The Public’s Perceptions of Government Officials’ Communication in the Wake of the COVID-19 Pandemic

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Abstract

Early news coverage in the US about the COVID-19 pandemic focused on information released from local, state and federal government officials. With an emphasis on US government at these levels, this study examined whether the public’s credibility perceptions and trust in government, along with message exposure, influenced their adherence to information from the government about (a) stay-at-home orders, (b) social distancing and (c) COVID-19 testing. Source credibility theory and situational crisis communication theory provided the theoretical framework for this study. Through the survey data analysis, we investigated communication preferences in the wake of the pandemic and whether credibility perceptions differed according to the level of government. Survey findings revealed that message exposure influenced respondents’ perceived credibility of and trust in government officials during and after the stay-at-home order. Finally, practical implications regarding recommended communication strategies based on the findings were discussed.

Keywords
Perceived credibility, trust in government, COVID-19, situational crisis communication

Introduction

In March 2020, the World Health Organization (2020) declared COVID-19 a pandemic. Shortly thereafter, the US President declared the virus outbreak a national emergency effective March 1, 2020 (White House, 2020). Cities and states throughout the country, starting on the West Coast and expanding to the East Coast, South and other regions, moved forward with issuing stay-at-home orders in an effort to slow the spread of COVID-19 (Kates et al., 2020). Coupled with the stay-at-home orders at the local and state levels were social distancing guidelines from the federal level of government (Kates et al., 2020). Although not much information was available in regards to COVID-19 testing at that time, testing yielded considerable attention as media organizations began reporting on the new pandemic as the number of COVID-19 cases in the country started increasing at a rapid pace.

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News stories at the onset of the COVID-19 pandemic often included information from government officials about confirmed cases, the virus’ rate of spread, testing availability and COVID-19-related deaths (NBC News, 2020). Additionally, synopses of the press briefings and news stories about the pandemic were regularly featured through radio and TV broadcasts, traditional newspapers, news websites and various social media news pages. A 2018 Pew Research Center study showed that a majority of the respondents believed that both the federal government and news media withheld information that could be useful to the public (Rainie & Perrie, 2019). The study’s findings also revealed a decline in public trust in government among Americans over the past 20 years, according to 75% of the survey respondents (Rainie & Perrie, 2019). Additionally, 64% of the respondents agreed that low trust makes it difficult for the country to solve problems. While media serve an important role in message dissemination during crises, it is equally important for the public to trust the sources of the messages. A study conducted by Pew Research Center in April 2020 revealed that while stories about COVID-19 received heavy attention from national media, local media also proved to be a relied-upon avenue for virus-related information (Shearer, 2020). The study reported that 61% of survey respondents followed both national and local news for COVID-19 news. Of that, 23% reported that they followed local media for COVID-19 information more than national news.

At the onset of the pandemic, official communication about COVID-19 generally came from city mayors and county/town presidents at the local level, governors at the state level and the US President at the federal level. Considering the vast amount of information released through media from the local, state and federal levels of government and other sources, the present study examined the perceived credibility of officials during a crisis to determine whether perceptions differed according to government level, and the influence of message exposure on credibility perceptions of government officials. Additionally, this study examined whether credibility perceptions of government officials influenced respondents’ behaviour regarding adherence to the stay-at-home order, social distancing and COVID-19 testing. Finally, the study employed Source Credibility and Situational Crisis Communication theories to investigate whether pre-established trust influences credibility perceptions of government officials during a crisis. Demographic data were also collected. There are also practical implications of this study because it offers valuable insight regarding communication strategies that government officials should implement at the onset of a crisis. These strategies were determined based on how the public perceived the government both before and during the first stay-at-home order of the COVID-19 pandemic in the US.

