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Democrats' and Republicans' Support for Women's and Men's Bodily Autonomy

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Supplementary Materials: Code, Data, Materials, Preregistration [see [Index of Supplementary Materials](#)]



Abstract

Bodily autonomy, bodily integrity, and their violations are much-discussed topics in philosophy, law, medicine, and feminist writing, yet social psychology has not paid this issue much attention. Focusing on opposing political parties in a polarized society, our study ($N = 407$) examined the extent to which Democrats and Republicans value liberty and freedom and their support for a specific type of freedom, namely bodily autonomy of women and men. Liberty and freedom were highly (and equally) valued by Democrats and Republicans in our sample. However, the two groups differed starkly in their support for bodily autonomy. Democrats, compared to Republicans, were much more supportive of women's bodily autonomy across a wide range of behaviors such as getting drunk, getting a tattoo, and declining sex from one's spouse. Interestingly, this difference also held for men's bodily autonomy, although the difference between political groups was larger for women's bodily autonomy. This difference was driven by behaviors related to women's reproductive functions, which were not included for men, suggesting that Republicans are particularly opposed to giving women full control over these types of decisions about their bodies. We conclude that even though Republicans often emphasize the importance of freedom and liberty, they show a lack of support for one fundamental freedom: the right to bodily autonomy. By revealing how abstract commitments to liberty diverge from support for bodily autonomy, our findings highlight the importance of psychological insights for understanding ongoing political and moral debates in a highly polarized society.



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Keywords

bodily autonomy, bodily integrity, political affiliation, gender, liberty, freedom

Highlights

- Bodily self-determination is a human right, yet is not always given equally to all groups. Women's bodily autonomy is often restricted, for example in the context of dress codes or reproductive choices.
- We show that both Democrats and Republicans claim they highly value liberty and freedom.
- However, Republicans are less supportive of the important freedom of bodily autonomy.
- This pattern emerged for women's and men's bodily autonomy but was particularly pronounced for women's reproductive freedoms.

"Freedom itself is at stake. This will be the most important election in the history of our country. If you want to strike a blow against the corrupt system in Washington, if you want to send a message to all of the people who want to take away your liberty, then right now in this election, we need your help." (Trump, 2024).

The above quote from a speech Donald Trump gave at the Libertarian Convention illustrates the value Republicans place on liberty and freedom as well as the concern that these values are under threat (see [Armaly & Enders, 2024](#)). Yet, there are many instances in which Republicans, more so than Democrats, support restricting liberty and freedom, for example, in the context of abortion ([Koleva et al., 2012](#)), medical aid in dying ([Kusmaul et al., 2023](#)), and sex work ([Morgenroth et al., 2025](#)). Notably, all of these are examples of restricting a specific type of freedom: Bodily autonomy.

Bodily autonomy and bodily integrity refer to the human rights to control what to do with one's body and what is done to one's body respectively ([Lewis & Holm, 2023](#)). However, despite being described as human rights, there are many examples in which bodily autonomy and integrity are restricted, for example, in the context of recreational drug use, which is largely prohibited (with exceptions such as for alcohol and nicotine) ([United Nations, 1988](#)) or medical aid in dying, which is illegal in most countries, including the majority of the United States, and highly regulated where it is legal (e.g., [European Court of Human Rights, 2002](#)).

Importantly, while many of these restrictions may be applied universally, other restrictions only or primarily restrict women's bodily autonomy. For example, laws in multiple states in the US prohibit women from being topless in public spaces ([Harbke & Lindemann, 2023](#)). Other laws, such as abortion bans, only apply to those with a female reproductive system.

However, even though bodily autonomy in general, and women's bodily autonomy specifically, are central topics within philosophy, law, and among feminist scholars, social psychology has not given the topic much attention. In addition, existing work often only focuses on one specific issue, such as abortion (e.g., Baker et al., 2022; Huang et al., 2014). These studies find that sexism, racism, conservatism, and religiosity, are all associated with stronger opposition to women's reproductive rights. However, given the narrow focus, it is hard to draw inferences about support for and opposition to bodily autonomy more broadly. We aim to fill this gap by focusing on a wide range of issues related to bodily autonomy.

Additionally, existing work examining the link between political affiliation and support for different issues of bodily autonomy (e.g., Matthews & Kreitzer, 2021) does not distinguish between support for women's and men's bodily autonomy (again with the exception of abortion, which does not apply to cisgender men). Our main focus is on women's bodily autonomy, given the historical and ongoing restrictions to bodily autonomy that women face, from restrictive dress codes to reproductive rights. However, as a comparison group, we also explore whether Republicans and Democrats differ in their support for men's bodily autonomy.

