**Abstract**

The US has not developed a comprehensive welfare state, unlike most other Western countries. This has been subject to a number of different interpretations. One of the prominent theories is that Americans carry a special creed of individuality and liberty that can be traced back to the establishment of the American nation state. This cultural “American exceptionalism” is argued to be a hindrance to welfare state development in the past as well as in the future. The article challenges this cultural essentialist interpretation by comparing the attitudes towards government responsibility for welfare policies among first generation American migrants living in Germany, the Netherlands and Denmark to Americans living in the US. The article finds, using propensity score matching, that the Americans exposed to the institutional context of North European welfares states are more supportive of governmental responsibility for sick, pensioners, unemployed and redistribution than are the American control group.

Keywords:American exceptionalism, migration, adaption, welfare state, socialization

**Introduction**

The absence of a developed welfare state in the US is somewhat of a puzzle. A number of early theories argued that economic modernisation would be followed by a functional need for establishing a welfare state to cover the risks associated with industrial society. This understanding of welfare state development found support in the fact that most Western countries established welfare policies to help the sick, the permanently disabled, the unemployed, and the old (H. L. Wilensky and Lebeaux 1965; H. Wilensky 1975). During welfare state expansions such as The New Deal and The Great Society, the US also developed welfare schemes such as Social Security for pensioners and the permanently disabled, Medicaid and Medicare for sick, unemployment benefits, and AFDC/TANF for the very poorest families (Quadagno 1999). However, compared to the other Western countries, the American welfare state is less generous and has a stronger emphasis on poverty relief. According to Castles (2008) the US only spends around 16 % of GDP on publicly funded welfare, which is the lowest among the OCED counties included in the study. Therefore the US is still described as a welfare laggard and served as the most ideal typical example of a liberal welfare regime in Esping-Andersen’s seminal work on cross-national differences in welfare state development in the Western countries (1990; 1999). The question posed in this article is whether Americans, born and raised in the US, are culturally “locked” into the position of preferring limited government responsibility for covering social risks? The article thus adds to a long standing academic debate about the impact of institutions and culture on public opinions about the responsibilities of government. Our point of departure is theories that focus on the importance of the contemporary institutional context rather than stable historical values obtained through early socialization. This position would agree with the interpretation that Americans’ attitudes towards the role of the government in providing welfare are quite “sticky”. However, it would disagree with the interpretation that Americans could never come to embrace comprehensive welfare schemes if they happened to be put in place. To contribute to this debate, the attitudes toward government responsibility of a group of first generation American migrants living in one of three European countries, Germany, Denmark and the Netherlands, are compared to Americans living in the US.

The article is divided into six sections. The first section outlines the arguments about American exceptionalism and the argument about institutional feedback effects. The second section introduces the idea of using migrants as a natural experiment to study the impact of institutions. The third section outlines the data, the variables, and the applied methods. The fourth section provides the results. The fifth section summarizes and discusses the results.

**Culture, Institutions And Attitudes Towards The Welfare State**

The origins of public opinions about the size and the responsibility of government have been theorized with point of departure in numerous theories, including self-interest (Meltzer and Richard 1981), class-mobilization (Korpi 1980), moralizing deservingness discussions (Aarøe and Petersen 2014), socialized values (Inglehart 2008), and institutions (Hedegaard and Larsen 2014). This article is positioned in the strand of literature that emphases that the societal context matters. Within this literature, the overall point is that welfare attitudes cannot be reduced to universal logics, that is, universal self-interest effects, universal deservingness effects or universal class interest effects. Therefore this strand of literature has had a focus on the cross-national differences in attitudes, as this allows for comparing whether attitudes towards government responsibility varies between countries (Jæger 2009; Svallfors 1997; van Oorschot and Meuleman 2012). This comparative research has been based on the international survey programmes like the Internal Social Survey Program (ISSP), The World Value Study, and The European Social Survey. Especially the ISSP module on “Role of the Government” has been used to study public attitudes towards state responsibility (Bean and Papadakis 1998; Brooks and Manza 2007; Svallfors 2003b). The ISSP 2016 module on the “Role of the Government” shows that in the US, as in all other countries, a clear majority indicate that it should be a state responsibility to provide a descent standard of living for the old and healthcare of the sick. However, by comparative standards, the public support for welfare state invention in these classic areas is lower in US than in most other Western countries. The differences are larger when it comes to the government’s responsibility for taking care of redistribution between rich and poor, and providing a decent standard of living for the unemployed. In these two areas, the Americans are much less inclined to support state intervention. Thus, Americans do not simply reject welfare state development, but the support is lower than in most other Western countries and there is clear opposition to government responsibility for redistribution and securing the living conditions of the unemployed.

