence intervals.



NOTES: Blue points and confidence intervals refer to the Conservative Party, while red indicates Labour.

A.6 Perceptions of which Policy Position is Most Popular

This section describes the perceptions that participants in the survey experiment have about which policy option is most popular among UK voters. Figure A9 presents the survey item that captures these opinions. In it, respondents are asked the following question: "Irrespective of your own opinion on the issue of [immigration / NHS], what do you think is the view that most British citizens espouse?". In the immigration experiment the possible answers are: "restrict entry of new immigrants" or "ease entry of new immigrants". The two possible responses in the NHS experiment are: "increase funding for the NHS" or "decrease funding for the NHS".

Table A3 summarizes the distribution of responses for each policy issue. The vast majority of participants agree that UK voters tend to be anti-immigration and pro-NHS. Specifically, 86% of respondents declare that most UK voters prefer restrictive immigration policies. Regarding the NHS, 94% concur that most UK voters support increasing funding for this service. This level of agreement about the most popular policy option on each issue helps explain why the discounting of popular statements implies that anti-immigration and pro-NHS statements have a weaker effect on perceptions.

Table A3: Respondents' perceptions of which policy option is most popular among UK voters.

IMMIGRATION	
a) "Restrict entry of new immigrants"	86%
b) "Ease entry of new immigrants"	14%
NATIONAL HEALTH SERVICE	
a) "Increase funding for the NHS"	94%
b) "Decrease funding for the NHS"	6%

NOTE: Percentages indicate the proportion of respondents who identify the policy option as the one that most UK citizens espouse.

A.7 The Impact of Pro vs Anti-Immigration and Pro vs Anti-NHS Statements: Regression Model and Output

This section presents the empirical model and the regression results that compare the effect of pro-immigration vs anti-immigration policy shifts. To analyze whether there is a difference in the impact of pro and anti-immigration statements as well as between pro and anti-NHS stances, I estimate the following model:

$$\begin{aligned} &\text{post-treatment perception} = \alpha + \beta_1 \,\text{statement} + \beta_2 \,\text{pre-treatment perception} + \\ &\beta_3 \,\text{statement * pro-immigration} + \beta_4 \,\text{pre-treatment perception * pro-immigration} \\ &+ \beta_5 \,\text{pro-immigration} + \epsilon \end{aligned} \tag{1}$$

This model has the same structure as equation 1 in the main text but substituting the *pro-immigration* indicator for the *popular* one. *Pro-immigration* is a dummy variable that equals one if the respondent interprets the statement as a shift towards the pro-immigration end of the issue scale.[5] For the NHS, interactions are formed with a *pro-NHS* indicator.[6]

Since the vast majority of respondents consider that an anti-immigration policy is the most popular option on that issue, the argument that voters discount vote-seeking statements predicts that pro-immigration statements will have a stronger effect on perceptions, hence the coefficient for *statement * pro-immigration* should be positive and that for *pre-treatment perception * pro-immigration* should be negative. Regarding the NHS, respondents agree that most voters prefer a pro-NHS policy. Hence, the prediction in this case is that pro-NHS will be *less* influential on public opinion and therefore the coefficient for *statement * pro-NHS* should be negative and that for *pre-treatment perception * pro-immigration* should

[5]To give an example, for a respondent who placed the party before the treatment at 4 on the 0 (anti-immigration) to 10 (pro-immigration scale), *pro-immigration* equals one if the statement espouses any position at 5 or higher.

[6]For a respondent who placed the party before the treatment at 4 on the 0 (anti-NHS) to 10 (pro-NHS scale), *pro-NHS* equals one if the statement espouses any position at 5 or higher.

be positive. These interaction coefficients should be larger in absolute magnitude when the party has stronger vote-seeking incentives to change its issue reputation, i.e. for Labour on immigration and for the Conservative Party on the NHS.