Lastly, previous research has predominantly examined support for laws that grant or restrict bodily autonomy. However, bodily autonomy can be restricted through means other than laws, for example, through social norms, close others (e.g., parents or romantic partners), or religious authorities. We therefore take a broader view of bodily autonomy by exploring not only how much autonomy women and men should have over their bodies but also who should have a say over their bodies if not they themselves.

Taken together, we examine Democrats' and Republicans' support for women's and men's bodily autonomy across a wide range of behaviors. Based on Republican rhetoric that focuses on liberty and freedom as well as previous findings that Republicans list freedom as a more important value (Eddy, 2024; Jones, 2025), we predict that Republicans, compared to Democrats, will rate Freedom and Liberty as more important values (H1), but that in contrast to these alleged values, Republicans, compared to Democrats, will be less supportive of women's bodily autonomy (H2). For exploratory purposes, we also examine Republicans' and Democrats' support for men's bodily autonomy and distinguish between different entities that people might endorse as decision-makers over women's bodies: their husbands, the government, and religious authorities.

We pre-registered hypotheses, target sample size, exclusion criteria, measures, and analyses (see Morgenroth et al., 2025). Deviations from the preregistration are noted in the manuscript. Full materials, data, and analysis code are available (see Morgenroth, 2025).

Method

Participants

We collected data for two separate projects in this survey and based the target sample size on the project that needed a larger number of participants. A power analysis using G*Power (Faul et al., 2009), assuming an effect size of $f = .15$, with 2 groups and four measurements and an estimated correlation of 0.50 between repeated measures suggested that we would need a sample size of 294 to achieve 90% power. However, because the other project required a larger sample size, we recruited 425 participants, as preregistered. We recruited equal numbers of gender-balanced samples of Democrats and Republicans (based on their pre-screening information) on Prolific. We excluded 16 participants who did not identify as Democrat or Republican. Two participants revoked their consent after being debriefed and were therefore also excluded, resulting in a final sample size of 407 (198 women, 201 men, 8 nonbinary people; 74.20% White; 78.62% straight; $M_{age} = 42.13$, $SD = 14.27$; see Table S1 in the online supplement for more information).

Procedure and Measures

The survey was advertised as a study about views on decision-making among children and adults and contained a section on children's bodily autonomy for a separate project. The two parts (children and adults) were presented in randomized order, and the data about children's autonomy were not analyzed in relation to the data presented here. In the part about adults, participants first responded to questions about decision-making regarding women's bodies, followed by questions about decision-making regarding men's bodies.

Each item was presented in the form of a statement describing a woman's (or man's) desire to do something or not do something (e.g., "A woman wants minor cosmetic procedures (e.g., laser hair removal);" "A woman does not want to have sex with her husband"). Participants were told to imagine that the woman (or man) in question was married to a man (or woman) and indicated the percentage to which this decision should be made by the woman (or man) herself (himself), her husband (his wife), the government, and religious authorities, with the total percentage summing up to 100 (see Figure S1 in the online supplement for example). Thus, for each individual item, we had 4 different measures, with the percentage allocated to the woman/man herself/himself measuring support for bodily autonomy.

The section about women contained a total of 23 different items, 9 about reproductive health (e.g., "A woman wants to start prescription birth control"), 9 about how women present their bodies (e.g., "A woman wants to get a facial piercing"), and 5 items about health-related decisions (e.g., "A woman wants to get drunk"). In line with our pre-registration, we ran an exploratory factor analysis on the 23 measures capturing to

what extent participants thought women should make decisions about their bodies (see pp. 8-10 in the online supplement). This analysis initially suggested a 3-factor solution. However, these factors were highly correlated ($r_s > .68$) with high cross-loadings across factors, as were the two factors in a 2-factor solution ($r = .76$). We therefore included all items in a single support for women's bodily autonomy scale that was highly reliable ($\alpha = .97$).

The section about men included 21 items. However, some of them referred not to their own bodily autonomy but their wife's (e.g., "A man wants his wife to terminate her pregnancy"). After excluding these items, 18 items remained, all of which mirrored items included for women (e.g., "A man wants to get drunk"). These items also formed a highly reliable scale ($\alpha = .96$), which we refer to as support for men's bodily autonomy.

After responding to the measures about women and men, participants indicated to what extent freedom, liberty, justice, equality, unity, and security were important values to them. Liberty and freedom were highly correlated ($r = .67$) and formed our measure of importance of liberty. Lastly, participants provided demographic information before being debriefed and paid.