The interpretation of this societal context-effect varies. One of the primary divisions runs between an institutional versus a cultural account. The idea of American exceptionalism falls in the latter category. The narrative of a special American culture has long existed within both popular culture and a number of scholarly fields (for a historical overview see Cullen 2004; Samuel 2012). The most prominent example of this is Lipset (1997), who argues that for historical reasons, which can be traced back to the American Revolution, a special “American creed” hinders support for welfare policies and government intervention in general. Central to this creed is values of liberty, equal opportunity, individualism and populism, which Americans according to Lipset (1997) find to be incongruent with having a large welfare state. This American exceptionalism has been used to explain why socialism and labour unions never got a foothold in the US (Lipset 1997; Sombart 1976), why Americans accept the contemporary high and rising income differences (Larsen 2016; Manza and Brooks 2017), and why unemployed and poor are believed to have good opportunities for upward mobility (Hochschild 1979; 1995). The cultural account has also had a prominent place in explaining cross-national differences in attitudes towards public childcare and elderly care within Europe; the argument being that deep cultural differences towards family life shape the public policy preferences across countries (Pfau-Effinger 2005; van Oorschot, Opiekla, and Pfau-Effinger 2008). The cultural account basically interprets contemporary cross-national differences as a reflection of a broader set-up of historically given cultural values, which has the potential to explain both the presence or absence of contemporary institutions and the contemporary attitudes towards these institutions and imagined alternatives (see e.g. Lamont (2012) for a more general account of using culture as an explanation for cross-national differences in attitudes).

The institutional account interprets contemporary cross-national differences in welfare attitudes as the outcome of cross-national variations in the institutional structures of the welfare state, which the current public has inherited from previous generations. The inherited programmatic structure can shape public opinions in various ways. One mechanism is that the public has a tendency to find the institutions in place “normal” (Svallfors 2003a). For instance, if healthcare for the working population is mainly financed through private insurances, instead of general taxation, it can be hard for the public to imagine another system. This simple feedback mechanism is often believed to be complemented by a tendency to justify the current social order (e.g.1980). Another mechanism is that institutions shape the self-interests of the public. For instance, if a system with public pensions is inherited, large segments of the electorate might perceive it to be in their self-interest to defend these institutions, while the opposite is the case in a system based on private pensions (Béland and Hacker 2004; Pierson 2001). Thus, if fewer people rely on public healthcare or pensions, it is to be expected that these schemes receive less public support. A third mechanism is that the inherited programmatic structure of the welfare state shape perceptions of efficiency, procedural justice, and images of target groups. This mechanism is especially useful for explaining the low support for governmental responsibility for taking care of poor and unemployed in the US. The main argument has been that the more dominant role of means-tested policies found in liberal regimes such as the US generates reluctance towards state interventions. Means-tested polices targeted at “the poor” have the following problems: 1) they establish a symbolic boundary between “them and us”; 2) they generate incentives problem among low-paid, as benefits and services are reduced when income increases (poverty traps); and 3) they reduce procedural justice, as clients have incentives to enter the target group of the schemes and as more discretion is left to the front line personal (Rothstein 1998; Schneider and Ingram 1993; Titmuss 1974). These feedback effects produced by targeted welfare schemes help to explain why Americans especially came to dislike programmes such as TANF (former AFDC), Food Stamps and General Assistance (Gilens 2000). In the American case “those” at the bottom have primarily been perceived to be blacks, which probably has increased these classic negative feedback effects from targeted benefits (Gilens 1996; Gilens 2000). However, it is not all about race as similar negative stereotypes about poor and unemployed can be found in other countries with a dominance of targeted benefits but with a dominant perception of the (perceived) underclass being white (Dejgaard and Larsen 2011; Larsen 2013) .

***The Case Of American Migrants In The Netherlands, Denmark And Germany***

The studies of cross-national differences in welfare attitudes have provided ample evidence for the presence of context effects. It is evident that public opinion in a number of areas varies across countries. However, the methodological setup is not well-suited to distinguish between the institutional and the cultural account, which often both provide plausible interpretations of the same empirical data. For the institutional account, the optimal design would be to exogenously change the institutional structures of welfare states and trace the development in public opinion. Such exogenous regime change rarely happens though the reunification of East- and West-Germany provided an interesting case. Following the institutional line of reasoning, Svallfors (2010) predicted that the replacement of the socialist East-German welfare state with the conservative West German welfare state would change welfare attitudes in East-Germany. Using the ISSP Role of Government surveys, Svallfors (2010) demonstrated that East-Germans did indeed change their attitudes towards the size and responsibilities of the welfare state in the direction of West-Germans. Svallfors (2010), however, also found this process to be mainly driven by generational replacement, which both can be given a cultural explanation (a new generation socialised with new values) and an institutional explanation (a generation exposed to different programmatic structure of the welfare state). Thus, overall it has proved difficult to solve the “chicken and egg-problem” of whether institutions shape welfare attitudes, or whether culture is a background variable that shapes both institutions and welfare attitudes.