Table A4 presents the regression results and Figure A11 plots the estimated marginal effects. The evidence supports the theoretical argument. Regarding the NHS, the interaction coefficients *statement * pro-NHS* is negative and statistically significant for both parties and *pre-treatment perception * pro-immigration* is positive. This suggests that taking a pro-NHS stance has a weaker effect on perceptions. With respect to immigration, there is no clear difference between the Conservative Party's pro and anti-immigration statements. This may be due to the fact that the Conservatives are already perceived to be tough on immigration and therefore they do not have strong electoral incentives to move even more towards the anti-immigration end of the scale. Labour, in contrast, is seen as more favorable to immigration than most voters. Hence, it has electoral incentives to take anti-immigration stances. The regression results suggest that voters discount these vote-seeking shifts: the interaction coefficient *statement * pro-immigration* is positive and that for *pre-treatment perception * pro-immigration* is negative. Both estimates are statistically distinguishable from zero. These results therefore imply that Labour's pro-immigration statements have a stronger effect than anti-immigration ones.

Figure A11: The marginal effect of pro-immigration & anti-immigration statements. Pro-NHS & anti-NHS.

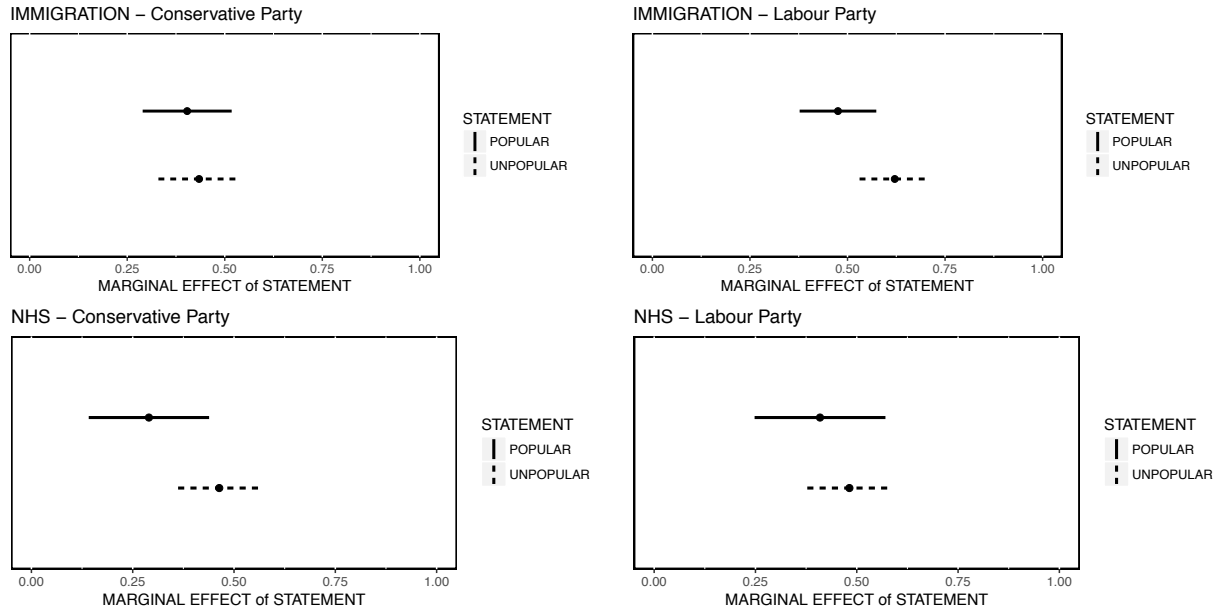


Table A4: Comparing the impact of pro vs anti-immigration statements, pro vs anti-NHS statements. Regression results.

