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I.   Items for each measure described in main text

A.   Personal harm from Covid-19

At Time 1, we prompted participants to indicate their personal harm from Covid-19 with the following: "Please indicate which of the following you have experienced *since the coronavirus pandemic began.*"

We provided the following forms of personal harm.

1. I contracted COVID-19.
2. I contracted a different disease or illness
3. I lost my job or my working hours were significantly reduced
4. The primary wage earner in my household lost their job or had their working hours significantly reduced.
5. I experienced significant financial difficulties.
6. A family member or close friend contracted COVID-19. If yes, please type how many.
7. A family member or close friend died from COVID-19. If yes, please type how many.
8. I experienced an episode of poor mental health or mental illness.
9. I experienced significant disruptions to my sleep.
10. I had negative physical reactions when thinking about COVID-19 (e.g., sweating, pounding heart).
11. I had more pain and aches in my body than usual.
12. I felt weak or fatigued.
13. I had migraines or persistent headaches.
14. I had gastrointestinal or digestive difficulties (e.g., nausea, vomiting, diarrhea.
15. I have not had any of these experiences (coded as 0)

At Time 2, we prompted participants to indicate their personal harm from since they completed the Time 1 survey (i.e., in mid-May) with the following: "*Since mid-May*, which of the following have you experienced?"

At Time 3, we prompted participants to indicate their personal harm from since they completed the Time 2 survey (i.e., in late-October) with the following: "*Since late October*, which of the following have you experienced?"

At Time 2 and Time 3, we provided the same forms of personal harm as in Time 1 and added the following: "I have had long-term and persistent symptoms after contracting Covid-19."

B.   Advocacy for equality: Attitudes

At Time 1, we asked participants "To what extent do you agree with the following statements?"
1. The minimum wage in the US should be increased.
2. There should be universal basic income.
3. There should be universal healthcare.

At Time 2, we included the same items as in Time 1 and added the following items:

1. The government should provide stimulus checks to help people meet their basic needs.
2. The government should provide support for peoples' welfare during hard times.
3. COVID-19 testing should be available at no cost to anyone who wants to get tested.
4. COVID-19 treatment should be free.

At Time 3, we included the same items as in Time 2.

C.   Advocacy for equality: Behavior

We did not ask about participants' behavioral advocacy for equality at Time 1.

At Time 2 we asked participants: "Since mid-May, have you done any of the following? (check all that apply)."
1. Contacted a public official to express support for reducing social or economic inequality
2. Contributed money to a group or organization that focuses on reducing social or economic inequality
3. Posted or shared content on social networking sites related to reducing social or economic inequality.
4. None

At Time 3, we prompted participants to indicate their behavioral advocacy for equality since they completed the Time 2 survey (i.e., in late-October). We asked participants: "Since late October, have you done any of the following? (check all that apply)." We included the same response options as in the Time 2 survey.

D.   External attributions for inequality

At all three time points, we asked participants: "How much do you think that economic inequality is due to the following factors?"

Two of the items reflected external attributions:
1. Situational or environmental factors (e.g., quality of schools, jobs, opportunities).
2. Discrimination (e.g., prejudice and bias)

Two of the items reflected internal attributions:
1. Differences in individual work ethic.
2. Genetics and biology (e.g., innate differences in intelligence).

II.   Additional measures not described in main text

A.   Preference for a more equal distribution of wealth

To assess participants' *preference for a more equal distribution* of *wealth* in the U.S, we asked participants in all three times to respond to items assessing (1) what they perceived the actual wealth distribution in the U.S. to be, as well as (2) what the ideal distribution of wealth in the U.S. should be, following Norton & Ariely's (2011) methodology. The same questions were

asked at each time point. Specifically, participants read a definition of wealth. Next, participants reported both their estimates of the *actual* distribution of wealth and their preferences for the *ideal* distribution of wealth in the United States. For their estimates of the actual distribution of wealth, participants indicated what percent of wealth they thought each of the five quintiles owned in the United States, in order from the top 20% to the bottom 20% (responses were constrained so that their responses had to sum to 100%). For ideal distribution, participants responded to a similar item as the *actual* estimates, except they indicated what percent of wealth they thought each of the five quintiles in the United States *should* own.

For both their estimates of the actual and ideal distribution of wealth, we calculated a Gini coefficient for each participant. A Gini coefficient reflects wealth inequality, such that a coefficient of zero expresses perfect equality where all groups have the same amount of wealth, whereas a coefficient of one expresses maximal inequality (e.g., one group has all the wealth and other groups have none).