The article follows an emerging literature, which studies the institutional effect by analyzing the attitudes of migrants who had the institutional structure of the country of origin replaced with that of the country of destination. Following this logic of treating migration as a natural experiment it has been shown that migrants in general adapt to host-country attitudes towards government responsibility for providing welfare (Reeskens and van Oorschot 2015), to norms of female employment (Breidahl and Larsen 2016), and to generalized trust (Dinesen and Hooghe 2010; Dinesen 2012). This article adds to this literature by sampling a large and specific group of migrants, in our case first generation Americans, where the natural experiment “replaces” the programmatic structure of the US welfare policies with the programmatic structure of the welfare policies found in Denmark, the Netherlands and Germany. The primary socialization into American culture is kept constant by only interviewing first generation migrants that entered the host countries in the age sixteen or older (see below).

Denmark, the Netherlands, and Germany have more comprehensive welfare schemes than what is found in the US. Following Esping-Andersen (1990), Denmark can be classified as a social democratic welfare regime with a number of universal benefits and a large service sector organized along universal principles. Germany can be classified as a conservative welfare regime with compulsory social insurances and a less developed service sector. The Netherlands can be classified as a mix between the social democratic and conservative regime. The size of the welfare states is reflected in the level of inequality and poverty rates. In 2013, Gini-coefficients (household disposable income after taxes and transfers) were 0.25 in Denmark, 0.28 in the Netherlands and 0.29 in Germany compared to 0.39 in the US. The poverty rates (below 50 percent of median income after tax and transfers) were five percent in Denmark, eight percent in the Netherlands and nine percent in Germany compared to 17 percent in the US according to the OCED. If one turns to the programmatic structures of specific schemes, the differences become more complex. As for the risk of bad health, Denmark has a fully tax-financed universal healthcare system provided to all residents. The Netherlands and Germany has a compulsory insurance system, which also covers all residents. As the only developed Western country, the US has a privately organised healthcare system supplemented by tax-financed treatment of the uninsured poor (Medicaid) and the elderly (Medicare). As for “risk” of old-age, Denmark and the Netherlands have a Beveridge type universal peoples’ pension provided to all residents, which is financed by taxes in Denmark and social contribution in the Netherlands. Germany and the US have a Bismarckian type insurance system financed by compulsory contributions from employers and employees provided to all with a work history. As for the risk of unemployment, the countries have somewhat similar systems. They all have a non-means-tested benefit labelled “unemployment benefits”. In the Netherlands, Germany and the US, participation is compulsory, while it is voluntary in Denmark (with a take-up rate around 70 percent of workers). In all countries the unemployment insurance programme is supplemented with means-tested poverty relief programmes for non-insured. However, the generosity of these programmes to able-bodied persons in working ages varies, e.g. in terms of length. As for unemployment benefits, the Danish scheme provides twenty-four months of coverage, the Dutch between three to thirty-eight months (depending on work history) and the German between six to twenty-four months (again depending on work history). In contrast, the American unemployment benefits only cover a fixed period of six months (although extensions of the period are possible during economic downturns). Partly for this reason, more Americans rely on the residual means-tested schemes than is the case in Denmark, the Netherlands and Germany.

The empirical question is how first generation American migrants come to think about the responsibility of the government, once they are exposed to the more comprehensive welfare states found in Northern Europe and the outcome they produce in terms of lower levels of economic inequality and poverty. The optimal design would be to move a random sample of Americans to Europe and to measure attitudes before the migrants left the US (before “treatment”) and after they have lived in Denmark, the Netherlands and Germany for a while (after “treatment”). However, such data is impossible to generate for both practical and ethical reasons. Instead, we rely on cross-sectional comparison between samples of first generation American migrants in Europe and compare them to Americans living in the US. The main challenge of this setup is that the Americans that migrated are unlikely to be a random group of Americans. Therefore we will use matching procedures to established a comparable “control group” of Americans living in the US (more on this in the next section). If the argument about American exceptionalism is right, we expect no difference in attitudes towards governmental responsibility between first generation American migrants and the control group. The premise is that socialization into a culture takes place in childhood and youth (Inglehart 1990; Sears and Levy 2003). However, if the argument about institutional feedback is right, we expect first generation American migrants to be more in favour of governmental responsibility for welfare schemes than those in the control group.