**Literature Review**

**Trust in Government During Crises**

Citrin and Muste (1999) define trust, particularly in relation to political trust, as ‘confidence that authorities will observe the rules of the game and serve the general interest’ (p. 465). Trust in government is important because it influences political participation and also influences public perceptions about whether government officials can implement effective public policy (Chanley et al., 2000; Hetherington, 2005; Martin et al., 2020). Miller’s (1974) seminal work in this area defines political trust as one of two dimensions of political alienation, with the second being political efficacy. Additionally, he asserted that political trust is an ‘evaluative or affective orientation toward government,’ (Miller, 1974, p. 952). Individuals generally trust those who they believe have their best interests in mind and with whom they share similar perspectives (Bianco 1994; Festenstein, 2020; Hardin, 2002; Klein & Robinson, 2019; Lupia & McCubbins, 1998).
Individuals must also be able to rely on political figures to fulfill various commitments, which contributes to the establishment of political trust (Festenstein, 2020). A 2019 Pew Research Center study that included an analysis of trust in national government according to generation, party and ideology, found that only 17% of Americans had trust in national government. Trust in government is usually analyzed in comparison to a government’s handling of major crises or events as evidenced in various studies (Chanley, 2002; Dalton, 2005; Freimuth et al., 2014; Morckel & Terzano, 2019). Chanley (2002) for example, noted that trust in government, particularly at the national level in the US, was at a higher level in the weeks after the September 11, 2001, terrorist attacks as compared to the mid-1960s. A Washington Post poll showed 64% of the Americans trusted the government to ‘do what is right’ in the post 9/11 climate (Chanley, 2002, p. 469). When examining trust in the wake of a crisis as compared to after, Freimuth et al. (2014) noted that trust was low in the wake of the H1N1 crisis in the US in 2009 and that distrust could hinder public adherence to government recommendations during a crisis. Similarly, trust in government seemed to wane after the Flint, Michigan, water crisis, which began in 2014. Morckel and Terzano (2019) examined trust at the local and state levels and found that Flint residents had low trust in the government after the crisis and at the height of the crisis in 2016.

**Government Communication During Public Health Crises**

Communication from individuals responding to a crisis, including government officials, should be empathetic while also inclusive of risk communication strategy (Fischer, 1998; Novac, 2001; Reynolds & Quinn, 2008; Seeger et al., 2003; Wray & Jupka, 2004). This approach would allow for the effective communication of both risks and benefits to adhering to crisis-handling recommendations by the public (Reynolds & Quinn, 2008; Reynolds & Seeger, 2005; Reynolds et al., 2002). Reynolds & Quinn (2008) in their study of communication during an influenza pandemic found that media and healthcare providers, specifically and the public in general, can benefit from effective communication that helps guide their compliance to recommendations during a public health crisis.

**Influence of Message Exposure**

Ernst et al. (2017) noted that frequent message exposure positively influences message credibility among recipients. Though, is the case, negative messaging leads to a decrease in credibility, particularly relating to political issues (Ernst et al., 2017). Repetitious messaging also contributes to an increase in recipients’ ability to effectively process information (Dechène et al., 2010; Ernst et al., 2017). For example, Elder et al. (2016) found that exposure to health campaign messages positively influenced the public’s intent to use established health hotlines. Several seminal studies on message exposure also showed that frequent messaging has an impact on an individual’s attitude toward the message and credibility perception (Becker & Doolittle, 1975; Bornstein, 1989; Ernst et al., 2017; Hovland & Weiss, 1951; Zajonc, 1968).

**Theoretical Framework**

Source credibility theory (SCT) and situational crisis communication theory (SCCT) undergird the study. Seminal SCT research states that there is a relationship between sources that are considered with high regard and the likelihood for people to agree with those sources (Hovland & Weiss, 1951;
According to SCT, changes in behaviour are often a result of successful communication from highly credible sources (Hummer & Davison, 2016; Pornpitakpan, 2004). Credibility perception of a source also influences how people choose to respond to information (Bickham et al., 2020; Jaeger et al., 2007). SCCT asserted that, when individuals handle crises, they should first use communication to address the physical and psychological concerns of those affected prior to attempting to engage in reputation management (Coombs, 2007). From an SCCT perspective, effective communication, or the lack thereof, affects people’s perceptions in a crisis (Coombs, 2007). Though SCCT primarily provides guidance for crisis managers in corporate settings, the basic tenants of this theory can be applied to examining the effectiveness of the government’s communication about the COVID-19 pandemic. SCCT also asserts that an organization’s prior reputation affects how its crisis communication efforts are perceived (Coombs, 2012; Coombs & Holladay, 2006). Using both theories as the foundation for this study is important because the pandemic brought on a need for consistent, immediate and current information and required a change in how society functions.