To create a score that reflects how much participants prefer a more equal wealth distribution than their estimate of the current distribution, we subtracted participants' estimates of the Gini coefficient from their scores on their ideal Gini coefficient. Negative scores indicated participants preferred less inequality whereas positive scores indicated participants preferred more inequality. We used the following formula at each time point:

$(G_{ideal} = \frac{n+1}{n} - \frac{2\sum_1^n(n+1-i)x_i}{n\sum_1^n x_i})$ - $(G_{estimate} = \frac{n+1}{n} - \frac{2\sum_1^n(n+1-i)x_i}{n\sum_1^n x_i})$ with X_i being ordered from smallest to largest (Time 1: *M* = -0.31, *SD* = 0.26; Time 2: *M* = -0.34, *SD* = 0.23; Time 3: *M* = -0.32, *SD* = 0.22).

1. Results with participants who completed all 3 waves

We conducted a linear regression with personal harm at Time 1 (i.e., X_1) on preference for a more equal distribution of wealth at Time 3 (i.e., Y_3) and include the same control variables (i.e., gender, age, race, political orientation, personal income, and education level) as in the main text. We also control for participant's Time 1 preference for a more equal distribution of wealth. There was a significant relationship between personal harm and participants' preference for less inequality: *B* = -0.008, *SE* = 0.004, *p* = .039, 95% CI [-0.016, -0.001].

2. Results with imputed data

We also conducted a linear regression using imputed data with personal harm at Time 1 (i.e., X_1) on preference for a more equal distribution of wealth at Time 3 (i.e., Y_3) and include the same control variables as in the previous analysis instead using imputed data. Similar to the results with participants who completed all 3 waves, there was a trending but non-significant relationship between personal harm and participants' preference for less inequality: *B* = -0.004, *SE* = 0.002, *p* = .058, 95% CI [-0.009, 0.000].

B. Salary for workers

At Time 1, To assess participants' preferences for workers to earn a higher or lower salary, we asked participants to respond to two items assessing (1) what they perceive the salary is of four different types of workers to be, as well as (2) what the ideal salary of these workers should be.

Specifically, participants read: "We would like to know what you think people in various jobs earn. Please indicate how much you think people in each of the following positions usually earn per year before taxes on average. Many people are not exactly sure about this, but your best guess will be close enough." Then we asked:

1. In a year, how much does a doctor (e.g., general internal medicine physician) earn? Please enter a number only (e.g., 50000)
2. In a year, how much does a CEO of a large national corporation earn? Please enter a number only (e.g., 50000)
3. In a year, how much does a grocery worker (i.e., cashier at food and beverage store) earn? Please enter a number only (e.g., 50000)
4. In a year, how much does a clothing retail worker (i.e., retail salesperson) earn? Please enter a number only (e.g., 50000)

Then participants read: Now, we would like to know what you think people in these jobs **should** be paid. How much do you think people in each position should earn per year before taxes on average, regardless of what they actually get?

1. In a year, how much should a doctor (i.e., general internal medicine physician) earn?
2. In a year, how much should a CEO of a large national corporation earn?
3. In a year, how much should a grocery worker (i.e., cashier at food and beverage store) earn?
4. How much should a clothing retail worker (i.e., retail salesperson) earn?

For each estimate, we logged participants' responses (because they were highly skewed) and then created a difference score for should – estimate. Positive number indicate participants thought these workers should earn more, whereas negative numbers indicate participants thought these workers should earn less.

At Time 2 and Time 3, we piped in participants' previous estimates and then asked participants again how much they thought each group should earn. Specifically, we said: "In the first survey, we asked you to estimate what you thought people in various jobs actually earn. We will show you your previous estimates, and then ask you to indicate what you think people ***SHOULD*** earn in these jobs."

We again logged participants' responses and created a difference score for estimate$_{T1}$ – should$_{T2}$ and estimate$_{T1}$ – should$_{T3}$. Negative numbers indicate participants believe the group should earn *more* than they do. Positive numbers indicate participants believe the groups should earn less than they do.

1.   Results with participants who completed all 3 waves

We conducted a linear regression with personal harm at Time 1 (i.e., X_1) on salary for workers measures at Time 3 (i.e., Y_3) and include the same control variables (i.e., gender, age, race, political orientation, personal income, and education level) as in the main text. We cannot control for Time 1 difference scores because these scores are used to compute Time 3 difference scores. Results indicate no significant effect of personal harm on participants attitudes toward the salary of workers (all $p > .05$).