**Data, Method and Variables**

The comparison between Americans living in the US and Americans living in Northern Europe is achieved by combining two surveys: The migrant’s welfare state attitudes (MIFARE) survey from 2016, and the US General Social Survey (GSS), also from 2016. The former is established with the exact purpose of measuring migrants’ welfare attitudes. The latter is the most comprehensive American survey study, which covers a broad range of issues. Both surveys include the well-established ISSP measures of government responsibility, which have been used in many previous comparative studies of welfare attitudes. By combining these two surveys we get a unique “treatment group” consisting of the Americans living in Germany, Denmark, and the Netherlands from the MIFARE-survey and a “control group” of Americans living in the US from the GSS.

The MIFARE-survey was collected among ten migrant groups and natives in Denmark, the Netherlands and Germany. For the purpose of this article we focus on the American respondents of which there are 841 living in Denmark, the Netherlands and Germanys (Germany N = 280; Denmark N = 310; The Netherlands N = 251). In both Denmark and the Netherlands, the MIFARE team had the opportunity to sample from population registers, which enabled them to test for the representativeness of the survey and to approach small migrant populations. In Germany, the MIFARE team contacted strategically selected municipalities.. The sample was limited to Americans who were above sixteen years old when they entered the host country and who have lived in the host country for a year or more (for a more detailed description of sampling and collection see (Bekhuis et al. 2018). Both thresholds where instituted to ensure that the migrants had living memories from both the US and the host country and that they had permanent residence by the UN definition (Font and Méndez 2013). In total the MIFARE-survey sampled 3102 first generation Americans, which with 841 respondents give a response rate of 25 percent. The low response rate reflects a standard problem with surveying migrant groups despite using incentives and the possibility to answer in both the language of country of origin and country of destination. For the Danish part of the MIFARE-survey we were able to test non-response using the population registers. For the Americans this showed a slight overrepresentation of the young, non-citizens and those in the workforce, but generally the differences were minimal. Of course, we were not able to apply these findings directly to the surveys collected in the other two countries, but given that the methods and sampling used were the same in the Netherlands, we see no reason to expect large differences. However, as the sampling in Germany was different, this finding might not be generalizable to that part of the survey (Bekhuis et al. 2018). On average, the first generation Americans had lived 18,6 years in Denmark, 17,3 years in the Netherlands and 19,4 years in Germany.

The GSS is a classic nationwide representative sample limited to respondent above the age of eighteen. For this purpose we excluded all non-US born, which resulted in a net-group of 2507 Americans. The “treatment group” of Americans living in Europe and the “control group” of Americans in the US were reduced to respectively 711 and 1886 after a listwise deletion of missing on the following compositional factors: sex, age, income, years of education and information on employment.

What we want to know is what the outcome would be, in this case the individual attitudes towards government responsibility, with and without the treatment, in this case with and without living in Europe. Since that is not possible to observe we will use the control group to answer the counterfactual question (Caliendo and Kopeinig 2008; Rosenbaum and Rubin 1983). However, the treatment- and control-group are not fully alike in ways that might affect the outcome. Table 2 in the appendixes provides the means for the two surveys on all variables used in the analysis. This shows that the “treated” Americans living in Northern European are slightly older and contains slightly more women than the “non-treated” Americans living in the US. In terms of education the American migrants are on average better educated than the Americans living in the US. Possibly as a result of this, the Americans living in Europe are also placed slightly higher in the national income hierarchies than are the natives in the three host countries. This could have different effects, as higher incomes generally tend to go with less support for government responsibility, while more education tend to go with more support for government responsibility, at least in a European context (Svallfors 2011). Finally, the “treated” Americans living in Europe are slightly more employed in the public sector than are the “non-treated” Americans living in the US. This could also be of importance as public employment tends to go with higher support for government responsibility (Hedegaard 2015; Tepe 2012). This leads to the simple conclusion that a method is needed in order to make the two groups of Americans comparable.

In this article we will apply statistical matching technique to deal with the problems of selection bias. To adjust for differences between the treatment group and control group we calculate a propensity score, which is the relative chance of getting the treatment, given a set of variables. This, again, relies on counterfactual logic as it calculates the chance of a group getting the treatment, even though we already know who is treated or not. Using this score we can find a statistical counterpart in the GSS for each interviewed in the MIFARE survey. We apply the standard method of nearest neighbour matching on the propensity score (Caliendo and Kopeinig 2008; Rosenbaum and Rubin 1983). Some matches in the control group were used several times, but no more than three times. Given that in this article we are interested in the effect of living in Europe, the matching is dictated by the treatment group. This is what is known as the average treatment effect on the treated. A large part of the “non-treated” group will therefore be left out. The discarding of part of the control group is the biggest difference between the matching technique and ordinary multivariate regression techniques, which use the full samples.