This study employed the unique approach of examining credibility perceptions, trust in government, message exposure and adherence to COVID-19 related guidelines using both SCT and SCCT. Previous research showed that people rely on official sources during a crisis, particularly when they are affected personally by said crisis (Bickham et al., 2020; Palen et al., 2009, 2010). Through the application of both theories, this study examined the roles that credibility and trust play in government along with message exposure in people’s adherence to information that could be valuable to them when dealing with a crisis.

Considering past literature relevant to this study, we employed a collective application of SCT and SCCT through survey research to assess the credibility perceptions and trust in government officials at the onset of the COVID-19 pandemic in the US. We also examined the extent to which message exposure influenced perceptions and trust and the connection between trust and adherence to guidance from public officials about the crisis.

The following research questions were explored:

**Research question 1:** Are government officials at one particular level of government perceived as more credible than at other levels during a crisis?

**Research question 2:** Does frequency of message exposure influence credibility perceptions of government officials during a crisis?

**Research question 3:** Do credibility perceptions of government officials influence respondents’ behaviour as it relates to adhering to the stay-at-home order, social distancing and COVID-19 testing?

**Research question 4:** Does pre-established trust influence the credibility perceptions of government officials during a crisis?

## Methods

### Participants and Procedures

This study used a survey research method to gather data from US residents about their exposure to messages related to the COVID-19 pandemic from government officials at the local, state and federal levels. The Human Subjects Institutional Review Board at Nicholls State University approved the final survey instrument in June 2020. Participants were recruited for the online survey through sponsored
Facebook posts that targeted Facebook users who were US residents and 18 years old and above. The sponsored posts were shared 19 times by Facebook users, thereby expanding the survey’s reach beyond those initially targeted. By the end of the data collection period (June–July 2020), 285 responses were collected. One participant opted out after starting the survey due to an unspecified reason.

To participate, respondents completed a pre-screener to confirm that they were over age 18 and were residing in the US at the start of the first stay-at-home order issued in the US in March 2020. Respondents completed the survey anonymously and had the option to opt-out or discontinue the questionnaire at any time. Participation in the survey was completely voluntary. Respondents ranged from ages 18 to above 55 with 2.87% (n = 8) between 18–25, 8.24% (n = 23) between 26–35 years, 20.79% (n = 58) between 36–45 years, 23.30% (n = 65) between 46–55 years and 44.80% (n = 125) who were 56 years or older. They were also identified as White/Caucasian (n = 184, 65.95%), Black/African-American (n = 85, 30.47%), Asian/Pacific-Islander (n = 3, 1.08%), American Indian/Native American (n = 2, 0.72%) and others (n = 5, 1.79%). About 1% of respondents identified as Hispanic or Latino/a (n = 4, 1.43%). The majority of respondents were females (n = 233, 84.12%) and males were 15.88% (n = 44).

**Measures**

Qualtrics software was used to design and distribute the survey instrument, which included 29 questions with response formats that included multiple-choice, multiple-response and Likert scale questionnaire. The perceived source credibility measures asked participants through one question to rate on a 5-point Likert scale (strongly agree to strongly disagree) whether the information they received from various government levels was accurate, believable, trustworthy, timely and credible. Participants were also asked four questions about the types, methods and frequency of information received. Types of information assessed included ways to social distance, COVID-19 testing availability, COVID-19-related cases and deaths, COVID-19-related recoveries, assistance phone numbers or websites and governmental financial assistance. Methods for receiving information measured through the survey were local newspapers, news stations and radio stations, national cable news, news websites, social media, email, text, government websites, real-time press conferences and mail. The frequency of information received was measured according to less than one day, once per day, three times per day and more than three times per day. Six questions about media use preferences, information access, political party affiliation and other demographics focusing on age range, race and ethnicity and US region of residency were also included as part of the survey.