2. Results with imputed data

We also conducted a linear regression using imputed data with personal harm at Time 1 (i.e., X_1) on salary difference scores at Time 3 (i.e., Y_3) and include the same control variables as in the previous analysis instead using imputed data. Similar to the results with participants who completed all 3 waves, there was no significant effect of personal harm on participants' attitudes toward the salary of CEOs, doctors, or grocery workers.

C. Belief that people should care for each other more

At Time 2 and Time 3, to assess participants' preferences that U.S. society should care more for people, we asked participants how much they agreed with the following two items:
1. In U.S. society, people should care for each other more.
2. In U.S. society, people should take care of themselves. (*reverse-scored)*

1. Results with participants who completed all 3 waves

We conducted a linear regression with personal harm on the belief that people should care for each other more and included the standard set of control variables. Results indicated that personal harm predicted participants' belief that people should care for each other more at Time 2: $B = .09$, $SE = .01$, $p = <.001$ and Time 3: $B = .04$, $SE = .02$, $p = .016$.

2. Results with imputed data

We could not impute data for this variable because we only collected this measure at T2 and T3 (i.e., we did not have a baseline measure at T1).

D. Awareness of racial inequality

At Time 2 and Time 3, to assess participants' awareness of racial inequality, we asked participants how much they agreed with the following item:
1. People of color have experienced an unequal amount of adversity from the coronavirus pandemic.

1. Results with participants who completed all 3 waves

We conducted a linear regression with personal harm on awareness of racial inequality and included the standard set of control variables. Results indicated that personal harm predicted participants' awareness of racial inequality at Time 2: $B = .06$, $SE = .02$, $p = .01$ and Time 3: $B = .09$, $SE = .03$, $p = .002$.

2. Results with imputed data

We could not impute data for this variable because we only collected this measure at T2 and T3 (i.e., we did not have a baseline measure at T1).

E. Awareness of economic inequality

At Time 1, we asked participants "To what extent do you agree with the following statements?"

1. The coronavirus pandemic has made me more aware of the importance of low-wage workers (e.g., grocery workers, teachers).
2. Differences in income in America are too large.
3. The coronavirus pandemic has made me more aware of economic inequality.

At Time 2 and Time 3, we included the same items as in Time 1 and added the following item:
1. People in poverty or those with fewer resources have experienced an unequal amount of adversity from the coronavirus pandemic

1.   Results with participants who completed all 3 waves

We conducted a linear regression with personal harm on awareness of economic inequality and included the standard set of control variables. Results indicated that personal harm predicted participants' awareness of economic inequality at Time 2: $B = .08$, $SE = .02$, $p < .001$ and Time 3: $B = .09$, $SE = .02$, $p < .001$.

2.   Results with imputed data

We also conducted a linear regression using imputed data with personal harm at Time 1 (i.e., X_1) on awareness of inequality at Time 3 (i.e., Y_3) and include the same control variables as in the previous analysis instead using imputed data. Similar to the results with participants who completed all 3 waves, personal harm predicted participants' awareness of inequality at Time 2: $B = .07$, $SE = .01$, $p < .001$ and Time 3: $B = .07$, $SE = .01$, $p < .001$.

III.   Results with non-imputed data (participants who completed all 3 waves)

We conducted the following analyses with the same set of control variables included in the main text (i.e., individual differences and baseline attitudes).

A.   Advocacy for equality

With the smaller, non-imputed sample, we found that personal harm greater personal harm from the pandemic was associated with increased advocacy for equality one year later. Specifically, personal harm predicted an increase in attitudinal advocacy for equality ($B = 0.03$, $SE = .01$, $p = .028$, 95% CI [0.003, 0.056]) and behavioral advocacy for equality ($B = 0.05$, $SE = 0.01$, $p < .001$, 95% CI [0.03, 0.08]) one year later.

B.   External Attributions for inequality

Supporting Hypothesis 2, we found that experiencing greater personal harm was associated with trending, but not significantly greater endorsement of external attributions for inequality five months later ($B = 0.02$, $SE = 0.01$, $p = .083$, 95% CI [-0.00, 0.05]).

C.   Mediation

Given that personal harm was only trending (but not significantly) related to greater endorsement of external attributions for inequality at T2, it is unsurprising that there was no significant effect of mediation for attitudinal advocacy for equality.

IV.   Results without controls

A.   Advocacy for equality

Supporting Hypothesis 1, we found that experiencing greater personal harm from the pandemic was associated with advocacy for equality one year later. Specifically, personal harm predicted an increase in attitudinal advocacy for equality ($B = 0.15$, $SE = 0.02$, $p < .001$, 95% CI [0.10, 0.19]) and behavioral advocacy for equality ($B = 0.07$, $SE = 0.01$, $p < .001$, 95% CI [0.04, 0.10]) one year later.