The matching procedure is well equipped to correct for differences to simple compositional differences between the Americans living in Europe and those living in the US. A more challenging issue is the potential problem of self-selection. If the decision to migrate to Europe is based on a political preference regarding the role of the state in providing welfare, then the argument of the article is problematic. Higher support for state responsibilities among Americans living in Europe could be a matter of Americans with these attitudes self-selecting into Europe and not a matter of the experiences derived from living in Europe. Though the decision to migrate is normally based on a myriad of factors, a tendency of progressive Americans to self-select into Europe cannot be ignored. Therefore we will also test the “robustness” of the results by matching on four additional factors which characterize left-leaning progressive Americans. These are attitudes towards gay marriage, attitudes towards traditional gender roles, attitudes towards government regulation of business, and perceived corruption among politicians. The questions on the rights of gays to marry and traditional gender roles are included to capture whether the Americans in Europe have more liberal values, as more liberal values and a greater support for extensive government responsibility often tend to go together. The measure of hostility towards government regulation of business is included since there might be a selection of the more “state positive” Americans into Europe. Finally, we will challenge the results by matching on perceived corruption, as perceived corruption has been shown to undermine support for government responsibility for redistribution (Svallfors 2013). Regarding these variables, the Americans living in Europe are more supportive of homosexuals marrying, women in the work force, government regulation of business and they perceive corruption to be less of an issue than do Americans living in the US. Our conservative assumption is to assume that these attitudes were in place before the decision of migration. This assumption is based on studies from political psychology, which demonstrate that attitudes to moral issues, such as homosexuality, tend to persist, while more political issues, such as the role of government in providing welfare, tend to demonstrate less stability (Sears and Levy 2003). The logic of these matching models is that we study differences in attitudes towards state responsibility after the progressive Americans living in Europe has been matched to equally progressive Americans living in the US. Or in more technical terms, the models take into account that attitudes towards gay marriage, gender equality, regulation of business and perception of corruption influence the chance of treatment.

The dependent variables originate from the GSS and have been repeated word-for-word in the MIFARE survey: “On the whole, do you think it should or should not be the government’s responsibility to…”, “provide healthcare for the sick”, “provide a decent standard of living for the old”, “provide a decent standard of living for the unemployed”, and “reduce income differences between the rich and poor”. Respondents were given the possibility to answer that “definitely”, “probably”, “probably not”, or “definitely not” should be a government responsibility. Respondents were also given a “cannot choose” option, which we treated as missing data for this and all other dependent and independent variables, unless anything else is noted.

For the rest of the variables we merged the two datasets in a way that would preserve the highest degree of detail. Sex and age in years were merged in a straightforward manner. Income is, however, a little trickier as a specific income is difficult to compare between the countries. Therefore we recoded the income questions, which where all posed as categorical questions, into quartiles based on the compositions of the national incomes in the country. This naturally resulted in the Americans in the US being split into four about equally large groups. However, for the Americans in Germany, Denmark, and the Netherlands this tells us about their relative position in the income hierarchy of the country. Education is measured as the total years of education obtained by the respondent, capped at twenty years in total. Public sector employment is coded as a categorical that simply distinguishes between working in the public sector or not, with a negative answers being the reference category. The two questions on values were also imported from the GSS and reads as statements: “Homosexuals should be free to get married if they want to” and “A man's job is to earn money; a woman's job is to look after the home and family”. For the statement on homosexuals being allowed to marry there was an overlap of scales running from “strongly agree”, “agree”, “neither agree nor disagree”, “disagree” to “Strongly disagree” on a five-point scale. However, for the statement on traditional gender values there was no middle category in the GSS. Attitudes towards government regulation were measured by using a statement on support for “Expanding the governmental regulation of business”. Here respondents could select that they are “strongly in favour of”, “in favour of”, “neither in favour of nor against”, “against”, or “strongly against”. Perceptions of corruption were measured using a question from the GSS repeated in the MIFARE-survey: “In your opinion, about how many public officials in Denmark are involved in corruption”. For this question the possible answers were: “almost none”, “a few”, “some”, “quit a lot”, or “almost all”. Means for each group in the active sample, that is, all respondents who answered all questions, can be seen in table 3 in the appendixes. For all variables we have not included “don’t know” or “cannot answer” categories. There are likely other variables that could be interesting to include in the matching process, however, the included questions represent all the questions where we have similar questions in the GSS and MIFARE surveys.