Immigration		
	CONSERVATIVE	LABOUR
Statement	0.4 ∗	0.5 ∗
	(0.1)	(0.1)
Statement X pro-immigration	-0.01	0.2 ∗
	(0.1)	(0.1)
Pre-treatment perception	0.3 ∗	0.5 ∗
	(0.1)	(0.1)
Pre-treatment perception X pro-immigration	0.17	-0.2 ∗
	(0.1)	(0.1)
pro-immigration	-0.6	-0.4
	(0.6)	(0.6)
Intercept	1.1 ∗	0.2
	(0.3)	(0.3)
R^2	0.44	0.58
N	458	458
National Health Service		
	CONSERVATIVE	LABOUR
Statement	0.4 ∗	0.5 ∗
	(0.1)	(0.04)
Statement X pro-NHS	-0.2 †	-0.3 ∗
	(0.1)	(0.1)
Pre-treatment perception	0.5 ∗	0.4 ∗
	(0.1)	(0.1)
Pre-treatment perception X pro-NHS	0.3 ∗	0.04
	(0.1)	(0.1)
pro-NHS	0.5 ∗	2.2 ∗
	(0.1)	(0.9)
Intercept	0.3	0.4
	(0.3)	(0.4)
R^2	0.60	0.49
N	407	407

Standard errors in parentheses. p-values: †< 10%, ∗< 5%

A.8 External Validity: Extrapolating Results from this Convenience Sample

To confirm that the empirical findings can be extrapolated to the population of UK adults, I replicate the empirical analysis after applying weights to make the sample representative of the UK electorate. The benchmark that I use is the pre-campaign wave of the 2010 British Election Study Panel Survey.[7]

Table A5 compares the demographic composition of the CrowdFlower convenience samples against this representative cross-section of the UK electorate. CrowdFlower respondents are, on average, younger and more educated than the British adult population. The sample is also more ethnically diverse than the British public as a whole. These differences seem to be characteristic of online contributors: Berinsky, Huber and Lenz (2012) and Paolacci and Chandler (2014) identify similar patterns among Amazon MTurk workers.

Table A5: Comparing the demographic characteristics of the CrowdFlower contributors against a representative sample of British voters.

	CF sample Immigration	CF sample NHS	2010 British Election Study
GENDER			
female	0.46	0.48	0.5
AGE			
18 to 25	0.30	0.25	0.05
25 to 35	0.29	0.33	0.16
35 to 45	0.20	0.21	0.18
45 to 55	0.15	0.13	0.20
55 to 65	0.04	0.06	0.26
over 65	0.02	0.01	0.15
EDUCATION			
15 or younger	0.03	0.03	0.13
16	0.11	0.16	0.23
17	0.07	0.06	0.09

Continued on next page

[7]The main advantage of this survey is that it shares many demographic items with my questionnaire. For more information, see http://bes2009-10.org/bes-data.php [last accessed May 9th 2017].

	CF sample Immigration	CF sample NHS	2010 British Election Study
18	0.18	0.21	0.13
19 or older	0.61	0.54	0.42
MARITAL STATUS			
married	0.29	0.29	0.56
living partner	0.16	0.20	0.13
separated	0.01	0.01	0.02
divorced	0.04	0.04	0.07
widowed	0.01	0.02	0.03
single	0.48	0.44	0.18
RACE			
white	0.86	0.85	0.95
mixed	0.04	0.03	0.01
Asian/Asian British	0.05	0.06	0.02
black/black British	0.03	0.03	0.01
other	0.02	0.02	0.01
REGION			
East Anglia	0.10	0.09	0.07
East Midlands	0.07	0.08	0.07
Greater London	0.16	0.12	0.12
North	0.04	0.03	0.05
North West	0.12	0.12	0.11
Northern Ireland	0.01	0.02	0.00
Scotland	0.10	0.11	0.09
South East	0.14	0.13	0.17
South West	0.07	0.07	0.09
Wales	0.06	0.03	0.05
West Midlands	0.06	0.09	0.09
Yorkshire and Humber	0.07	0.09	0.09

NOTES: Each cell represents the proportion of observations in each category. The 2010 British Election Study (BES) data refers to the pre-campaign wave of the BES Campaign Internet Panel Survey.

To address these imbalances, I compute propensity-score based weights that denote the probability that each CrowdFlower observation would be part of a representative sample (Rivers, 2007).[8] I use the resulting estimated probabilities, normalized, as the vector of weights. Finally, I re-estimate the models in the main text after applying these weights to

[8]For that purpose, I merge the CrowdFlower data with the British Election Study sample and estimate a model predicting whether the observation belongs to the representative sample. The covariates that I use in this regression are: gender, age bracket, education, ethnicity and region of residence.

the CrowdFlower sample so that it matches the UK population as a whole on key sociodemographic characteristics.