Survey questions were designed to yield responses regarding credibility perceptions and trust across government levels (local, state and federal) as well as credibility perceptions and trust according to each government level. To ensure validity and reliability, we conducted a review of various surveys dealing with trust in government along with a review of surveys related to public health crises (Bickham et al., 2020; Pew Research Center, 2020b; Quinn, 2008; Quinn et al., 2013). We also examined preliminary findings from an on-going Ipsos Knowledge Panel study of the American general population about the COVID-19 pandemic (Ipsos, 2020). We then drafted survey questions and response options based on the research questions being explored for this study. Once developed, we reviewed the survey for clarity and appropriateness and revised the questionnaire accordingly to ensure that measures were representative of the study’s focus.

Items designed to address the research questions included four survey questions adapted from Bickham et al. (2020) study. These items asked respondents to rate their perceptions of officials at each
level of government in terms of trustworthiness using a 5-point Likert scale (very trustworthy to untrustworthy) (Cronbach’s $\alpha = 0.853$). Respondents were asked to provide these ratings about the stay-at-home order, social distancing guidance and COVID-19 testing information. A 5-point Likert scale was also used for three subsequent questions to assess whether respondents’ level of trust influenced their adherence to guidance about the stay-at-home order, social distancing and COVID-19 testing (Cronbach’s $\alpha = 0.914$). An additional question asked if respondents’ pre-established trust in government influenced their credibility perceptions during the crisis (strongly agree to strongly disagree). The purpose was to assess differences among the government levels as it pertained to credibility perceptions and trust about the three aforementioned topics. Survey respondents were also asked three questions adapted from a 2020 Ipsos panel study in order to rate each level of government’s response to the pandemic using a 5-point Likert scale (extremely adequate to extremely inadequate). Next, survey respondents were asked one question about who they trusted most: city mayor/top official, the city’s appointed medical professionals, state governor, the state’s appointed medical professionals, the US President, or the country’s top appointed medical professionals. The respondents were also asked three survey questions about alternative sources for information such as the Centers for Disease Control, World Health Organization, local medical experts (unrelated to CDC and WHO) and national medical experts (unrelated to CDC and WHO). They were also asked three questions about whether they rely or continue to rely on the various levels of government for information about public health crises (strongly agree to strongly disagree) (Cronbach’s $\alpha$ score = 0.851).

**Results**

Frequency analyses revealed that most respondents strongly agreed or somewhat agreed that they trusted information received from the government about public health issues prior to the COVID-19 outbreak ($n = 209, 76.28\%$). Similarly, results showed that an overwhelming majority of survey respondents relied on local, state and federal government officials for important information about public health issues before the first stay-at-home order ($n = 205, 74.92\%$). Once the stay-at-home order began, most of the respondents continued to rely on the government at various levels for pertinent information ($n = 233, 85.98\%$). For media preferences, respondents reported receiving their information from government through local newspapers, radio shows and TV broadcast stations ($n = 153$); national cable news shows ($n = 98$), news websites ($n = 139$), social media ($n = 124$), government websites ($n = 103$) and real-time news press conferences ($n = 141$). A small number of respondents reported receiving information from other sources, such as email ($n = 35$), text ($n = 37$) and mail ($n = 3$). Others reported receiving information from medical journals, friends and science blogs ($n = 10$). Respondents were able to select multiple answers for this question.