B.   External Attributions for inequality

Supporting Hypothesis 2, we found that experiencing greater personal harm was positively associated with endorsement of external attributions for inequality five months later ($B = 0.12$, $SE = 0.02$, $p <.001$, 95% CI [0.08, 0.15]).

C.   Mediation

Supporting Hypothesis 3, we found that external attributions for inequality at T2 mediated the relationship between personal harm at T1 and advocacy for equality for both attitudinal and behavioral measures at T3: attitudinal advocacy for equality ($B = 0.07$, $SE = 0.01$, 95% CI = [0.049, 0.087] and behavioral advocacy for equality ($B = 0.02$, $SE = 0.003$, 95% CI = [0.014, 0.025]. These analyses yielded 95% CIs that did not cross zero, suggesting that the indirect effects of personal harm on advocacy for equality through external attributions of inequality were significant.

V.   Results with the Time 1 subset of Advocacy for Equality

We recognize how general governmental support and governmental support *specific* to Covid-19 could reflect two distinct constructs. However, given that they are conceptually related, and we understood them as a unitary construct, we conducted a factor analysis to determine whether all of the items we measured tapped into a single overarching construct of participants' attitudinal advocacy for equality. The factor analysis revealed that all six items loaded highly (all loadings ≥ 0.71) onto a single factor accounting for 66% of the total variance at Time 2 and 68% of the total variance at Time 3. The results of this factor analysis suggest that all six items tap into an underlying construct of general advocacy for equality. Therefore, we combined these items to form an index of attitudinal advocacy for equality.

Nevertheless, we examine our effects with the subset of measures that are not specifically about Covid-19 (i.e., original measures from Time 1) and find similar, but non-significant results. When we control for participants baseline attitudinal advocacy for equality at T1 and the standard set of controls, we find a trending effect of personal harm at T1 on increased attitudinal

advocacy at Time 2 ($B = 0.02$, $SE = .02$, $t = 1.77$, $p = .08$) and Time 3 ($B = 0.01$, $SE = .01$, $t = 0.86$, $p = .39$). With the non-imputed data, we find stronger effects: Time 2 ($B = 0.02$, $SE = .01$, $t = 2.04$, $p = .041$) and Time 3 ($B = 0.02$, $SE = .02$, $t = 1.19$, $p = .24$). These results suggest that personal harm from the Covid-19 pandemic may be more impactful on people's advocacy for equality related to the pandemic.

However, as requested, we also analyze and report the results in the Supplemental Material with the subset of measures that are about more general government support, not those that are not specifically about governmental support specific to Covid-19 (i.e., original measures from Time 1). We analyze results controlling for participants baseline attitudinal advocacy for equality at T1 and the standard set of controls. We find similar results that mostly fail to reach significance when utilizing both non-imputed and imputed datasets. First, when using non-imputed data, we find a significant effect of personal harm at T1 on increased attitudinal advocacy at Time 2 ($p = .041$). The effect is still in the correct direction but nonsignificant at Time 3 ($p = .24$). We find relatively weaker effects when using the imputed dataset: a trending but nonsignificant effect of personal harm at T1 on increased attitudinal advocacy at Time 2 ($p = .08$) and a nonsignificant effect at Time 3 ($p = .39$).

VI.   Relationship between personal harm and advocacy for equality at all 3 time points

Personal harm at each time point was positively associated with attitudinal advocacy for equality in at the corresponding time in the survey (Time 1: $B = .060$, $SE = .02$, $t = 3.78$, $p < .001$; Time 2: $B = .045$, $SE = .02$, $t = 3.04$, $p = .002$; Time 3: $B = .052$, $SE = .02$, $t = 3.16$, $p = .002$). Furthermore, personal harm was positively associated with behavioral advocacy for equality (Time 2: $B = .05$, $SE = .01$, $t = 4.18$, $p < .001$; Time 3: $B = .05$, $SE = .01$, $t = 4.20$, $p < .001$). Non-imputed results are the same.

VII.   Relationship between personal harm and external attributions at all 3 time points

Personal harm at each time point was positively associated with external attributions for inequality in at the corresponding time in the survey (Time 1: $B = .05$, $SE = .01$, $t = 4.67$, $p < .001$; Time 2: $B = .04$, $SE = .01$, $t = 4.64$, $p < .001$; Time 3: $B = .04$, $SE = .01$, $t = 4.86$, $p < .004$).

VIII. Moderation

To determine whether there were any systematic differences across various social groups for our effects, we conducted moderation using 10,000 bootstraps resamples and including our standard set of controls (e.g., demographics and baseline attitudes).