The results will be presented in three steps. First we will show differences between the Americans in Europe and the US in bivariate comparisons. After that we will use the matching to test whether these differences hold up once subjects are matched on compositional factors. Finally we match on attitudes towards gay marriage, traditional gender roles, government regulation, and perceived corruption in order to challenge the results.

**Results**

Figure 1 shows the average scores of Americans living in the US and those living in Northern Europe on the four dependent variables. The dependent variables are structured on a four-point scale, which represents the attitudes that it “definitely not” (0) or “definitely” (3) should be a government responsibility to take care of the task. Thus, a higher average indicates a higher support for government responsibility. We find clear differences between the “treated” Americans living in the US and the “non-treated” Americans living in the US. In all four areas the difference is sizeable and in the expected direction.

Figure 1. Attitudes towards responsibility of the government. Mean scores for Americans in the US and the three European countries.

*Note:* A listwise deletion on sex, age, income, education, and public employment was performed, so only respondents who are included in the models below are included here. Nmax: US = 1886; Europe 711.

Figure 1 also shows that differences are larger for the questions about securing the living standard of the unemployed (0.63) and redistribution (0.36) than for the sick (0.24) and the living standards of the old (0.3). The differences are statistically significant (at p>0.05) in all four areas, which provides initial support for the institutional argument, with all the reservations of compositional differences and potential self-selection outlined in the methods section.

***The Matching Models***

Table 1 shows the matching models with controls for compositional effect and self-selection. The question of self-selection is not easily handled, as it difficult to measure whether positive attitudes towards government responsibility were what caused migration out of the US and into Northern Europe. As discussed in the method section, we will take a very conservative approach and match the “treated” with Americans living in the US who have similar attitudes towards gay marriage, gender roles, government regulation and perceived corruption. The question is whether, one still can find differences in attitudes towards state responsibilities among these equally progressive Americans.

The first line shows the differences between the two groups after propensity scores matching based on sex, age, income, education, and public employment. The different variables are added to the model with the compositional effect separately. The last model, in the bottom row, includes the compositional model plus all the attitudinal variables. The effects are presented as unstandardized effects on the four-point scale. Positive scores thus reflect more support for government responsibility and negative less support for government responsibility after the matching procedure.

Table 1. Differences in attitudes towards government responsibility for the sick, the old, the unemployed, and income redistribution between Americans in Europe and in the US. Propensity score nearest neighbour matching on compositional effects and support for homosexuals marrying, traditional gender roles, regulation of business, and perceived corruption separately and combined. Unstandardized coefficients.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Provide healthcare for sick | Provide living standard for the old | Provide living standard for the unemployed | Reduce income differences between poor and rich | N-treatment | N-control |
| Compositional effects | 0.56\*\*\* | 0.38\*\*\* | 0.80\*\*\* | 0.44\*\*\* | 711 | 246 |
| & support for gay marriage | 0.38\*\*\* | 0.29\*\*\* | 0.62\*\*\* | 0.27\*\*\* | 707 | 318 |
| & traditional gender roles | 0.38\*\*\* | 0.32\*\*\* | 0.65\*\*\* | 0.14 | 710 | 215 |
| & regulation of business | 0.33\*\*\* | 0.26\*\*\* | 0.70\*\*\* | 0.22\*\* | 654 | 328 |
| & perceived corruption | 0.32\*\*\* | 0.21\* | 0.56\*\*\* | 0.21\* | 706 | 299 |
| All of the above | 0.29\*\*\* | 0.23\*\*\* | 0.65\*\*\* | 0.12 | 664 | 320 |

*Note:*  \* *p* < 0.05, \*\* *p* < 0.01, \*\*\* *p* < 0.001. Propensity scores calculated separately for each model. Compositional effects are: sex, age, income, education, and public employment.