**Credibility Perceptions at Various Levels of Government**

RQ 1 examined whether government officials at one level of government were perceived as more credible than at other levels. When comparing various levels of government, local and state governments were perceived as more trustworthy than the federal government regarding the stay-at-home order and social distancing. At the local level, 80% of the survey respondents agreed that information about the stay-at-home order was very trustworthy or somewhat trustworthy. About 82% of survey respondents
found stay-at-home order information at the state level very trustworthy or somewhat trustworthy. Information about social distancing was also deemed most trustworthy at the local and state levels. The federal government was perceived as least trustworthy when providing information about COVID-19 testing (54.84%). Chi-square analysis revealed no statistically significant difference among respondents according to race and their trust in government when deciding whether to adhere to guidance about the stay-at-home order ($\chi^2 (16, 249) = 21.247, p = 0.169$, social distancing ($\chi^2 (16, 249) = 22.260, p = 0.135$) and COVID-19 ($\chi^2 (16, 249) = 15.951, p = 0.456$).

**Message Exposure Frequency and Credibility Perceptions**

RQ 2 focused on the frequency that respondents were exposed to messages from government officials and whether frequency influences credibility perceptions. The top three types of information received from the government at various levels were ways to social distance, testing availability and information about COVID-19-related cases and deaths. Most respondents reported receiving information from the government more than three times per day ($n = 104, 40.31\%$). Most of the respondents somewhat agreed that the information was accurate ($n = 115, 40.4\%$), believable ($n = 117, 41.1\%$), trustworthy ($n = 102, 39.5\%$), timely ($n = 104, 36.6\%$) and credible ($n = 107, 37.6\%$).

The information received was then shared by 82.55\% of the respondents ($n = 194$) mostly with friends ($n = 154, 29.56\%$), spouses/significant others ($n = 115, 22.07\%$) and other family members ($n = 157, 30.13\%$). Specific information about the stay-at-home order and social distancing at the local and state levels was considered most trustworthy when compared to information from the federal level on the same topics. At the local level, 80.39\% ($n = 205$) reported trusting stay-at-home information, while 82.35\% ($n = 210$) reported trusting the same information at the state level. Results were similar for social distancing information at the local 83.2\% ($n = 208$) and state 85.94\% ($n = 214$) levels. At the federal level, 42.63\% ($n = 107$) viewed information about the stay-at-home order as trustworthy along with 48.18\% ($n = 119$) who trusted social distancing information. One hundred thirty-six respondents 54.84\% also considered the federal government as the least trustworthy source about COVID-19 testing information. This is in comparison to 12.85\% ($n = 32$) who considered COVID-19 testing information from local government as least trustworthy and 13.58\% ($n = 33$) at the state level. A chi-square analysis revealed no statistically significant difference between the frequency of message exposure and credibility perceptions ($\chi^2 (12, 251) = 19.012, p = 0.088$).

Respondents reported receiving most of their information from local newspapers, broadcast news stations and radio shows followed by real-time press conferences and news websites. Social media also served as a top source for information among respondents. Government websites and national cable news were also cited in the top five sources for information. Respondents were least likely to receive information from email, text messages or regular mail.

**Credibility Perceptions and Behavior**

RQ 3 examined whether credibility perceptions of government officials influenced respondents’ behaviour as they related to adhering to the stay-at-home order, social distancing and COVID-19 testing. The findings showed that while a majority of respondents’ trust in government across the three levels resulted in their adhering to guidance about the stay-at-home order ($n = 184, 73.89\%$) and social distancing ($n = 190, 76.3\%$), this was not the case regarding COVID-19 testing. There were about 56%
(n = 139) of respondents who strongly agreed or somewhat agreed that their trust resulted in adherence to COVID-19 testing information, while about 27% (n = 67) neither agreed nor disagreed.

**Pre-established Trust and Credibility Perceptions**

RQ 4 assessed whether pre-established trust influenced the credibility perceptions of government officials during the crisis. A comparison of overall response success among the three government levels revealed that about 70% of respondents found the local response to be extremely adequate or somewhat adequate and 75.53% agreed that the state response was extremely adequate or somewhat adequate. In terms of the federal level, about 71% of the respondents found the response to be extremely inadequate or somewhat inadequate.

Overall, most of the survey respondents (68.57%) agreed that their trust in government prior to the stay-at-home order influenced their credibility perceptions about the information they received about the COVID-19 pandemic. Contrarily, over half of the respondents (51.83%) agreed that they continue to trust the government across levels to provide necessary information about public health issues.