Table A6 replicates the analysis of whether voters discount popular statements using the weighted sample. These results reflect the same pattern found with the original unweighted sample. The interaction coefficient *statement * popular* is negative in all cases and that for *pre-treatment perception * popular* is positive in all cases. This suggests that popular statements tend to have a smaller influence on perceptions than *un*popular stances. These interaction coefficients are larger and statistically significant for the two scenarios in which the electoral incentives to change the party's issue position are stronger: The Labour Party on immigration and the Conservatives on the NHS. In conclusion, this replication analysis confirm that the findings obtained with the convenience sample can be extrapolated to the UK population.

Table A6: Replication after applying **weights** to make the convenience sample match the UK electorate on key demographics. Popular vs Unpopular statements.

	Immigration		**NHS**	
	CONSERVATIVE	LABOUR	CONSERVATIVE	LABOUR
Statement	0.5 ∗	0.6 ∗	0.5 ∗	0.5 ∗
	(0.1)	(0.1)	(0.1)	(0.1)
Statement X popular	-0.07	-0.14 ∗	-0.19 ∗	-0.1
	(0.08)	(0.07)	(0.09)	(0.1)
Pre-treatment perception	0.4 ∗	0.4 ∗	0.5 ∗	0.3 ∗
	(0.1)	(0.04)	(0.1)	(0.1)
Pre-treatment perception X popular	0.05	0.12 †	0.15 ∗	0.08
	(0.08)	(0.07)	(0.07)	(0.1)
popular	0.1	0.4	0.4 ∗	0.2
	(0.5)	(0.5)	(0.7)	(0.8)
Intercept	0.7 †	-0.1	0.2	1.2 ∗
	(0.4)	(0.4)	(0.2)	(0.5)
R^2	0.46	0.59	0.59	0.47
N	446	446	392	392

Standard errors in parentheses. p-values: †< 10%, ∗< 5%

A.9 Robustness Check: Adding Demographic and Attitudinal Controls

Table A7 reports the results of estimating the regression model in Table II in the main text but adding several attitudinal and demographic indicators as control variables. These controls include a measure of the respondent's party identification, defined as a dummy variable that takes the value of 1 if the respondent identifies with the party that authored the message. The regression results confirm the empirical pattern reported in the main text: The effect of the statement tends to be weaker and the weight of the lagged perception stronger if the party adopts the popular option on the issue. The point estimate for the interaction coefficient *Statement X popular* is negative and that for *Pre-treatment perception X popular* is negative across all issues and political parties. The interaction effects are larger in absolute magnitude and statistically significant for the Labour Party on immigration and for the Conservatives on the NHS. Hence, voters' discounting of popular statements is more evident when the party faces vote-seeking incentives to change its perceived position on an issue.

Table A7: Replication of the analysis reported in Table II in the main text but adding demographic and attitudinal control variables.

	Immigration		**NHS**	
	CONSERVATIVE	LABOUR	CONSERVATIVE	LABOUR
Statement	0.41 $*$	0.65 $*$	0.49 $*$	0.53 $*$
	(0.1)	(0.1)	(0.1)	(0.1)
Statement X popular	-0.00	-0.19 $*$	-0.22 $*$	-0.09
	(0.09)	(0.07)	(0.09)	(0.1)
Pre-treatment perception	0.32 $*$	0.33 $*$	0.46 $*$	0.3 $*$
	(0.1)	(0.04)	(0.1)	(0.1)
Pre-treatment perception X popular	0.05	0.19 $*$	0.18 $*$	0.1
	(0.09)	(0.07)	(0.08)	(0.09)
popular	-0.17	0.27	0.49 $*$	0.03
	(0.6)	(0.5)	(0.7)	(0.9)
Intercept	1.9 $*$	-0.21	-0.38	1.08 †
	(0.6)	(0.5)	(0.5)	(0.6)
Controls	✓	✓	✓	✓
R^2	0.46	0.63	0.63	053
N	404	404	350	350