The first line of Table 1 shows that the differences outlined in Figure 1 still exist, and in all cases actually are strengthened, when matching on compositional effects. This strengthening of the effects when matching is due to the fact that we are not comparing all Americans in Europe to all Americans in the US. Instead we are comparing to a relatively small slice of Americans in the US (246 out of 1886), which on background variables resembles those Americans living in Europe the most. Thus, the larger differences are caused by the fact that the “control group” of Americans living in the US are less in favour of government responsibility than Americans living in the US are in general. This is understandable as we match the “treated” to a group of somewhat more resourceful Americans living in the US. As we saw in Figure 1, the effects are stronger for attitudes towards the government taking responsibility for the unemployed (0.80\*\*\*), than for the sick (0.56\*\*\*) and the old (0.38\*\*\*) and redistribution (0.44\*\*\*). These are quite large effect sizes, given that the attitudes are tracked on a four-point scale. The effects by country are shown in the table 3 in the appendixes. This shows the same overall patterns as Figure 1 and Table 1, that is, the effect exists in all countries, except for responsibility for old age in Germany and redistribution in the Netherlands. We can also observe that the effects are generally stronger in Denmark, which supports the standard theses within the institutional framework that especially universal welfare regimes are likely to generate public support (Hedegaard 2014; Kumlin 2004; Larsen 2008). One variable we did not include in the compositional effects is length of stay. This is because when comparing the controls and treatments, the Americans in the US would all have no length of stay. Thus, we can only compare segments of the Americans in Europe to those in the US, for instance those with 1 or 2 years in Europe to those in the US and so on. These sub-analyses (not shown) showed that the length of stay had little effect on attitude differences (not shown).

The next lines in Table 1 show that the treatment effect is weakened when the attitudinal variables are added to the model. On all the questions, except government regulation of business, the Americans in Europe, are on average more liberal (see Table 2 in the appendixes). This weaken the effect when comparing the groups, as we now compare “the threated” to a more liberal group in the US. This is the effect we observe, as adding, respectively, attitudes towards gay marriage (second line) and attitudes towards gender rules (third line). We find a very similar impact on the support for government responsibility regarding the sick, the old and the unemployed. The treatment effects are about 50 percent lower when comparing the coefficient sizes with the models only matching on background variables. For attitudes towards redistribution, matching on traditional gender roles has a stronger effect; turning the effect insignificant (from 0.44\*\*\* to 0.14). Matching on, respectively, attitudes towards government regulation of business and perception of corruption in the state apparatus reduces the treatment effect in a similar manner. Finally, the last model matches on all background variables and attitudinal variables. This reduces the treatment effect but not much more than what is achieved by adding the attitudinal variables one at a time; an indication of the fact the all four variables tap into a similar left/right dimension. Thus, even in a model that matches on all variables, the Americans living in Europe are more positive towards government responsibility for providing healthcare for the sick (0.29\*\*\*) and a reasonable standard of living for the old (0.23\*\*\*) and the unemployed (0.65\*\*\*). However, when including all the questions in the calculation of the propensity score, the treatment effect disappears for reducing income differences between rich and poor (0.12). This might be tied to the fact that the American migrants are one of the most well-off migrant groups in all the countries (Bekhuis et al. 2018). Thus, if one thinks there is a self-selection of progressive Americans into the North European countries, it is only the attitudes towards general redistribution from the poor to the rich that can be (close) to fully explained by our most conservative model. In the three other areas, there is still a significant difference between the Americans living in Europe and the established (progressive) control group of Americans living in the US.

**Conclusion**

The article has challenged the essentialist argument that the American status as a welfare laggard is caused by a deeply rooted unchangeable cultural American exceptionalism (Lipset 1997; Sombart 1976). The public opinions of Americans do indeed seem to be severe obstacle to welfare state expansion (Larsen 2016; Manza and Brooks 2017) put from that one cannot infer the opinions are unchangeable or caused by special creed of individual and liberty that can be traced back to the establishment of the American nation state. Contemporary public opinions could alternatively be rooted in the programmatic structure, which contemporary Americans experience. The article sought to solve this classic “chicken and egg problem” by comparing Americans living in the US with Americans experiencing a different programmatic structure of the welfare state.

 This was achieved by combining the data of General Social Survey and the Migrants Welfare Attitudes Survey conducted among first generations Americans living in Denmark, the Netherlands and Germany, and applying propensity score matching. The empirical evidence suggests that even a person socialized in what is often believed to be a particular American anti-welfare-state culture can come to think it is a state responsibility to provide healthcare and decent living conditions for pensioners and unemployed. Our empirical results thus lend support to the classic argument that cross-national differences in attitudes towards state responsibilities are to be explained by the institutional structure of the welfare state, which the contemporary public inherited from the past. From these result one might even infer that if the programmatic structure of the American welfare state were changed in more European direction, the Americans living in the US would come to embrace it; as the Americans, living in North Europe have come to embrace the North European welfare states. For progressive policy makers in the US this should be a hopeful conclusion, as extending the welfare state, to the degree that it is possible, should therefore help build support for such welfare state expansions (as Pierson (1990) also argued). Thus building large scale welfare programmes like the Affordable Care Act (also known as Obamacare) will over time build support for its own continuation and possible extend over into other policy areas. Early indication is also that this is happening, as the Affordable Care Act is building support for both the policy and the government taking more responsibility for welfare (Blendon and Benson 2017). However, before making such a sweeping institutional argument, one should naturally by aware of the limitations of the methodological setup.