Results

Descriptive statistics for Democrats and Republicans, correlations between the different variables, and results of a series of independent-samples t-tests on all individual behaviors can be found in Tables S1-S4 in the online supplement.

We first ran an independent-samples t-test to test whether Republicans, compared to Democrats, would rate liberty as a more important value (H1). Contrary to H1, the two groups did not differ $t(405) = 0.01$, $p = .993$, $d < .01[-0.19, 0.20]$ and a Bayesian independent-samples t-test indicated moderate evidence for the null hypothesis of no difference in the importance of liberty ($BF_{01} = 9.11$). Valuing liberty was associated with support for women's ($r = .15$, $p = .003$) and men's ($r = .17$, $p < .001$) bodily autonomy¹, but this effect was entirely driven by Republicans (see Table S4 in online supplement).

To test whether Republicans, compared to Democrats, would be less supportive of women's bodily autonomy (H2), we ran a 2(Political affiliation: Democrat vs. Republican) X 4(Decision-making power: Woman/man herself/himself vs. Spouse vs. Government vs. Religious authorities) mixed ANOVA with Bonferroni corrections for the simple effects analyses.² Results for this analysis as well as an exploratory analysis for men's bodily autonomy can be found in Table 1. Simple effects analyses revealed that Democrats and

1) When controlling for political affiliation, correlations remained significant for women's ($r = .16$, $p < .001$) and men's ($r = .19$, $p < .001$) bodily autonomy.

2) Please note that we had originally pre-registered a mixed ANOVA with Republican vs. Democrat as the between-participants factor and the different sub-scales of bodily autonomy as the within-participants factor. However,

Republicans differed for all four measures (all $ps < .001$; see Figure 1). In line with H2, Democrats, compared to Republicans were indeed much more supportive of women's bodily autonomy (i.e., allocated more decision-making power to the woman herself). Republicans, compared to Democrats, believed that the woman's husband, the government, and religious authorities should have more decision-making power over women's bodies. Interestingly, the same pattern emerged for men's bodies, suggesting that Republicans are less supportive of bodily autonomy in general, not just women's bodily autonomy.

Table 1*Mixed ANOVA Results Testing H2*

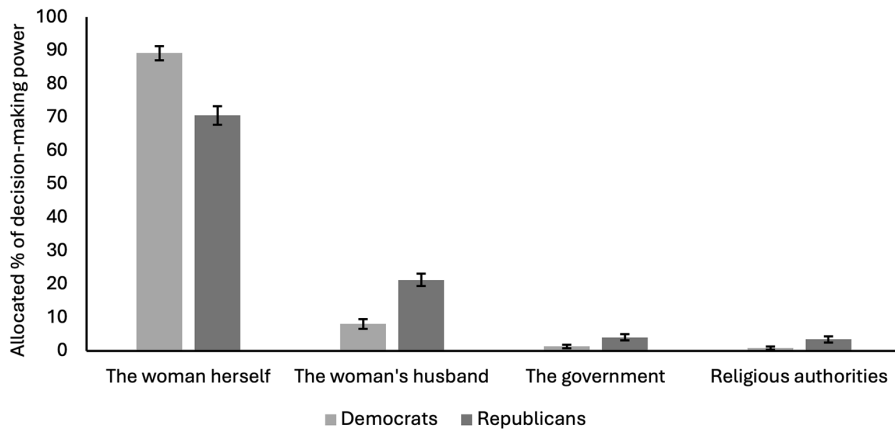
Variable	<i>df</i>	<i>F</i>	<i>p</i>	η_p^2
Women's bodily autonomy				
Political affiliation	1, 405	0.23	.630	< .01
Decision maker	1.32, 532.39	3253.56	< .001	.89
Decision maker X political affiliation	1.32, 532.39	105.69	< .001	.21
Men's bodily autonomy				
Political affiliation	1, 405	0.23	.635	< .01
Decision maker	1.34, 542.73	3048.90	< .001	.88
Decision maker X political affiliation	1.34, 542.73	81.56	< .001	.17

Note. We applied the Greenhouse-Geisser correction because sphericity assumptions were violated.

because we did not create different sub-scales of bodily autonomy, this analysis is not appropriate. We include the different decision makers as a within-participants factor to account for the non-independence of these values.