NOTES. Included as control variables are: Age, Gender, Religious Group and Party Identification. OLS standard errors in parentheses. p-values: $*< 5\%$

A.10 Alternative Test of the Argument

This section presents an alternative test of the argument that voters discount vote-seeking statements. This test compares the magnitude of the change in respondents' perceptions across treatment groups. This approach takes into account potential ceiling and floor effects by interacting the type of treatment with a measure of the maximum potential effect that the statement can have. In doing so, this approach helps rule out an alternative explanation for the empirical pattern reported in the main text, i.e., that statements are discounted not because they espouse the popular position on an issue but because they deviate significantly from the prior opinion about the party. In addition, this alternative test relies exclusively on pre-treatment data, thereby avoiding any possible post-treatment biases (Montgomery, Nyhan and Torres, 2016). The empirical model estimated for the immigration survey experiment is the following:

$$\begin{aligned} \text{change in perception} = \alpha + \beta_1 \text{ maximum potential effect of the treatment} + \\ \beta_2 \text{ anti-immigration treatment} * \text{ maximum potential effect of the treatment} + \varepsilon \end{aligned} \tag{2}$$

The dependent variable, *Change in perception*, indicates the difference between the post-treatment and the pre-treatment perception of where the party stands, expressed in absolute magnitude.[9] The variable *Maximum potential effect of the treatment* captures the maximum change in perceptions that the statement can produce. This is calculated by taking into account the respondent's prior perception and the type of statement that she is exposed to. The logic is the following: For a participant that places the party initially at position 4 on immigration, the maximum effect that the pro-immigration treatment can have is 6, i.e. the absolute difference between the most pro-immigration position (10) and the participant's

[9]Hence, if the respondent places the party initially at position 4 and later at position 1, the dependent variable takes the value of 3.

prior opinion (4). If the same participant observes the anti-immigration statement, the maximum potential effect is 4, i.e. the absolute difference between the most anti-immigration position (0) and her prior opinion (4). This variable ranges from 0 to 10. Given this definition, the coefficient for *Maximum potential effect* captures the effect of the treatment as a proportion of the maximum potential change it could have produced.

To test the argument that espousing the popular option on an issue generates a weaker change in voters' perceptions, the variable *Maximum potential effect* is interacted with an indicator that the respondent has observed the anti-immigration statement, *anti-immigration treatment*.[10] Hence, β_1 estimates the effect of the pro-immigration statement and $\beta_1 + \beta_2$ captures the effect of the anti-immigration one. Since most respondents consider that the anti-immigration position is the most popular option on this issue, the argument predicts that the interaction coefficient β_2 will be negative.

The equation for the survey experiment on the National Health Service has the same structure. The only difference is that the variable *Maximum potential effect* is now interacted with an indicator that the participant has been exposed to the pro-NHS statement, the popular option on this issue. Again, the expectation is that the interaction coefficient β_2 will be negative:

$$\begin{aligned} \text{change in perception} = \alpha + \beta_1 \,\text{maximum potential effect of the treatment} + \\ \beta_2 \,\text{pro-NHS treatment} * \text{maximum potential effect of the treatment} + \varepsilon \end{aligned} \tag{3}$$

Table A8 presents the regression results. The coefficients for *Maximum potential effect* represent the impact of pro-immigration statements for the issue of immigration and that of anti-NHS messages for the National Health Service. The interaction coefficients, in turn, capture the difference with respect to anti-immigration and pro-NHS treatments. These

[10]The constituent term *Anti-immigration treatment* is not specified in line with the logic of the model: Doing otherwise would imply estimating the effect of the treatment when *Maximum potential of the treatment* = 0, i.e. when the treatment cannot have a consistent effect.

estimates suggest that Labour statements tend to generate larger absolute changes in respondents' perceptions. The coefficient for *Maximum potential effect* is larger for Labour for both issues and this difference does not disappear once we take into account the interaction term. This larger impact of Labour statements is consistent with previous work by Bawn and Somer-Topcu (2012) and Fernandez-Vazquez and Somer-Topcu (2017) who show that the policy rhetoric of opposition parties is more consequential than that of governing ones.