 Though the methodological setup is innovative, the limitations are numerous. The most obvious limitation is the potential of selection of progressive Americans, which we have discussed throughout the article. From our point of view, migration from the US to Northern Europe is probably caused by a number of factors, and we have done our best to establish a conservative test. However, it is still a valid concern. A second methodological limitation is that we only know (the average) treatment effect of the treated. The article only provides estimates of how Americans similar to those Americans living in the North European countries react to the treatment of living in different institutional structures. The Americans living in Germany, the Netherlands and Denmark distinguished themselves by being somewhat better educated than other Americans and placed higher in the income hierarchy than native Germans, Dutch and Danes. Thus, we do not know if similar effects would appear if a different group of Americans moved to the Northern European countries. A third methodological limitation is that the natural experiment of moving from one institutional context to another also produces a change in status from being a native to being a migrant. With reference to a long tradition within migration research (J. W. Berry 1997; J. Berry 2001), one could argue that migrants are especially open to de-cultivation (though evidence to the contray exist Hedegaard and Bekhuis 2018). This is probably right but it only points to the problems with any essentialist interpretation of American exceptionalism. A fourth limitation is that a quasi-experimental design and its contrafactual logic is not well suited to pin-point the mechanisms behind a given treatment effect. In our case, we do not know whether the treatment effect is caused by Americans living in Europe getting new perceptions of what is normal, what is feasible, and what is just, new images of the target group or just new self-interest in access to benefits and schemes. Taking the education and income of the American migrants into account, our guess is that the treatment effect has little to do with self-interest, especially when it comes to securing a decent living standard for the unemployed. Our institutional interpretation of the higher support for securing a decent living standard for the unemployed is the absence of the American residual welfare schemes, which fuel perceptions of inefficiency and negative stereotypes, no matter whether those at the bottom are white or non-white.

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**Appendixes**

Table 2. Means on all variables used in the analysis

|  |  |  |
| --- | --- | --- |
| Variable | Americans in the US | Americans in Europe |
| Government responsibility to provide healthcare for sick (0=Should not be, 3=should be) | 2.32 | 2.68 |
| Government responsibility to provide healthcare for old (0=Should not be, 3=should be) | 2.36 | 2.60 |
| Government responsibility to provide healthcare for unemployed (0=Should not be, 3=should be) | 1.59 | 2.22 |
| Government responsibility to reduce income differences between poor and rich (0=Should not be, 3=should be) | 1.64 | 1.94 |
| Sex (1=male, 2=female) | 0.55 | 0.52 |
| Age (in years) | 49.1 | 44.2 |
| Income quartile (l=lowest, 4=highest) | 2.44 | 2.64 |
| Education (in years, max 20) | 13.6 | 15.2 |
| Publicly employed (0=no, 1=yes) | 0.16 | 0.22 |
| Government regulation of business (1=Strongly in favour of, -5=Strongly against) | 2.53 | 3.10 |
| Corruption among politicians (1=Almost none,-5=almost all) | 3.36 | 2.26 |
| Support for homosexuals marrying (1=Strongly in favour of, -5=Strongly against) | 2.53 | 1.49 |
| Traditional gender roles (1=Strongly in favour of, -5=Strongly against) | 3.68 | 4.42 |

*Note:* Only respondents included in the models in table 1. Nmax: US = 1886; Europe 711. A listwise deletion was made on compositional effects (sex, age, income, years of education, public sector employment).

Table 3. Differences in attitudes towards government responsibility for the sick, the old, the unemployed, and income redistribution between Americans in Europe and the US. Propensity score nearest neighbour matching on compositional effects (sex, age, income, education, and public employment). Stratified by recipient country. Unstandardized coefficients.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Provide healthcare for sick | Provide living standard for the old | Provide living standard for the unemployed | Reduce income differences between poor and rich | N-treatment | N-control |
| Germany | 0.27\*\*\* | 0.09 | 0.64\*\*\* | 0.32\*\* | 230 | 116 |
| Denmark | 0.72\*\*\* | 0.50\*\*\* | 0.70\*\*\* | 0.16\* | 270 | 81 |
| Netherlands | 0.36\*\* | 0.18\*\* | 0.72\*\*\* | 0.14 | 211 | 95 |

*Note:* \* *p* < 0.05, \*\* *p* < 0.01, \*\*\* *p* < 0.001. Propensity scores calculated separately for each country.

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