A.   Social class

Results indicated no significant moderation by education level on attitudinal advocacy for equality ($p = .84$), behavioral advocacy for equality ($p = .49$), or external attributions for inequality ($p = .50$).

B. Political orientation

Results indicated no significant moderation by political orientation on attitudinal advocacy for equality ($p = .77$) or external attributions for inequality ($p = .22$). There was, however, significant moderation by political orientation for behavioral advocacy for equality ($p < .001$). The effect of personal harm on behavioral advocacy for equality was strongly for liberals than conservatives.

C. Gender

Results indicated no significant moderation by gender on attitudinal advocacy for equality ($p = .08$), behavioral advocacy for equality ($p = .46$), or external attributions for inequality ($p = .88$).

D. Age

Results indicated no significant moderation by age on attitudinal advocacy for equality ($p = .26$), behavioral advocacy for equality ($p = .95$), or external attributions for inequality ($p = .92$).

E. Race/Ethnicity

Results indicated no significant moderation by race for support on attitudinal advocacy for equality ($p = .95$), behavioral advocacy for equality ($p = .78$), or external attributions for inequality ($p = .33$).

F. Income

Results indicated no significant moderation by income for support on attitudinal advocacy for equality ($p = .92$), behavioral advocacy for equality ($p = .64$), or external attributions for inequality ($p = .32$).

IX. Internal Attributions for Inequality

We tested whether the amount of personal harm from the coronavirus pandemic was associated with fewer internal attributions for inequality. Results indicate that, at all three time points, there was no significant relationship between personal harm and internal attributions for inequality ($p > .05$). These results suggest that personal harm has relatively little effect on people's internal attributions for inequality. This result is consistent with previous research showing that people's external understandings of inequality are more malleable than internal ones (McCall et al., 2017; Wiwad et al., 2020).

X. Subset of participants who did not experience harm at Time 1 but did experience harm at Time 2

We examined the pattern of results for people who did not experience harm at Time 1 but then did experience harm at Time 2. These analyses help to test whether a shift in attitudes took place among this subset of people. These analyses included with the same set of control variables included in the main text (i.e., individual differences and baseline attitudes).

A. Advocacy for equality

Those who were not personally harmed initially (T1) but then were later harmed (T2) indicated greater attitudinal advocacy for equality at Time 3 ($M = 5.61$, $SE = .062$) compared to those that experienced no harm at all ($M = 5.45$, $SE = .040$; $F = 4.57$, $p = .026$, $\eta^2 = .01$. There was no significant difference for behavioral advocacy for equality at Time 3 ($p > .05$).

B. External Attributions for inequality

There was no significant difference between those who were not personally harmed initially (T1) but then were later harmed (T2) on external attributions for inequality at Time 3 ($p > .05$).

C. Mediation

Given that personal harm did not predict greater of external attributions for inequality at T2, it is unsurprising that there was no significant effect of mediation.

XI. Attrition Analyses

Supplemental Table 1

Demographic differences in completion

	Completed All Three Waves	Did Not Complete All Three Waves
Participant characteristic		
Personal Harm**	1.92 (1.96)	2.26 (2.32)
Personal Income***	3.26 (1.81)	3.69 (1.89)
Age***	42.17 (12.96)	34.74 (11.30)
Political Affiliation	3.24 (1.69)	3.22 (1.56)
Education	4.04 (1.41)	4.11 (1.34)
	N (%)	
Participant characteristic		
Gender**		

Women	54.9%	46.4%
Men	45.1%	53.6%
Race***		
Racial minorities	24.6%	32.7%
White	75.4%	67.3%

Notes. Asterisks indicate characteristics that are significantly different between those who completed all three waves and those who did not complete all three waves. *.01 < p < .05, **.001 < p < .01, *** p < .001.

XII. Demographic differences in predicting outcomes

Supplemental Table 2
Demographic differences in attitudinal advocacy for equality, behavioral advocacy for equality and external attributions for inequality

	Attitudinal Advocacy for Equality	Behavioral Advocacy for Equality	External attributions for inequality
Personal Income	-0.05	0.03*	0.01
Race/Ethnicity	-3.07*	-0.37	-0.47***
Education	-0.01	0.09***	0.11**
Age	-0.01*	0.001	-0.008*
Gender	0.16	0.05	0.11

Notes. For consistency with the main text, we report results for attitudinal advocacy for equality and behavioral advocacy for equality at T3. We report results for external attributions for inequality at Time 2. No controls were included in these analyses. Numbers reflect unstandardized beta coefficients. *.01 < p < .05, **.001 < p < .01, *** p < .001.