**Discussion**

This study included an analysis of survey results inclusive of findings that detailed pre-established trust in government officials in the US at the start of the COVID-19 pandemic and whether that trust changed as the public grappled with life under initial stay-at-home orders. When examining credibility perceptions at the local, state and federal levels, the results suggested that local and state government officials were deemed most trustworthy while federal government officials were deemed least trustworthy on the comparison. This finding were in line with results from a Pew Research Center study that showed that the public’s trust in the federal government remains at a constant low in areas including but not limited to the handling of public health threats, responding to natural disasters and strengthening the economy (Pew Research Center, 2020b). Approximately 80% of respondents considered officials at both the local and state levels trustworthy while a little more than half of the respondents (55%) considered federal government officials as least trustworthy. Across the three levels of government, respondents associated their trust in government with their adherence to guidance about stay-at-home orders, social distancing and COVID-19 testing. Survey findings also revealed whether message exposure influenced respondents’ perceived credibility of government officials during that time and after the stay-at-home order. Finally, practical implications regarding recommended communication strategies based on the findings and application of both SCT and SCCT were identified.

Results from the study showed that trust in government prior to a crisis played a significant role in whether the public would deem information credible during the said crisis. This finding was in alignment with SCCT, which states that an organization must already have an established positive reputation prior to a crisis emerges (Coombs, 2007). The findings of this study contributed to advancing SCCT because if government officials can have positive relationships in place with target audiences at the onset of a crisis as SCCT posits, they will be able to shift their primary focus to crisis management. As SCT asserts, sources must be considered highly credible for people to trust them and the information being communicated (Hummer & Davison, 2016; Pornpitakpan, 2004). The research findings also showed that this was true in the case of COVID-19 communication from government officials at the local, state and federal levels. If survey respondents did not perceive certain government officials as highly credible, they
did not perceive the COVID-19 communication as accurate or trustworthy. With consideration to SCT, government officials should work to gain the trust of the public and maintain that trust through the dissemination of credible information through transparent communication. Using SCT principles, government officials should also consider the communication channels that will be most effective in reaching their audience members to maximize their reach and strengthen their credibility.

This study also revealed that trust after a crisis, in this case, after the first stay-at-home orders were lifted, can also differ depending on the government’s response. As identified in the literature about SCT, respondents showed a pattern of basing their adherence to information on their level of trust with the government (Bickham et al., 2020; Jaeger et al., 2007). Also, as previously noted, prior reputation affects how crisis communication efforts are perceived according to SCCT (Coombs, 2012; Coombs & Holladay, 2006). In this study, results showed that pre-established trust influenced credibility perceptions of government officials and their communication efforts. This is important because respondents who already trusted government officials were more likely to trust them regarding COVID-19. If government officials were already viewed as untrustworthy, it was more likely that they would not trust the COVID-19 information.

**Practical Implications**

Results from this study offered strategies that could be adhered to in the wake of a crisis, particularly by government officials. Pandemics are not crises that are dealt with often, but there is still a need for preparedness for when they do occur. This study showed that the public’s level of trust at the onset of a crisis influences its credibility perceptions during a crisis. For this reason, strategies identified through this study could also be applied to other public health crises, as well as to other crises related to natural disasters or economic downturns. With this consideration, government officials at the local, state and federal levels should actively monitor their trust among the public throughout their tenure. When considering specific government-related officials, it is also important to note that most respondents trust the country’s top appointed medical professionals \((n = 66, 26.51\%)\) and their state governor \((n = 51, 20.48\%)\) to provide COVID-19 information, which also leads to further implications for officials to follow at each level of government.

At the local level, city officials, specifically mayors and county/town presidents, could benefit from utilizing local media to disseminate important crisis-related information more effectively. As previously mentioned, the Pew Research Center found that some survey respondents relied on local news as their preference over national news (Shearer, 2020). Therefore, there is a unique opportunity for local officials to connect more directly with their target audience to provide information that would be beneficial to them during a crisis.