Figure 1

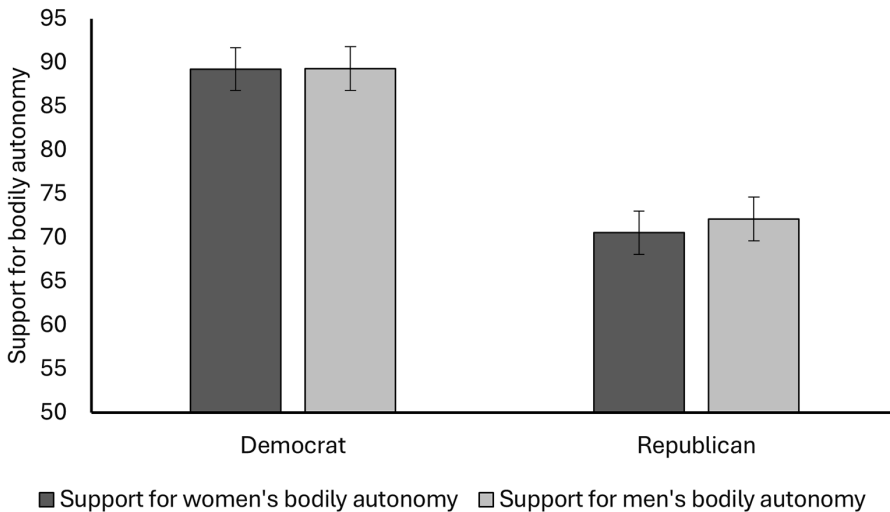
Illustration of How Much Decision-Making Power Democrats and Republications Allocated to Different Decision-Makers



Note. Error bars refer to 95% confidence intervals.

As an exploratory analysis, we ran a 2 (Political affiliation: Democrat vs. Republican) X 2 (Target gender/sex: Women's bodily autonomy vs. Men's bodily autonomy) mixed ANOVA to examine whether the extent to which participants supported women's bodily autonomy relative to men's bodily autonomy differed between Republicans and Democrats. We found a main effect of political affiliation, $F(1, 405) = 105.06, p < .001, \eta_p^2 = .21$, such that Democrats were overall more supportive of bodily autonomy than Republicans. We also found a main effect of target gender/sex, $F(1, 405) = 4.57, p = .033, \eta_p^2 = .01$, such that people overall were less supportive of women's bodily autonomy than men's bodily autonomy. However, this effect was qualified by an interaction, $F(1, 405) = 3.96, p = .047, \eta_p^2 = .01$. As illustrated in Figure 2, Republicans were more supportive of men's, compared to women's, bodily autonomy ($p = .004$), whereas there was no significant difference for Democrats ($p = .918$).³

3) Results for an analysis examining the moderating role of (binary) participant gender/sex can be found in Table S5 in the online supplement.

Figure 2*Support for Bodily Autonomy by Political Affiliation*

Note. Error bars refer to 95% confidence intervals. The y-axis only displays values above 50, not the full 0–100 scale of possible values.

When running the same analysis using only the 18 behaviors included for men, the main effect of political affiliation remained, $F(1, 405) = 99.52, p < .001, \eta_p^2 = .20$, but the effect of target gender/sex, $F(1, 405) = 0.14, p = .711, \eta_p^2 < .01$, and the interaction effect, $F(1, 405) = 1.19, p = .276, \eta_p^2 < .01$, were no longer significant, suggesting that the interaction reported above was driven by the behaviors specific to women's reproductive functions, namely terminating a pregnancy, using birth control, and breastfeeding, which were not included for men.

Discussion

We examined the extent to which Democrats and Republicans value liberty and freedom and their support for a specific type of freedom, namely bodily autonomy. Liberty and freedom were highly valued by both Democrats and Republicans in our sample. Indeed, contrary to our predictions, the two groups did not differ in their endorsement of these values. They did, however, differ starkly in their support for bodily autonomy. In line with predictions, Democrats in our sample were much more supportive of women's bodily autonomy across a range of behaviors such as getting drunk, getting a tattoo, and declining sex from one's spouse.

Interestingly, this difference also held for men's bodily autonomy, although these analyses were exploratory. Exploratory analyses further showed that while Republicans in our sample were less supportive of bodily autonomy for women and men, the difference between political groups was larger for women's bodily autonomy. However, this difference was driven by behaviors related to women's reproductive functions, which were not included for men, suggesting that Republicans are particularly opposed to giving women full control over these types of decisions about their bodies (see also Table S1 in the online supplement).

Examining different potential decision-makers, Republicans, compared to Democrats, in our sample, thought that spouses, the government, and religious authorities should all have more of a say in questions regarding bodily autonomy for women and men. By far the biggest difference was observed for spouses. While Democrats in our sample thought spouses should only have about 8% of the decision-making power, Republicans thought they should have approximately 14% of the decision-making power.