Most importantly, these results provide evidence that respondents tend to discount vote-seeking statements. The interaction coefficient *Maximum Potential Effect X Anti-Immigration Treatment* is negative and statistically different from zero for both parties. This implies that the effect of the anti-immigration statements, i.e. the popular position on immigration, is weaker than that of pro-immigration ones. While the effect of observing the pro-immigration statement amounts to 23% of the maximum potential treatment effect (for the Conservative Party) and 35% (for Labour), this proportion drops to 16% and 24%, respectively, if the statement is anti-immigration. Regarding the NHS, there is no discernible difference between the pro-NHS and the anti-NHS treatments for Labour, possibly because this party is already placed near the popular position on this issue (pro-NHS). The Conservative Party, on the other hand, faces stronger vote-seeking incentives to shift its issue reputation towards a more pro-NHS position. In this case there is evidence of discounting: the effect of the pro-NHS statement is somewhat weaker than that of the anti-NHS treatment (12% vs 17%) and this difference is statistically significant with a p-value below 0.1. To facilitate the interpretation of these results, Figure A12 plots the effect of each type of treatment in the scenario where the maximum potential effect equals one. Taken together, this evidence confirms the empirical pattern reported in the main text.

These results also help rule out an alternative explanation for the discounting pattern reported in the main text. This alternative account suggests that some statements have a weaker effect not because they espouse popular policies, but because they depart significantly

Table A8: The effect of the type of treatment on the absolute change in respondents' perceptions. Top pane: Immigration. Bottom pane: National Health Service.

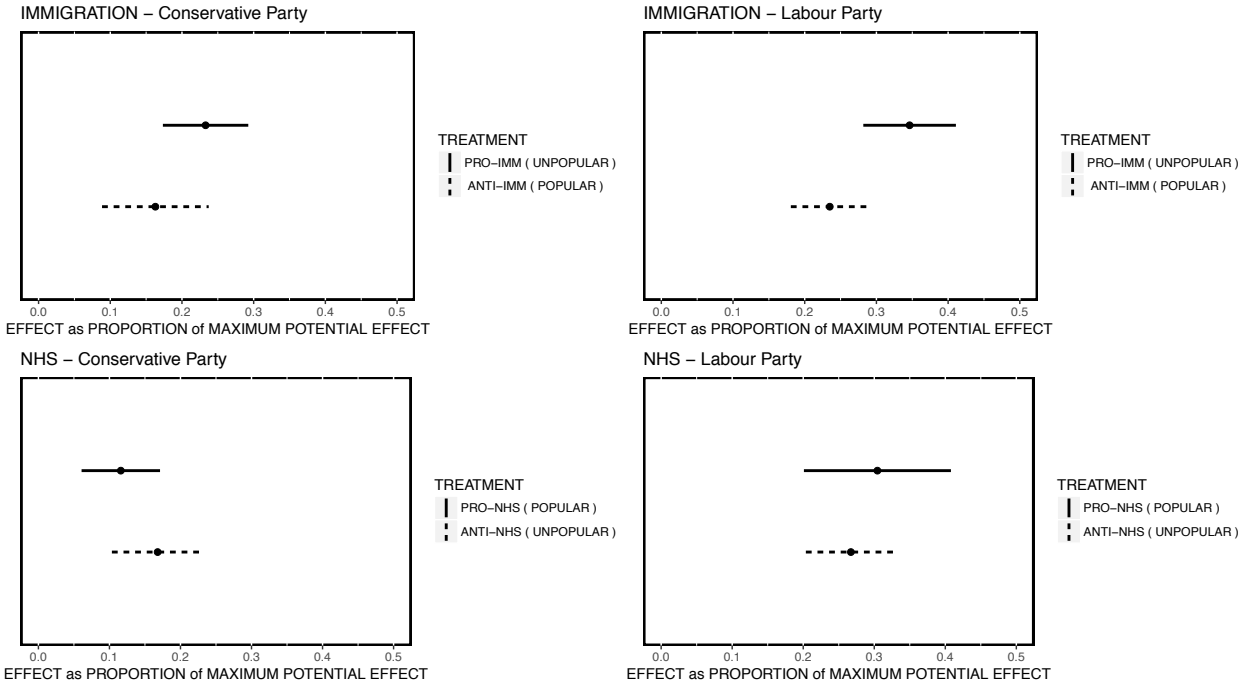
IMMIGRATION		
	CONSERVATIVE	LABOUR
Intercept	2.6 ∗	0.7
	(0.7)	(0.6)
Maximum Potential Effect	0.23 ∗	0.35 ∗
	(0.04)	(0.04)
Maximum Potential Effect *X* Anti-Immigration Treatment	-0.07 ∗	-0.11 ∗
	(0.03)	(0.03)
Controls	✓	✓
R^2	0.19	0.22
N	433	433
NATIONAL HEALTH SERVICE		
	CONSERVATIVE	LABOUR
Intercept	0.29	0.19
	(0.7)	(0.8)
Maximum Potential Effect	0.17 ∗	0.27 ∗
	(0.04)	(0.03)
Maximum Potential Effect *X* Pro-NHS Treatment	-0.5 †	0.04
	(0.03)	(0.04)
Controls	✓	✓
R^2	0.08	0.20
N	380	380