This study showed that officials at the state level, mainly state governors, are considered one of the more trusted government officials to provide COVID-19 information. Governors should use their insight to continue being a resource to their constituents through the continued use of regional media outlets to disseminate pertinent messages to their target audiences. With evidence supporting the fact that survey respondents’ level of trust influences whether they adhere to guidance, governors should continue to serve as a trusted source that their constituents can rely on for required information during a crisis.

Results from the study show that top-appointed medical professionals are deemed as most trustworthy at the federal level. Though survey respondents were not asked about specific medical professionals, at the time of this study, Dr Anthony Fauci, Director of the National Institute of Allergy and Infectious Disease; Dr. Deborah Birx, White House Coronavirus Response Coordinator; and Vice Admiral Jerome
Adams, US Surgeon General, were three of the top medical professionals serving on the White House Coronavirus Task Force. Based on this study’s findings, government officials at the federal level should continue to rely on appointed medical professionals when dealing with a public health crisis. Top federal government officials in elected positions can work on improving their reputation and the perceptions the public has about them so that they too can be considered a more trusted and authoritative source in crises. From an international perspective, this approach has been evidenced in South Korea’s response to the COVID-19 pandemic (Paek & Hove, 2021). Paek and Hove (2021) pointed out in their study that politicians in South Korea have worked to avoid contradictions with health experts, which is different from the actions of some government officials in the US and other countries.

Because the federal government received the least favourable responses when compared to state and local government, there are more specific recommendations that are applicable. First, the federal government can focus more on identifying and addressing the physical and psychological concerns of the public as SCCT theory suggests as part of its communication plan (Coombs, 2007). With top appointed medical officials being a top category at the federal level in terms of trust among survey respondents, elected government officials could consider utilizing them more in crises, particularly those of a widespread public health concern. Furthermore, reputation-building strategies should already be in place so that the focus can remain primarily on handling the crisis (Coombs, 2012; Coombs & Holladay, 2006). In April 2020, a Pew Research Center study found that the initial response from the federal government was too slow as reported by 65% of the survey respondents (Pew Research Center, 2020a). Considering these findings coupled with those from this study, another recommendation is to craft initial responses to future crises with more immediacy.

Across different levels of government, it will be important that trust is monitored continuously as information is disseminated during the crisis. Government officials should also consider utilizing traditional media along with press conferences and social media to communicate pertinent information as respondents have identified these channels as most relied upon. This study also showed that in addition to relying on the government for information during the stay-at-home order, alternative sources of information included direct information from the Centers for Disease Control, the World Health Organization and local, regional and national medical experts who are not affiliated with the aforementioned agencies.

Limitations and Future Research Considerations

The study was limited to the first stay-at-home orders issued across the US. It did not examine how respondents perceived government officials’ credibility as different regions of the country moved into phased reopening and less restrictive social distancing guidelines. Additionally, COVID-19 testing procedures advanced and changed as the pandemic progressed, but this study only examined information about COVID-19 testing procedures in the wake of the pandemic.

Another limitation is that most of the findings are related to credibility perceptions, trust in government, message exposure and adherence to guidelines as communicated across the three levels of government. While some measures examined these variables at each level, there is an opportunity for examination to offer a further comparison of local, state and federal levels.

Future research could examine trust in government and credibility perceptions throughout the various phases of COVID-19 restrictions. After the first stay-at-home order, cities and states across the country moved into Phase I reopening of services and businesses. Some areas moved at faster paces than others, so further research could examine how credibility, trust, message exposure and adherence differed among different city and state populations. Because this study focused only on the US government, a larger study could also examine trust in government in other countries.
Even after considering the limitations of this study and suggestions for further research, the findings might serve as a foundation for understanding the connection among credibility perceptions, trust in government, message exposure and the likelihood of the public adhering to important guidance from officials in decision-making roles during times of crises. As a result, the research and practical implications could be considered and adapted by the government officials when dealing with a future crisis, particularly in public health.

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