Theoretical and Practical Implications

Our study makes several contributions. First and foremost, we are (to our knowledge) the first to show that Republicans, compared to Democrats, are less supportive of women's bodily autonomy across a wide range of behaviors that go beyond reproductive rights and public toplessness.

Second, we show that this is potentially a reflection of Republicans' general opposition to bodily autonomy for anybody, regardless of gender/sex. Research has already shown that Republicans and Democrats have different definitions of freedom and liberty and views on which freedoms they perceive to be under threat (Armaly & Enders, 2024). We add to this literature by showing that despite valuing liberty and freedom to a high extent, bodily autonomy does not seem to fall under this umbrella for Republicans—at least not to the same extent as it does for Democrats. Indeed, it is possible that Republicans interpret “liberty” primarily as freedom from government, whereas Democrats view liberty as freedom from any interference from others. Future research should examine these nuances further.

The pattern that Republicans are less supportive of bodily autonomy for women and men is in line with a large body of literature showing the link between political affiliation and right-wing authoritarianism (i.e., support for, submission to, and aggressive defense of authorities and traditional norms) (e.g., de Oliveira Santos & Jost, 2024) and Republicans' reliance on the moral foundation of authority and tradition (Graham et al., 2009). Our work adds to this literature by showing that the body is another site where these beliefs and values take shape and where submission to authorities such as spouses, the government, and religion, are valued over individual self-determination. Given that partisan differences were especially pronounced for women's bodily autonomy, this

pattern has implications for understanding the continued perpetuation of gender roles and gender inequality.

Limitations and Future Research

Our work is not without limitations. First, our sample was not representative. Indeed, we specifically recruited only self-identified Democrats and Republicans and aimed for a gender-balanced sample within each category. We did so to eliminate participant gender/sex as a confounding variable, but this also means that our sample does not reflect actual differences in the population, where women are more likely to identify as Democrats and men are more likely to identify as Republicans.

Relatedly, Democrats and Republicans in our sample differed notably in religiosity (with 47% of Democrats, but only 16% of Republicans indicating they were agnostic or atheist). While these numbers are higher than in the general population, they reflect real-world differences in religiosity between Democrats and Republicans (Pew Research Center, 2024). Future research should examine the role that religiosity plays in views about bodily autonomy in general, and women's bodily autonomy specifically.

Moreover, our investigation was limited to the bodily autonomy of (presumed) cis-gender women and men who were married to men and women respectively. Future research should examine support for bodily autonomy of other groups, for example, transgender people, whose bodily autonomy (i.e., their ability to access gender-affirming care) is a polarizing issue in the United States. Likewise, given the high percentage of decision-making power Republicans allocated to spouses, it would be interesting to examine where this decision-making power goes for women and men who are not married or who are married to a same-sex partner.

Conclusion

Republican politicians such as Donald Trump often emphasize the importance of freedom and liberty. Yet they show a lack of support for one fundamental freedom: the right to bodily autonomy. We hope that this research can serve as a first step in exploring this interesting paradox and as a springboard for future research into attitudes towards bodily autonomy more broadly—a topic that has received surprisingly little attention in social psychology.

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Author Contributions: *Thekla Morgenroth*—Conceptualization | Methodology | Formal analysis | Funding acquisition | Writing – original draft | Visualization | Supervision | Project administration. *Laura Schwab-Reese*—Conceptualization | Methodology | Funding acquisition | Writing – review & editing | Supervision. *Amelia Hartley*—Methodology | Survey programming | Writing – review & editing | Literature search.

Ethics Statement: Research has been approved by Purdue’s IRB (STUDY-IRB-2025-171). Informed consent has been obtained from all respondents prior to their participation in the study.

Data Availability: All materials, as well as databases, syntax, and variable naming codebook can be found on Open Science Framework (see [Morgenroth, 2025](#)).

Supplementary Materials

For this article, the following Supplementary Materials are available:

- Preregistration (see [Morgenroth et al., 2025](#))
- Full materials, data, and analysis code (see [Morgenroth, 2025](#))

Index of Supplementary Materials

Morgenroth, T., Schwab-Reese, L., & Hartley, A. (2025). *Republican vs Democrats - Views on autonomy* [Preregistration]. AsPredicted. <https://aspredicted.org/vchf-6rnc.pdf>

Morgenroth, T. (2025). *Democrats’ and Republicans’ support for women’s and men’s bodily autonomy* [Materials, data, code]. OSF. <https://osf.io/n58dy>

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