NOTE: Dependent variable: difference between the respondent's post-treatment and pre-treatment perception of where the party stands on the relevant issue scale, expressed in absolute magnitude. Control variables: Age, gender, education, party identification, respondent's own position on the issue. OLS standard errors in parentheses. p-values: $*< 5\%$ $\dagger< 10\%$

from the position commonly attributed to the party. The test of the argument presented in this section addresses this issue by controlling for how much the treatment deviates from the prior. Specifically, it compares the impact of the anti-immigration treatment against the pro-immigration one when the maximum potential effect is the same for both treatments. If the variable *Maximum potential effect* equals 7, for instance, this approach estimates the

difference between the impact of the pro-immigration statement for a respondent that places the party initially at 3 with the impact of the anti-immigration statement for a respondent that places the party at 7. In other words, it compares the impact of the pro-immigration treatment for a respondent who initially places the party close to the anti-immigration end of the scale against the impact of the anti-immigration treatment for a respondent that places the party close to the pro-immigration end of the scale. In doing so, this approach disentangles the discounting of popular statements from the discounting of statements that deviate from the prior opinion about the party.

Figure A12: The marginal effect of each type of treatment, in absolute magnitude. Scenario where the maximum potential effect equals one.



References

Bawn, Kathleen and Zeynep Somer-Topcu. 2012. "Government versus Opposition at the Polls: How Governing Status Affects the Impact of Policy Positions." *American Journal of Political Science* 56(2):433–446.

Benoit, Kenneth, Drew Conway, Benjamin Lauderdale, Michael Laver and Slava Mikhaylov. 2016. "Crowd-sourced Text Analysis." *American Political Science Review* 110(2):278–295.

Berinsky, Adam J, Gregory A Huber and Gabriel S Lenz. 2012. "Evaluating Online Labor Markets for Experimental Research: Amazon.com's Mechanical Turk." *Political Analysis* 20(3):351–368.

Fernandez-Vazquez, Pablo and Zeynep Somer-Topcu. 2017. "The Informational Role of Party Leader Changes on Voter Perceptions of Party Positions." *British Journal of Political Science* In Press.

Montgomery, Jacob M, Brendan Nyhan and Michelle Torres. 2016. How conditioning on post-treatment variables can ruin your experiment and what to do about it. In *Annual meeting of the Midwest Political Science Association, Chicago, IL, April*.

Mutz, Diana C. 2011. *Population-Based Survey Experiments*. Princeton University Press.

Paolacci, G and J Chandler. 2014. "Inside the Turk: Understanding Mechanical Turk as a Participant Pool." *Current Directions in Psychological Science* 23(3):184–188.

Rivers, Douglas. 2007. "Sampling for web surveys." *Joint Statistical Meetings* .